



Commonwealth of Massachusetts

Executive Office of Technology Services and Security (EOTSS)

Enterprise Risk Management Office

Compliance Standard

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1. PURPOSE

- 1.1. The purpose of this **standard** is to define the minimum requirements that will ensure that the Commonwealth complies with all relevant legislative, regulatory, statutory, and contractual requirements related to **information** security.

2. AUTHORITY

- 2.1. Pursuant M.G.L. Ch. 7d, the Executive Office of Technology Services and Security, (EOTSS), possess the authority to establish **policies, procedures**, and objectives with respect to activities concerning **information** technology. M.G.L. Ch. 7d provides in pertinent part: “Notwithstanding any general or special law, rule, regulation, executive order, policy or procedure to the contrary, all executive department agencies shall, and other state agencies may, adhere to the policies, procedures and objectives established by the executive office of technology services and security with respect to activities concerning information technology.”

3. SCOPE

- 3.1. This document applies to the use of **information, information systems, assets, applications**, and network resources used to conduct business on behalf of the Commonwealth. The document applies to the Executive Branch including all executive offices, boards, commissions, **agencies**, departments, divisions, councils, and bureaus, hereinafter referred to as Commonwealth Agencies and Offices. Other Commonwealth entities that use or participate in services provided by the Executive Office of Technology Services and Security, (EOTSS), by any form of contractual arrangement, are required to comply with this document, as a condition of use. Commonwealth Agencies and Offices are required to implement **procedures** that ensure their **personnel** comply with the requirements herein to safeguard **information**.

4. RESPONSIBILITY

- 4.1. The Enterprise Risk Management Office is responsible for the development and ongoing maintenance of this **standard**. The Enterprise Risk Management Office is responsible for this **standard** and may enlist other departments to assist in maintaining and monitoring compliance with this **standard**. The owner of this document is the **Commonwealth CISO**, or his or her designee. The **document owner** will review and update this **standard** on an annual basis, or when significant **policy** or procedural changes necessitate an amendment. Questions regarding this document must be submitted to the **document owner** by sending an email to ERM@mass.gov.

- 4.2. Additional **information** regarding this **standard** and its related **policies** and **standards** may be found at <https://www.mass.gov/cybersecurity/policies>.
- 4.3. In the event of any conflict between the provisions contained in this **standard** and the provisions set forth in any of the Enterprise Information Security Policies, the provisions in the Enterprise Information Security Policies will govern.
- 4.4. Definitions of terms in bold may be found in the **IS.Glossary of Terms** at <https://www.mass.gov/cybersecurity/policies>.

5. COMPLIANCE

- 5.1. Compliance with this document is mandatory for the Executive Branch and all Commonwealth Agencies and Offices. Violations are subject to disciplinary action in accordance with applicable employment and collective bargaining agreements, up to and including the termination of their employment and/or assignment with the Commonwealth.
- 5.2. In the event any Commonwealth Agency or Office is unable to comply with any of the requirements of this document, the agency or office must submit an Information Security Policy Non-Compliance Report to the Enterprise Risk Management Office online through ServiceNow, <https://www.mass.gov.service-now.com>.
- 5.3. The Non-Compliance Report will:
 - 5.3.1. Specifically state the reason/cause of the non-compliance
 - 5.3.2. Identify and explain in detail the **risks** created due to the non-compliance
 - 5.3.3. Provide a detailed explanation of the **controls** the agency, or office will implement to mitigate the **risks** to an acceptable level
 - 5.3.4. Specify the time-frame required to implement the **controls** and mitigate the identified **risks**. All Risk Mitigation Plans (RMP) will be for a limited time.
 - 5.3.5. The names and contact information for both the **risk owner** and the **control owner** designated by the agency to accept and manage the **risks** associated with the non-compliance and implement the **controls** that will effectively mitigate the identified **risks**.

6. STANDARD STATEMENTS

- 6.1. Compliance with Policies, Standards, Guidelines and Procedures
 - 6.1.1. The Enterprise Risk Management Office (ERM) will ensure that enterprise security **policies**, **standards**, **guidelines**, and **procedures** (PSGPs) are in

place, communicated, implemented, and enforced. Leading **information** security industry standards and best practices will serve as guidance when developing and updating PSGPs. The **Information Security Team** or Internal Audit will conduct periodic assessments and reviews for compliance with PSGPs

6.1.2. The **Commonwealth Chief Information Security Officer (CISO)**, **Commonwealth Chief Risk Officer (CRO)**, and the EOTSS General Counsel (GC) will be aware of and ensure that all relevant regulatory requirements are met.

6.1.3. The **Commonwealth CISO** and Commonwealth SOC will perform or contract periodic assessments and reviews for compliance with IS PSGPs and applicable regulations.

6.1.4. The **Commonwealth CISO** and **Commonwealth CRO** team will ensure compliance deficiencies identified during compliance reviews are remediated by the responsible Commonwealth Agency or Office. Commonwealth Agencies and Offices will in turn ensure that their **Information Owner** or **Information Custodian** work to remediate and rectify any gaps in compliance.

6.1.5. The **Information Owner**, in collaboration with the Enterprise Security Office (as needed), will complete all regulatory reporting or audits as required. This includes compliance with all relevant Massachusetts laws as well as federal and commercial compliance requirements including Payment Card Industry (PCI), Health Insurance Portability and Accountability Act (HIPAA), Criminal Justice Information Services (CJIS) Security Policy, **federal tax information** (FTI) and others.

6.1.6. Reporting frequency will be strictly observed.

6.2. Reporting Security Incidents and Violations

6.2.1. Commonwealth Agencies and Offices must ensure that Commonwealth **personnel** are responsible for knowing and complying with applicable **information** security requirements.

6.2.2. Commonwealth Agencies and Offices must ensure that potential violations will be reported to an immediate supervisor or to the Enterprise Security Office at [ITD-DL- MassIT - Compliance](#). Failure to report a violation is itself a violation.

6.2.3. **Personnel** who for any reason do not wish to discuss the problem directly may refer their concerns to their Human Resources (HR) representative.

6.2.4. **Personnel** will not be retaliated against for any good-faith complaint or violation report.

6.2.5. **Information** related to **data** breaches, **incidents** and investigations will be managed and communicated in accordance with *IS.020 Information Security Incident Management Standard*.

6.3. Security Compliance Reviews

6.3.1. **Information** security **risks** that could compromise the confidentiality, integrity or availability of the Commonwealth's **information assets** must be identified, analyzed, and mitigated to an acceptable level to meet organizational objectives and compliance requirements.

6.3.2. The Commonwealth will adopt a structured approach for assessing IS **risks**, identifying threats and **vulnerabilities** and implementing mitigation strategies (see *IS.021 Information Security Risk Management Standard*).

6.3.3. The **Commonwealth CISO** will develop, disseminate and review annually a formal documented security review and accountability plan, with specific review and accountability goals, which addresses purpose, scope, roles, responsibilities, management commitment, coordination among organizational entities and compliance; and formal, documented procedures to facilitate the implementation of the review and accountability plan and associated review and accountability **controls**.

6.3.4. **Controls** to safeguard operational systems and audit tools during **information systems** reviews will be implemented.

6.3.4.1. Monitoring on mission-critical or high-**risk** systems must be persistent, and **controls** will be implemented to tamper-proof the supporting **log** collection and analysis mechanisms.

6.3.4.2. The Enterprise Security Office will use **log** harvesting, parsing and alerting tools to help facilitate the identification of **log** events that need to be reviewed (see *Log Review and Reporting* in *IS.011 Logging and Event Monitoring Standard*).

6.3.4.3. Audit **logs** must be retained in accordance with the **log** retention requirements (see *IS.011 Logging and Event Monitoring Standard*).

6.3.5. Review of audit events

6.3.5.1. The Commonwealth will implement hardware, **software**, **applications**, and services that have the capability of creating audit

records containing security events in accordance with logging and monitoring procedures.

6.3.5.2. The Commonwealth SOC, in coordination with the **CISO** and **CRO** will review and update the listing of security events to be audited not less than annually. **Information assets** owned by the Commonwealth that **log** security events will have their security logging capability operational at all times.

6.3.5.3. The Commonwealth SOC, in coordination with the EOTSS and Secretariat Operations teams as appropriate, will employ technology innovation to develop a capability to automate the storage and analysis of security audit records and reduce audit report generation. Audit records for security events of interest based on event criteria will be analyzed by automated systems. The systems will also be able to process ad hoc queries of security events.

6.4. External Attestation of Compliance

6.4.1. The Commonwealth may employ a **third-party** to conduct external attestation or agreed-upon procedure examinations (“Attestation Engagements”) for specific Commonwealth agencies.

6.4.2. Attestation Engagements are designed to provide reasonable assurance that a set of predefined trust principles, which address the **information** security **risks** of functions and processes, are achieved, and that the Commonwealth is equipped to effectively control these **risks** where they may exist in systems.

6.4.3. Attestation Engagements

6.4.3.1. On an annual basis or as a result of a material change to the organization, the **Commonwealth CISO**, in consultation with the CRO, will develop, as part of the annual security plan, a process that initiates independent reviews (e.g., penetration tests, audits and assessments) of **information** security.

6.4.3.2. The **third-party** may evaluate Commonwealth systems based on the following principles and criteria, as applicable:

6.4.3.2.1. Security: the system is reasonably designed and operated to protect against unauthorized access (both physical and logical).

6.4.3.2.2. Availability: the system is reasonably designed and operated to be available for operation and use as committed or agreed.

- 6.4.3.2.3. Processing integrity: the system processing is reasonably designed and operated to be complete, accurate, timely and authorized.
- 6.4.3.2.4. Confidentiality: there are reasonable steps taken to protect confidentiality consistent with applicable Commonwealth **policies** or to which otherwise agreed, including access by **personnel**.
- 6.4.3.2.5. Privacy: where applicable, privacy **policies** and **procedures** are defined and documented.
- 6.4.4. Attestation Engagements will be specific to the Commonwealth agency to be tested and may include different criteria across agencies. The **third-party** will work with Commonwealth agencies individually to determine the appropriate principles and criteria for the specific examination.
 - 6.4.4.1. Prior to undertaking any engagement, all **third parties** must sign confidentiality agreements and agreements covering their services, and steps must be taken by the relevant agencies in accordance with *IS.026 Third Party Information Security Standard* and other criteria the requesting agency may deem necessary.
- 6.4.5. Attestation Engagement testing results will be:
 - 6.4.5.1. Recorded and reported to **Information Owners**, agency management, and as appropriate the Enterprise Risk Management Office, (ERM). The report will include an update on the lifecycle of the mitigation plans for identified **risks**.
 - 6.4.5.2. Maintained consistent with the records retention requirements.
- 6.4.6. Oversight and organization: Commonwealth Agencies and Offices will oversee the schedule of Attestation Engagements for their respective agency, coordinate with the **third-party** to begin relevant engagements and track the progress of engagements as they occur. Results will be reported to the **CISO**, **CRO**, and relevant parties.
- 6.4.7. Engagement scoping: In scoping the engagement, the Commonwealth agency will clearly establish the boundaries of what is to be assessed. As part of the scoping, ownership of each system, function or process under review must be clearly established so the assessment remains in scope and the correct individuals are identified to provide any required **information**. Commonwealth Agencies and Offices must take into account that the results of Attestation Engagements may be for external distribution, unlike internal audits.

6.4.8. Storage and Distribution:

- 6.4.8.1. Commonwealth Agencies and Offices will securely store and maintain the full results of their Attestation Engagements and will securely store and maintain copies of all agency Attestation Engagements.
- 6.4.8.2. The results of external Attestation Engagements may be shared with Commonwealth **stakeholders**, including external entities that wish to gain an understanding and assurance of the security and integrity of the respective agencies and functions, and the efficacy of **controls** in place to reduce **risks**, should they exist.
- 6.4.8.3. Any decision to distribute Attestation Engagements results to external entities must be made in consultation with Legal to address, among other things, any attorney-client privilege protections, and requirements for non-disclosure agreements prior to distributing the results to the requestor.

7. CONTROL MAPPING

Section	NIST SP800-53 R5	CIS 18 v8	NIST CSF
6.1 Compliance with policies, standards, guidelines and procedures		-	PR.AC-1
		-	ID.RA-1
		-	ID.RA-1
		-	PR.AC-1
	PE-8	-	-
		-	-
6.2 Reporting security incidents and violations		-	PR.PT-1
		-	ID.GV-1
	IR-6	CSC 17	RS.CO-2
		-	ID.RA-1
		-	ID.RA-1
		-	ID.RA-1
		-	-
6.3 Security compliance reviews	RA-3	CSC 16	ID.RA-1
	CA-2	-	ID.RA-1
	CA-7	CSC 3	ID.RA-1
		-	ID.RA-1
	AU-6	CSC 8	PR.IP-7
6.4 External attestation of compliance		-	PR.AC-1
		-	PR.DS-5
		-	PR.AC-1
	CA-2	-	ID.RA-1
	CA-7	CSC 3	ID.RA-1

		-	-
		-	-
		-	ID.GV-1
		-	PR.PT-1
		-	PR.PT-1
	AC-20	-	ID.AM-4

8. DOCUMENT CHANGE CONTROL

Version No.	Revised by	Effective date	Description of changes
0.90	Jim Cusson	10/01/2017	Corrections and formatting
0.92	John Merto	01/02/2018	Corrections, Formatting
0.95	Sean Vinck	5/7/2018	Corrections and Formatting
0.96	Andrew Rudder	5/31/2018	Corrections and Formatting
0.98	Anthony O'Neill	05/31/2018	Corrections and Formatting
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1.2	Sean M. Hughes	11/04/2021	Annual Review
1.3	Sean M. Hughes	08/29/2022	NIST 800-53r5 Mapping and Annual Review
1.4	Thomas E. McDermott	11/28/2023	Corrections, formatting, updating and Annual Review
1.4	Anthony O'Neill	11/28/2023	Final Review
1.5	Thomas E. McDermott	11/26/2024	Corrections, formatting, updating and Annual Review
1.5	Anthony O'Neill	11/26/2024	Final Review
1.6	Thomas McDermott	2/10/2025	Updates, Corrections and Formatting
1.6	Miklos Lavicska	2/12/2025	Corrections and Formatting
1.6	Anthony O'Neill	3/10/2025	Final Review