

Tulane University

DEPARTMENT: General Counsel's Office -- HIPAA	POLICY DESCRIPTION: HIPAA Privacy/Security Training – Sanctions for Non-compliance – Covered Entity Staff Employees
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APPROVED: April 7, 2005	REVISED: May 9, 2005
EFFECTIVE DATE: April 1, 2005	POLICY NUMBER: GC-020B

Tulane University HIPAA Privacy/Security Training – Sanctions for Non-compliance

SCOPE OF POLICY

This policy applies to Tulane University Medical Group and all University employees and business units who provide management, administrative, financial, legal, and operational support to or on behalf of Tulane University Medical Group and have been designated as part of the Tulane University HIPAA Health Care Component.

STATEMENT OF POLICY

HIPAA Training will be provided to all of the Tulane University Health Care Component staff. All members of the Tulane University Health Care Component staff are to participate in the training on the privacy policies and procedures within a reasonable time upon initiation of their employment by Tulane University, and, thereafter, upon any material change in the HIPAA regulations. Any employee who violates this by not attending the required training will be subject to sanctions. For purposes of this policy, the sanctions to which the Covered Entity Staff employees who provide support to the Tulane University Medical Group (TUMG) are subject, as established by the HIPAA Steering committee, are outlined below.

IMPLEMENTATION

1. New Staff employees of Covered Entity departments who are required to obtain HIPAA Training, as described above, are required to complete this training within the first 30 days of employment by Tulane. The Departmental Chairman, or his/her designee, is responsible for ensuring that each new employee is made aware of his/her responsibility for obtaining this training and given the opportunity to do so. Any extenuating circumstances must be reported, in writing, to the Privacy Official.
2. Federal guidelines for information included in HIPAA training will change periodically, and employees who have been trained on older HIPAA regulations must receive the new training. Covered Entity department Staff employees whose date of employment with Tulane is prior to March 1, 2005 must have completed the HIPAA Training (updated version implemented in April 2004) prior to April 1, 2005, or the employee will be subject to sanction, as described below. Any existing employee who is not in compliance with this policy as of April 1, 2005 has fourteen (14) calendar days from the date of notification of non-compliance from the Privacy Official to obtain the required training without being subject to sanction; new employees will be subject to sanction if they have not completed the HIPAA requirement by the end of their first thirty (30) calendar days of employment. The Privacy Official will send copies of this notification to the Department Administrator, Department Chairman, and Human Resources.
3. HIPAA-applicable employees who fail to fulfill the HIPAA Training requirements, as described above, will not receive the next annual compensation increase for which they are eligible.
4. The Privacy Official will forward a letter advising any employee who fails timely completion of the appropriate HIPAA training that he/she has been sanctioned for non-compliance with the terms of this policy, and a copy will be sent to the Department Administrator, the Department Chairman, the Senior Vice President

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for Health Sciences (Chairman of the HIPAA Steering Committee), Human Resources (for inclusion in the employee's Personnel record), and the Budget Director, Institutional Planning – Budget.