

 <p>GEORGIA DEPARTMENT OF COMMUNITY HEALTH</p>	<p>Policy Number: 912</p> <p>Effective Date: April 14, 2003</p> <p>Revision Date:</p>
<p>Privacy Policy</p>	<p>Training</p>
<p>Originating Work Unit: Privacy Office</p>	<p>Category: Legal Compliance / Human Resources</p>

SCOPE:

This policy applies to all DCH employees that perform duties in conjunction with the access, distribution, dissemination, modification and management of protected health information.

POLICY:

It is DCH's policy to ensure compliance with the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule by establishing a Training Program for HIPAA Privacy Awareness, to include an initial overview in privacy and HIPAA, specific training in DCH policies and procedures applicable to the employees' work functions, routine refresher modules, retraining as needed and accountability for compliance.

REPORTING VIOLATIONS:

Violation of this or any other DCH Privacy Policy is to be communicated to the Privacy Officer.

LEGAL AUTHORITY:

45 C.F.R. §164.530(b) Administrative requirements. Standard: training

SANCTIONS:

DCH will apply appropriate sanctions against members of its workforce who fail to comply with the DCH privacy policies and procedures or with the requirements of the regulations. Sanctions will be appropriate to the nature of the violation. Sanctions could range from warning to termination of employment with DCH.

 <p>GEORGIA DEPARTMENT OF COMMUNITY HEALTH</p>	<p>Procedure Number: 912 Effective Date: April 14, 2003 Revision Date:</p>
<p>Privacy Procedures</p>	<p>Training</p>
<p>Originating Work Unit: Privacy Office</p>	<p>Category: Legal Compliance / Human Resources</p>

PURPOSE

DCH will train all members of its workforce on its Privacy Policies and Procedures as necessary and appropriate for them to carry out their function within the Department.

PROCEDURE:

Specific components of the privacy training procedures include the following:

The content of the mandatory training will include a review of Georgia's Public Records Act and its exceptions, Medicaid confidentiality regulations, the HIPAA Privacy Rule and DCH privacy policies and procedures concerning minimum necessary, safeguards of protected health information, authorization, verification of identity, sanctions and complaints.

- Mandatory training in privacy policies and procedures was required for each member of DCH's workforce no later than April 14, 2003.
- New DCH employees will be provided training within a reasonable time.
- Training will be provided to each member of DCH's workforce whose functions are affected by a material change in policies and procedures within a reasonable period of time after the material change becomes effective.
- DCH will document that the training has been provided, in written or electronic form.
- Training documentation will be retained for six (6) years.
- DCH will expect all Business Associates to follow consistent privacy practices and training programs for employees. DCH may include a training requirement in Business Associate contracts as an additional means of protecting individuals' health information.

REPORTING VIOLATIONS:

Violations and failures to comply with the mandatory privacy training should be reported to the DCH Privacy Officer.

Training – Procedures – Page 2

LEGAL AUTHORITY:

45 C.F.R. §164.530(b) Administrative requirements; Standard: training

SANCTIONS:

DCH will apply appropriate sanctions against members of its workforce who fail to comply with the DCH privacy policies and procedures or with the requirements of the regulations. Sanctions taken by HHS in enforcement against DCH are a separate matter.

Sanctions will be appropriate to the nature of the violation. For example, the type of sanction will vary depending on factors such as the severity of the violation, whether the violation was intentional or unintentional, and whether the violation indicated a pattern of improper use or disclosure of protected health information. Sanctions could range from warning to termination of employment with DCH.

Sanction policies will be documented so that employees are aware of what actions are prohibited and punishable. Training will be provided and expectations will be clear so individuals are not sanctioned for doing things that they did not know were inappropriate or wrong.