HIPAA Privacy and Data Security Training

**Policy:** It is the policy of the University of Connecticut to ensure that members of its HIPAA-hybrid and all of those otherwise covered by the *UConn HIPAA Privacy & Security Practices Manual* receive appropriate training regarding the privacy, data security and breach provisions of HIPAA.

**Rationale:** The purpose of this policy is to identify the mechanism by which appropriate University faculty, staff, students, volunteers and affiliates receives education and training, both initial and ongoing, on HIPAA regulations and University organizational policies related to privacy and security of protected health information (PHI).

**POLICY:**

1. All persons covered by the provisions of this *UConn HIPAA Privacy & Security Practices Manual* and as outlined in the HIPAA Hybrid Designation Policy shall be trained on the HIPAA privacy, security and breach regulations, including University policies and applicable procedures.
2. Training content shall be selected and implemented by the HIPAA-Covered Components Directors in conjunction with the Chief Information Security Officer (CISO) and the University’s Privacy Officer.
3. The HIPAA-Covered Components shall be responsible for ensuring that all members of their unit complete the training in a timely manner.
4. New employees who are required to complete the training will do so during standard orientation period, and shall complete the training prior to being granted access to PHI.
5. Current employee whose role changes to include access to PHI shall complete the training prior to being granted access to PHI.
6. Thereafter, annual refresher training shall be provided to all individuals covered by the provisions of the *UConn HIPAA Privacy & Security Practices Manual*.
7. In addition to the initial and refresher trainings, when significant changes in policy and/or procedure occur, the affected workforce will be trained as soon as possible after the changes.
8. Training completion shall be documented in written or electronic form and retained for a minimum of six (6) years.

**Reference:**

§164.530 (b) Health Insurance Portability and Accountability Act of 1996
§164.308 (a)(5)(i) Health Insurance Portability and Accountability Act of 1996