HIPAA Training for UNC Health Workforce

APPLICABILITY:

This policy applies to the following entities (collectively referred to as "UNC Health" in this policy):

| ✓ UNC Health Care System / UNC Medical Center*          | ✓ Johnston Health                               |
| ✓ UNC Physicians Network                                | ✓ Lenoir Memorial Hospital                      |
| ✓ UNC Physicians Network Group Practices / UNC Physicians Group Practices II | Margaret R. Pardee Memorial Hospital            |
| ✓ Rex Healthcare / Rex Hospital                         | ✓ Nash Healthcare System/Nash Hospitals         |
| ✓ Chatham Hospital                                      | ✓ Wayne Memorial Hospital                       |
| ✓ Caldwell Memorial Hospital                            |                                                    |
| ✓ UNC Rockingham Health Care / UNC Rockingham Hospital  |                                                    |

*UNC Medical Center includes all UNC Hospitals’ facilities and the clinical patient care programs of the School of Medicine of UNC-Chapel Hill (including UNC Faculty Physicians).

I. Description

UNC Health shall ensure the training of all members of its workforce, including all staff (full and part-time), volunteers and interns (both paid and unpaid) on the UNC Health Privacy Policies and associated privacy program requirements and processes ("HIPAA Training").

Included within the scope of this policy are the patient care programs of the UNC School of Medicine (UNC SOM). As a result, this policy shall apply to all UNC SOM personnel, including but not limited to faculty, staff, students, trainees, interns and volunteers who may be full-time, part-time, paid or unpaid who create, store, transmit, access or use any patient information in support of clinical purposes for UNC Health or any other healthcare entity.

II. Policy

A. Applicability of Training Policy to Each UNC Health Facility.
1. **UNC Health.** UNC Health workforce shall be trained on the UNC Health Privacy Policies according to the requirements set forth in this policy.

2. **UNC Health Managed Members.** Each UNC Health Managed Facility shall be responsible for training its workforce on the UNC Health Privacy policies according to the requirements set forth in this policy.

UNC Health Managed Facilities – **who have not adopted the UNC Health HIPAA Policies (or have adopted them in part)** shall remain responsible for training its workforce on its own facility HIPAA policies to the extent that those policies materially differ than those of UNC Health as set forth according to the conditions set forth in this policy. However, any UNC Health Managed Facility may rely on the UNC Health on-line HIPAA Training offered to all UNC Health workforce in satisfaction of HIPAA its own HIPAA training requirements – subject to further training deemed appropriate by the Managed Facility on its own local facility policies.

**B. Deadline for New Workforce Members for all UNC Health Member Facilities to Complete HIPAA Training After Hire.**

1. Each individual newly joining the workforce of any UNC Health Member Facility shall complete HIPAA Training within thirty (30) days after such individual joins the workforce.

2. Workforce members who fail to complete the HIPAA Training within thirty (30) days after their date of hire:
   a. May have access to hospital and other computer systems containing PHI suspended with access restored only upon completion of the HIPAA Training;
   b. Shall be subject to discipline - See Section F. Below.

**C. Contracted Entities.** Contracted entities who provide a service for or on behalf of a UNC Health facility pursuant to a Business Associate Agreement in which such service requires that individuals affiliated with the third party become part of that UNC Health Facility's workforce must ensure that such individuals complete UNC Health HIPAA training prior to starting such services (or the applicable UNC Health Member Facility's training as applicable).

Note: The following individuals shall not be considered UNC Health workforce:

1. Certain temporary visitors (as opposed to observers & shadowers – who do complete UNC Health approved training);
2. Visiting scholars or residents;
3. Governmental or other regulatory personnel such as investigators or auditors;
4. Contractors on-site who perform limited, supervised and temporary services (for which a Business Associate Agreement is sufficient).

[When applicable, the UNC Health Supply Chain Office shall be responsible for incorporating contractual requirements requiring the completion of UNC Health HIPAA training (and other related requirements) into any agreement with a third party in which the third party's employees become workforce of UNC Health or any UNC Health Facility.]

**D. Material Change(s) in Policies Requiring Re-Training.** Each member of the workforce whose functions are affected by a material change in the UNC Health HIPAA policies or procedures must complete updated training with respect to the change within a reasonable time after the material change becomes
E. **Continued Training for Workforce.** UNC Health Facilities shall ensure that their respective workforce members receive periodic refresher HIPAA Training as directed by the UNC Health Privacy Office.

F. **Public Health Emergency**

1. UNC Health entities may offer temporary flexibilities to extend the timeline for new employees to complete the HIPAA Training (e.g., 60 days of hire) as well as the entity’s mandatory periodic HIPAA training. Changes to training deadlines must be appropriately communicated to Employees and agreed upon by appropriate stakeholders (e.g., Human Resources, Learning and Organizational Development, module owners, etc.).

G. **Corrective Action for Failure to Timely Complete Mandatory Periodic HIPAA Training.** In addition to the information included below, please review the UNC Health Corrective Actions policy, UNC Health Probationary Employment policy, UNC Health Sanctions of Violations of Privacy Policies policy, and applicable UNC Health network entity policies for implementation details.

1. **Workforce Members without a Contract or Employment Agreement.** Workforce members who are non-compliant with mandatory periodic HIPAA training requirements by the applicable deadlines will be subject to the following corrective action process relative to the completion deadline for any outstanding HIPAA training, with deadline adjustments for approved leaves of absence (as described below).

   a. **Key Point:** for failure to complete HIPAA training by the applicable deadline:

      i. **Workforce members to whom corrective action policies apply** (including the UNC Health Corrective Actions policy and the UNC Health Sanctions of Violations of Privacy Policies policy) will receive the next level of corrective action (minimally written warning) for personal conduct.

      ii. **Workforce members to whom corrective action policies do not apply** (including but not limited to: *Per Diem* Employees, Probationary Employees, Unclassified State Employees, and Management-Level Employees (including applicable physicians and advance practice providers)) will receive a written counseling for non-compliance, which may be considered in the workforce member’s performance evaluation. Workforce members will be termed if still non-compliant by the 15th calendar day after the deadline.

   b. **Key Point:** Workforce members who do not complete outstanding compliance training within fourteen (14) days following the applicable HIPAA training deadline are subject to termination on the 15th calendar day after the deadline.

      i. During the fourteen (14) calendar days following the compliance training deadline, workforce members will be permitted to complete any outstanding HIPAA training during work hours in order to avoid termination. The applicable supervisor or designee will review this policy with the employee as part of the corrective action process.

      c. The Privacy Officer will be informed of corrective action issued and will receive updates when workforce members who were non-compliant with HIPAA training requirements complete their training.

      d. Failure to complete HIPAA training by the assigned deadline, as well as any corrective action
issued, will be noted in the workforce member’s record.

2. **Employees with a Contract or Employment Agreement.** Corrective action for failure to timely complete required HIPAA training will be applied as described above unless otherwise specified in the workforce member’s contract or employment agreement.

H. **Approved Leaves of Absence.** If a mandatory periodic HIPAA training deadline occurs when a workforce member (with outstanding HIPAA training) is on an approved leave of absence (e.g., military, FMLA, or disability), the workforce member’s deadline for that outstanding HIPAA training will be adjusted to thirty (30) calendar days from the day the workforce member returns to work. If the workforce member has outstanding HIPAA training after the leave-adjusted deadline has passed, the workforce member is subject to the corrective action scheme described above, relative to the adjusted HIPAA training deadlines.

I. **Training Documentation:** Each UNC Health Facility shall retain documentation of training of all of its workforce members for a period not less than six (6) years from the date of the completion of the training.

### III. Definitions

**Workforce** - means employees, including temporary agency or contract employees, health care professionals, including faculty, medical students and interns, volunteers, trainees, and other persons whose conduct, in the performance of work for UNC Health is under the direct control of UNC Health, whether or not they are paid by UNC Health.

### IV. References

45 C.F.R. §§ 164.308(a)(5), 164.530(b)

### V. Related Policies/Forms

- UNC Health [Business Associates Policy](#)
- UNC Health [Corrective Actions Policy](#)
- UNC Health [Employee Compliance Education Policy](#)
- UNC Health [Probationary Employment Policy](#)
- UNC Health [Sanctions of Violations of Privacy Policies](#)

### Attachments

No Attachments

### Approval Signatures

<table>
<thead>
<tr>
<th>Step Description</th>
<th>Approver</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Jerylyn Williams: Chief Audit &amp; Compliance Ofcr</td>
<td>08/2020</td>
</tr>
<tr>
<td>SYSTEM Site Administrator</td>
<td>Emilie Hendee: HCS Attorney Sr</td>
<td>08/2020</td>
</tr>
</tbody>
</table>
### Applicability

Caldwell Memorial Hospital, Chatham Hospital, Johnston Health, Nash UNC Health Care, UNC Health Care System, UNC Lenoir Health Care, UNC Medical Center, UNC Physicians Network, UNC Rex Healthcare, UNC Rockingham Health Care, Wayne Memorial Hospital