**What you should know about HIPPA Privacy Rule training**

The Health Insurance Portability and Accountability Act of 1996 (HIPPA) was enacted on August 21, 1996. HIPPA required the Department of Health and Human Services (HHS) to issue privacy regulations covering individually identifiable health information, in lieu of Congress taking action. HHS published the final rule, the Privacy Rule, on August 14, 2002.

The Privacy Rule applies to health plans, health care clearinghouses, and to any health care provider that transmits an individual’s health information in electronic form in connection with transactions covered by HIPPA. These are designated “covered entities.”

A “business associate” is a person or organization, outside of a covered entity’s workforce, that performs certain functions on behalf of a covered entity. A covered entity can be a business associate of another covered entity. A business associate could be a CPA law firm; an attorney providing legal services; a consultant that perform utilization reviews for a hospital; and services include claims processing, billing, data analysis, practice management, and quality assurance.

A third type of business is covered by the HIPPA Privacy Rule—“hybrid entities.” A covered entity that is a single legal entity and that conducts both covered and non-covered functions, can elect to be a hybrid entity. The covered entity must designate in writing its operations that perform covered functions as one or more “health care components.” After making this designation, most of the requirements of the Privacy Rule will apply only to the health care component. A covered entity that does not make this designation is subject to the entirety of the Privacy Rule.

Costs can mount up fast for entities in violation of the Privacy Rule. The managed care company WellPoint, Inc. agreed to pay the HHS $1.7 million in 2013 to settle potential violations relating to a security weakness in an online application database that left the electronic protected health information of 612,402 individuals accessible to unauthorized individuals over the Internet for a period of five months, according to an HHS press release.

Shasta Regional Medical Center in California agreed to a $275,000 monetary settlement with the HHS after senior leaders of the medical center shared with the media on at least three separate occasions medical services provided to a patient, according to an HHS press release. Senior management impermissibly shared details about the patient’s medical condition, diagnosis and treatment in an email to the entire workforce.

As part of the settlement agreement with the HHS, this covered entity agreed to train its workforce members.

**Training requirements**

For internal uses, a covered entity must develop and implement policies and procedures that restrict access and uses of protected health information. Required training is based on the specific roles of the members of their workforce. Persons or classes of persons in the workforce who need access to protected health information to carry out their duties, must be identified in the policies and procedures.

Covered entities, business associates, and hybrid entities all must train their employees on at least an overview of both privacy and security aspects of HIPPA and the Privacy Rule. Employees must understand how their day-to-day activities are affected by the federal law.

Online courses are popular for these employees, who are primarily office workers. Online offerings are tailored for covered entities, business associates, and hybrid entities, and are accessible 24/7. Online training allows office and hospital workers to training by themselves, when it is convenient, at a pace adjusted to their learning skills. It can be difficult to carve out training time in the hectic atmosphere of physicians’ offices, group practices, hospitals, clinics and surgical centers.

Online training allows for the tracking of an employee’s progress, acquired knowledge, and test scores. It is important training courses for HIPPA teach each employee exactly what they need to know, based on their roles and access or non-access to health information. HIPPA and the Privacy Rule contain many complexities about general principles for uses and disclosures; permitted uses and disclosures; consent patient agreements and authorizations; incidental use and disclosure; disclosures relating to victims of abuse, neglect and domestic violence; disclosures for law enforcement purposes; decedents; cadaveric, organ, eye or tissue donation; serious threats to health or safety; research; limited data sets; and disclosure of psychotherapy notes.

Workforce members who must be trained include employees, volunteers, trainees, and may also include other persons whose conduct is under the direct control of the entity (whether or not they are paid by the entity). All workforce members must receive training on the entity’s policies and procedures, as is necessary for them to carry out their functions.