

# HIPAA Education and Training Requirements

HIPAA P-09



## About This Policy

**Effective:** 07/01/2015

**Last Updated:** 04/04/2025

**Responsible University Office:**

Office of the Chief Privacy Officer

**Responsible University Administrator:**

Chief Privacy Officer

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**Policy Contact:**

HIPAA Privacy Officer

HIPAA Security Officer

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## Scope

This policy applies to the workforce members in the designated Indiana University (IU) HIPAA Covered Healthcare Components and Critical Health Data Areas, anyone rendering services as a Business Associate, and anyone who creates, receives, maintains, or transmits Protected Health Information (PHI) in any capacity at IU, including, but not limited to, faculty, staff, students, trainees, volunteers, visiting scholars, and third-party agents. For the purposes of this policy, all of the above will be referred to as workforce members.

## Policy Statement

- A. Workforce members of the IU Critical Health Data Areas and covered healthcare components shall be trained on policies and procedures required by the HIPAA Privacy and Security Rules so that each person is able to carry out his or her duties in compliance with IU's policies, HIPAA and changes promulgated under the HITECH Act.
- B. Training shall include information about applicable federal and state regulations regarding the privacy, security, and confidentiality of individually identifiable health information.
- C. Training shall be provided for workforce members of each IU Critical Health Data Areas and covered healthcare components upon initial employment, volunteer work, student orientation, or third-party contract, and annually thereafter or upon material changes to any university or areas' policies and procedures regarding the privacy, security and confidentiality of individually identifiable health information. Training may also be required as part of a corrective action plan.
- D. The University HIPAA Privacy and Security Officers will develop and provide basic HIPAA Privacy and Security training for workforce members of the designated IU Critical Health Data Areas.
- E. The University HIPAA Privacy Officer will ensure training materials are updated to reflect changes in university policies and procedures and regulatory changes as necessary.
- F. The HIPAA Liaisons will compile and maintain a list of new and current workforce members who require HIPAA training.
- G. The HIPAA Liaisons are responsible for documenting training compliance for workforce members in a manner and frequency established by the University HIPAA Privacy Officer. Written documentation of training must be retained for a period of six years from the date of its creation.

## Reason for the Policy

Indiana University has responsibility under the HIPAA Privacy and Security Rules for providing and documenting training for university workforce members who access protected health information. This policy describes the training requirements for workforce members in the IU Critical Health Data Areas.

## Definitions

See [Glossary of HIPAA Related Terms](#) for complete list of terms.

## History

07/01/2015 – Effective Date

10/13/2015 – Updated scope to reflect anyone who works in an IU Critical Health Data Area

08/01/2016 – Added link to Glossary, removed bad links

06/xx/2017 – Published on University policy site

12/20/2021 – Updated policy contacts

04/07/2025 – Updated the term "HIPAA Affected Areas" to "Critical Health Data Areas"

## Related Information

### HIPAA Privacy Rule

45 CFR 164.530(b)

45 CFR 164.530(j)