

**THE TEXAS A&M UNIVERSITY SYSTEM
HEALTH SCIENCE CENTER INTERNAL POLICIES**

16.99.99.Z0.06 Training Sanctions for Non Compliance Internal Policy

Approved January 26, 2011

1. GENERAL/OVERVIEW

This policy applies to TAMHSC health care providers, its participating physicians and clinicians, employees and business units who provide management, administrative, financial, legal, and operational support to or on behalf of the health care provider and has been designated as a member of the TAMHSC Health Care Component. This policy pertains to protected health information covered by the TAMHSC Health Care Component's Notice of Privacy Practices.

2. INTERNAL POLICY/RESPONSIBILITIES

Trainingⁱ will be provided to all personnel of the TAMHSC Health Care Component, including employees, volunteers, participating physicians, residents, clinicians and volunteers in accordance with HIPAA regulations and A&M System Policy 33.05 Employee Training and 33.05.02 Required Employee Training.

3. PROCESS

All personnel of the TAMHSC Health Care Component shall complete the TAMHSC HIPAA training program during employee orientation or before providing health care services. Any employee who violates this by not completing the required training will be subject to sanctions in accordance with and A&M System Policy 33.05 Employee Training and 33.05.02 Required Employee Training, and as established by the TAMHSC HIPAA Compliance Committee.

- 3.1. The Privacy Officer, or designee, is responsible for providing HIPAA training to TAMHSC Health Care Component personnel.
- 3.2. The Privacy Officer or designee is responsible for monitoring HIPAA training programs for compliance.
- 3.3. New TAMHSC Health Care Component personnel are expected to complete this requirement during employee orientation or before providing health care services and each year thereafter. Any extenuating circumstances must be reported, in writing, to the Privacy Officer.

- 3.4. New TAMHSC Health Care Component employees who have not completed the training before providing health care services and each year thereafter will be subject to further disciplinary action.
- 3.5. TAMHSC Health Care Component employees who have not completed the required annual training shall not be considered for compensation increases.
- 3.6. The Privacy Officer will monitor TAMHSC Health Care Components and notify the TAMHSC President and Vice Chancellor of Health Affairs, Texas A&M System of non compliance.

4. VIOLATIONS

The Privacy Officer has general responsibility for implementation of this policy. Employees who violate this policy will be subject to disciplinary action up to and including termination of employment. Anyone who knows or has reason to believe that another person has violated this policy should report the matter promptly to his or her supervisor or the Privacy Officer. All reported matters will be investigated, and, where appropriate, steps will be taken to remedy the situation. Where possible, every effort will be made to handle the reported matter confidentially. Any attempt to retaliate against a person for reporting a violation of this policy will itself be considered a violation of this policy that may result in disciplinary action up to and including termination of employment.

OFFICE OF RESPONSIBILITY

Vice President of Finance and Administration

¹ HIPAA Code: §164.530(e)(1)