

**EMPLOYEE GROUP INSURANCE
TREATMENT OF PROTECTED HEALTH INFORMATION**

Section 8.2: Training	Page: 1 of 2
Effective Date: April 14, 2003	

POLICY

All EGI staff and members of the staff of any office identified as part of the Health Care Components providing covered functions on behalf of EGI as a Covered Entity (Staff) shall receive training on EGI's privacy policies and procedures with respect to PHI as necessary and appropriate to carry out their functions for EGI.

8.2(1) Responsibility for Training.

The Director, in consultation with the Privacy Officer, shall have the responsibility for training all Staff regarding EGI's privacy policies and procedures, which responsibility involves discretion concerning the following:

- a. the policies and procedures to be addressed for each category of Staff and the frequency;
- b. the appropriate personnel who may be assigned responsibility for conducting or overseeing privacy training;
- c. the methods and materials used to provide privacy training (tailored to the nature of the trainee's contact with PHI), such as traditional classroom lectures, video presentations, interactive software, role-playing, case studies, seminars and discussions; and
- d. the use of competency tests to evaluate training effectiveness.

8.2(2) Initial Training.

Initial training for all Staff shall take place prior to April 14, 2003. Any new Staff member shall receive training within a reasonable period of time after the person is hired but before the person shall be allowed to Use or Disclose PHI without direct supervision.

8.2(3) Additional Training.

In the event of a material change in EGI's privacy policies and procedures, the Director shall ensure that those Staff members whose functions are affected by the material change receive additional training concerning the change within a reasonable period of time after the change becomes effective.

8.2(4) Documentation of Training.

EGI shall document the training of each member of its workforce. Upon completing the initial privacy training (or as otherwise required by the Privacy Officer), Staff must sign a form “Health Information Confidentiality Agreement”, a copy of which is attached in the Appendix to this Manual, by which such Staff shall attest that he or she is aware of and agrees to EGI’s privacy policies and procedures and that he or she has completed privacy training. All such documentation shall be retained in accordance with Section 9.2 of this Manual.

REFERENCES/CITATIONS

45 C.F.R. § 164.530(b)

65 Fed. Reg. at 82,561, 82,745 (Dec. 28, 2000); 67 Fed. Reg. at 53,253 (Aug. 14, 2002)