

Texas Tech University Health Sciences Center El Paso HIPAA Privacy Policy

Policy: Privacy Training and Education	Policy #: HPP 1.4
Effective Date: July 10, 2010	Last Revision Date: January 27, 2026
References: https://www.hhs.gov/ocr/index.html	
TTUHSC EL PASO HIPAA Privacy and Security Website: https://my.ttuhsc.edu/elpaso/hipaa/	

Policy Statement

This policy establishes HIPAA privacy training standards for Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) workforce members in accordance with the requirements of the Health Insurance Portability and Accountability Act (HIPAA) and other state and federal laws governing the protection and confidentiality of patient Protected Health Information.

Scope

This policy applies to all TTUHSC El Paso workforce members. This policy does not apply to TTUHSC El Paso business associates, as that term is defined in [45 CFR 160.103](#).

Workforce Member. TTUHSC El Paso workforce member means employees, residents, students, volunteers, and other persons whose conduct, in performance of work for TTUHSC El Paso, is under the direct control of TTUHSC El Paso, whether or not they are paid by TTUHSC El Paso. It does not include business associates or their employees and agents. See [45 CFR 160.103](#).

Policy

All TTUHSC El Paso workforce members must complete initial and refresher HIPAA privacy training and education as outlined in this policy.

1. General.

- a. **Training Materials.** The Institutional Privacy Officer (IPO) is responsible for developing and/or approving the HIPAA privacy training materials necessary to satisfy the training requirements outlined in this policy.
- b. **Training Modalities.** Various methods may be used to deliver HIPAA Privacy training, including, but not limited to, live, videotape, internal/external web-based sessions, e-mail, memorandum, newsletters, or any combination thereof. The IPO and/or their designees shall provide any live HIPAA Privacy training provided under this policy.
- c. **Tracking.** Tracking completion of training will be monitored periodically with reminders sent to the workforce member and/or supervisor.
- d. **Supervisors/Directors.** It is the responsibility of the supervisor/director of each TTUHSC El Paso department to ensure the workforce members under their supervision timely completes the HIPAA privacy training required under this policy.

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2. Training.

- a. **New Workforce Members.** All new TTUHSC El Paso work force members shall complete HIPAA Privacy Training within 30 days of assignment of the training and shall sign the Confidentiality Agreement, Attachment B of TTUHSC El Paso OP 52.09, https://elpaso.ttuhscc.edu/opp/_documents/52/op5209.pdf. Current Workforce Members. All current workforce members are required to complete refresher training annually within 90 days from the date assignment.
- b. **TTUHSC El Paso Research.** All TTUHSC El Paso clinical researchers, co-investigators and research staff must complete the HIPAA Privacy module contained within the Collaborative IRB Training Initiative (CITI), Protection of Human Research Subjects administered by the University of Miami. This training may be in addition to any other HIPAA privacy training that is required to be completed by TTUHSC El Paso workforce members.
- c. **Additional Training.** The IPO may require TTUHSC El Paso workforce members to complete additional HIPAA privacy training to address non-compliance and /or minimize the risk of future non-compliance.

3. Response to Non-Compliance.

- a. Failure to complete the mandatory annual education within the time frames outlined above will be reported to the individual's supervisor and/or chair for corrective action, including disciplinary action, as applicable in accordance with HSCEP OP 70.31, Employee Conduct, Discipline and Separation of Employees. http://elpaso.ttuhscc.edu/opp/_documents/70/op7031.pdf
- b. Non-compliance with this policy may be reported to the TTUHSC El Paso Privacy and Security Committee and/or Institutional Compliance Committee as appropriate for further corrective action.

Knowledge of a violation or potential violation of this policy must be reported directly to the institutional privacy officer or the Fraud and Misconduct hotline at (866) 294- 9352 or www.ethicspoint.com under Texas Tech University System.

Frequency of Review

This policy will be reviewed on each even-numbered (ENY) by the Institutional Privacy Officer, and the HIPAA Privacy and Security Committee, but may be amended or terminated at any time.

Questions regarding this policy may be addressed to the Institutional Privacy Officer or Institutional Compliance Officer.

Review Date: 1/16/2026

Revision Date: 10/30/2015, 7/19/2016, 9/18/2018, 1/25/2022, 1/23/2024, 1/27/2026