



HIPAA Security Rule

Tulane University Workforce Clearance Procedure

Department: Technology Services	Policy Description: Workforce Clearance Procedure (A)
Standard: Workforce Security	Section: 164.308(a)(3)
Approved: April 19, 2005	Revised:
Effective Date: April 20, 2005	Policy Number: TS-7

PURPOSE

The purpose of this policy is to implement procedures to ensure that an individual workforce member's access to e-PHI is appropriate.

SCOPE

This policy applies to Tulane University Medical Group, its participating physicians and clinicians, and all University employees and business units who provide management, administrative, financial, legal, and operational support to or on behalf of Tulane University Medical Group and have been designated as part of the Tulane University HIPAA Health Care Component.

POLICIES AND PROCEDURES

Tulane University requires that effective personnel screening processes be applied during the hiring process ranging from minimal procedures to more stringent procedures, based on the results of the **Risk Analysis**. The Security Officer or department head identifies and defines the access to e-PHI required for each defined organizational position, as well as whether the position involves the ability to modify e-PHI. The extent of the clearance procedure depends on the level of access to e-PHI that is required.

As part of the hiring process, application and resume information must be validated. This includes validation of information such as:

- Whether the applicant actually worked for the business during the time period identified in the resume
- Whether the applicant has the academic credentials they claim to have
- Whether the applicant has received the recognition/awards they claim to have

All workforce members with access to e-PHI or to areas where e-PHI may be accessed must sign confidentiality agreements in which they agree not to provide e-PHI to or to discuss confidential information with unauthorized individuals. New hires must sign also a "Conditions of Employment" document stating their commitment to and understanding of their responsibilities for the protection, integrity and availability of e-PHI, including sanctions that will be applied if they do not fulfill such responsibilities.

Tulane University's contracts with job agencies state the agency's responsibilities, if any, for reviewing the background of any candidate referred to Tulane University.

RESPONSIBILITIES:

The Security Officer is responsible for ensuring the implementation of the requirements of the **Workforce Clearance** procedure.

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 Security 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.

IMPLEMENTATION SPECIFICATION:

§ 164.308 Administrative safeguards.

(a) A covered entity must, in accordance with § 164.306:

(3)(i) Standard: **Workforce security**. Implement policies and procedures to ensure that all members of its workforce have appropriate access to electronic protected health information, as provided under paragraph (a)(4) of this section, and to prevent those workforce members who do not have access under paragraph (a)(4) of this section from obtaining access to electronic protected health information.

(ii) Implementation specifications:

(B) **Workforce clearance procedure** (Addressable). Implement procedures to determine that the access of a workforce member to electronic protected health information is appropriate.