

Acknowledgement of Receipt

I have reviewed the PowerPoint presentation on *HIPAA Compliance* and understand how to safeguard Protected Health Information (PHI) from any intentional or unintentional unauthorized use or disclosure. All questions and/or concerns have been addressed and explained to my satisfaction. I understand that I still must satisfy the HIPAA Training requirements via My Workspace once access is given.

Print Name			
Signature			
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Date			

Reviewed: February 2025