

1. From www.learn.dhss.alaska.gov,

#### Create a new account: Is this your first time here? Log in **To Access Training:** Username Create a new account via the button below click "Create new account" (highlighted in Password For Technical Assistance: Log in Printable Login Instructions Or email Debbie McDonald Forgotten your username or password? Create new account Cookies must be enabled in your browser **RETURNING STUDENTS** As soon as you login you will be taken directly to your profile. Due to additional reporting requirements, we are now required to collect new information about our students. New account

### 2. Create new account:

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- Type a username for the account (lowercase) a. Add password. (Password must be 7 characters long: 1 b. upper, 1 lower, 1 special character and 1 number).
- Type your email address. c.
- Re-type your email address. d.
- Add first name As you would like it to appear on your e. certificate.
- Add last name As you would like it to appear on your f. certificate
- Add your business address g.
- Add your city h.
- ί. Add your state
- Add zip j.
- Add business telephone k.
- Employer or Business Name. Name of your employer .
- Add your Job Title m.
- Profession. Select the profession closest to the field you n. work in. Use the Medical Specialty field below to expand.
- Medical Specialty. Expand on the profession selected above. 0. For example: Psychiatrist, director, administrator, surgeon, instructor, chief, owner, retired, student, volunteer or other profession not listed.
- D. Medical credentials or degree. Please use all caps and no abbreviation.

User	rname!
	The password must have at least 6 characters, at least 1 digit(s).
Pas	isword+ Unmask
- More details	
Email a	ddress*
Email (	(again)+
First name (as you would li appear on your certi	ike it to
Last	name*
- More User Informat	ion
Business Ad	ddress*
	City*
•	State* Alaska
	Zip*
Telephone (Just numb di	bers, no ashes)*
Employer or Business	Name*
ol	b Title+
Prof	ession* Choose 🗹 n.
Medical Specialty (Ex: Pedia Psychiatrist, Surgeor	n, N/A)*
Medical Credentials or Deg MD, DO, NP, PA,	ree (EX: None)+
Security ques	tion () I'm not a robot
	Pring - Mill
	Create my new account Cancel

### 3. Confirm your identity:

a. Click continue on the next screen, button is at the bottom of the screen:



b. Check your email account. An email confirming your account will be emailed to the address you entered into the system. Click on the hyperlink included in the email as shown below. If you do not receive an email within 3 minutes, please check your spam, trash and junk folder. Assistance: <a href="mailto:debbie.mcdonald@alaska.gov">debbie.mcdonald@alaska.gov</a>



# **Access the training:**

Once you have logged into the site follow three easy steps to access the training



Make sure you are on the Home screen by clicking the logo in the upper-left hand side of the screen:





From the Home screen, click: HIPAA TRAINING. Either on the top bar or the image slider in the middle of the page.





Type in Enrollment Key: hipaatraining and click the 'Begin" button at the bottom of the screen



Enrollment key: hipaatraining

### HIPAA Privacy and Security Training

Home ► HIPAA Privacy and Security Training ► Enroll me ► Enrollment options

## **Enrollment options**

### HIPAA Privacy and Security Training

If you believe you should have access to this training but are unable to enroll, please contact: Claudia.Cook@alaska.go



For assistance, please contact: <u>debbie.mcdonald@alaska.gov</u>