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QUESTION 1

Which entity within the Department of Health and Human Services (HHS) is the primary enforcer of the Health Insurance Portability and Accountability Act (HIPAA) "Privacy Rule"?

- A. Office for Civil Rights.
- B. Office of Social Services.
- C. Office of Inspector General.
- D. Office of Public Health and Safety.

Correct Answer: A

Reference: <https://www.hhs.gov/hipaa/for-professionals/compliance-enforcement/examples/how-ocr-enforces-the-hipaa-privacy-and-security-rules/index.html>

QUESTION 2

Which was NOT one of the five priority areas listed by the Federal Trade Commission in its 2012 report, "Protecting Consumer Privacy in an Era of Rapid Change: Recommendations for Businesses and Policymakers"?

- A. International data transfers
- B. Large platform providers
- C. Promoting enforceable self-regulatory codes
- D. Do Not Track

Correct Answer: A

Reference: <https://www.ftc.gov/news-events/press-releases/2012/03/ftc-issues-final-commission-report-protecting-consumer-privacy>

QUESTION 3

SCENARIO

Please use the following to answer the next question:

Declan has just started a job as a nursing assistant in a radiology department at Woodland Hospital. He has also started a program to become a registered nurse.

Before taking this career path, Declan was vaguely familiar with the Health Insurance Portability and Accountability Act (HIPAA). He now knows that he must help ensure the security of his patients' Protected Health Information (PHI).

Therefore, he is thinking carefully about privacy issues.

On the morning of his first day, Declan noticed that the newly hired receptionist handed each patient a HIPAA privacy

notice. He wondered if it was necessary to give these privacy notices to returning patients, and if the radiology department

could reduce paper waste through a system of one-time distribution.

He was also curious about the hospital's use of a billing company. He questioned whether the hospital was doing all it could to protect the privacy of its patients if the billing company had details about patients' care.

On his first day Declan became familiar with all areas of the hospital's large radiology department. As he was organizing equipment left in the hallway, he overheard a conversation between two hospital administrators. He was surprised to

hear that a portable hard drive containing non-encrypted patient information was missing. The administrators expressed relief that the hospital would be able to avoid liability. Declan was surprised, and wondered whether the hospital had plans to properly report what had happened.

Despite Declan's concern about this issue, he was amazed by the hospital's effort to integrate Electronic Health Records (EHRs) into the everyday care of patients. He thought about the potential for streamlining care even more if they were

accessible to all medical facilities nationwide.

Declan had many positive interactions with patients. At the end of his first day, he spoke to one patient, John, whose father had just been diagnosed with a degenerative muscular disease. John was about to get blood work done, and he

feared that the blood work could reveal a genetic predisposition to the disease that could affect his ability to obtain insurance coverage. Declan told John that he did not think that was possible, but the patient was wheeled away before he

could explain why. John plans to ask a colleague about this.

In one month, Declan has a paper due for one of his classes on a health topic of his choice. By then, he will have had many interactions with patients he can use as examples. He will be pleased to give credit to John by name for inspiring him to

think more carefully about genetic testing.

Although Declan's day ended with many questions, he was pleased about his new position.

Based on the scenario, what is the most likely way Declan's supervisor would answer his question about the hospital's use of a billing company?

- A. By suggesting that Declan look at the hospital's publicly posted privacy policy
- B. By assuring Declan that third parties are prevented from seeing Private Health Information (PHI)
- C. By pointing out that contracts are in place to help ensure the observance of minimum security standards
- D. By describing how the billing system is integrated into the hospital's electronic health records (EHR) system

Correct Answer: C

QUESTION 4

SCENARIO

Please use the following to answer the next question:

You are the chief privacy officer at HealthCo, a major hospital in a large U.S. city in state A. HealthCo is a HIPAA-covered entity that provides healthcare services to more than 100,000 patients. A third-party cloud computing service provider,

CloudHealth, stores and manages the electronic protected health information (ePHI) of these individuals on behalf of HealthCo. CloudHealth stores the data in state B. As part of HealthCo's business associate agreement (BAA) with

CloudHealth, HealthCo requires CloudHealth to implement security measures, including industry standard encryption practices, to adequately protect the data. However, HealthCo did not perform due diligence on CloudHealth before entering

the contract, and has not conducted audits of CloudHealth's security measures.

A CloudHealth employee has recently become the victim of a phishing attack. When the employee unintentionally clicked on a link from a suspicious email, the PHI of more than 10,000 HealthCo patients was compromised. It has since been

published online. The HealthCo cybersecurity team quickly identifies the perpetrator as a known hacker who has launched similar attacks on other hospitals ?ones that exposed the PHI of public figures including celebrities and politicians.

During the course of its investigation, HealthCo discovers that CloudHealth has not encrypted the PHI in accordance with the terms of its contract. In addition, CloudHealth has not provided privacy or security training to its employees. Law

enforcement has requested that HealthCo provide its investigative report of the breach and a copy of the PHI of the individuals affected.

A patient affected by the breach then sues HealthCo, claiming that the company did not adequately protect the individual's ePHI, and that he has suffered substantial harm as a result of the exposed data. The patient's attorney has submitted

a discovery request for the ePHI exposed in the breach.

Of the safeguards required by the HIPAA Security Rule, which of the following is NOT at issue due to HealthCo's actions?

- A. Administrative Safeguards
- B. Technical Safeguards
- C. Physical Safeguards
- D. Security Safeguards

Correct Answer: C

C: Administrative covers the phishing training. Technical covers the lack of encryption. Security safeguards are what we're talking about..and administrative and technical are important as mentioned above. The Physical safeguards are not important to how this breach occurred.

QUESTION 5

What practice does the USA FREEDOM Act NOT authorize?

- A. Emergency exceptions that allow the government to target roamers
- B. An increase in the maximum penalty for material support to terrorism
- C. An extension of the expiration for roving wiretaps
- D. The bulk collection of telephone data and internet metadata

Correct Answer: B

"he USA FREEDOM Act ended bulk collection conducted under Section 215.154 Going forward, requests by government officials must be based upon specific selectors, such as a telephone number. Company officials are now permitted to release statistics about the number of such requests they receive in a given time period, and the government is required to report its numbers once a year.155 In 2018, government officials obtained 56 court orders for traditional business records and 14 court orders for call detail records.156"

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