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# HIPAA and Privacy Act Training -JKO

## Question and answers 100% correct 2023

In which of the following circumstances must an individual be given the opportunity to agree or object to the use and disclosure of their PHI? - correct answer A and C (answer)

a). Before their information is included in a facility directory

b). Before PHI directly relevant to a person's involvement with the individual's care or payment of health care is shared with that person

Which of the following statements about the HIPAA Security Rule are true? - correct answer All of the above (answer)

a). Established a national set of standards for the protection of PHI that is created, received, maintained, or transmitted in electronic media by a HIPAA covered entity (CE) or business associate (BA)

b). Protects electronic PHI (ePHI)

c). Addresses three types of safeguards - administrative, technical and physical - that must be in place to secure individuals' ePHI

A covered entity (CE) must have an established complaint process. - correct answer True

The e-Government Act promotes the use of electronic government services by the public and improves the use of information technology in the government. - correct answer True (CORECT)

When must a breach be reported to the U.S. Computer Emergency Readiness Team? - correct answer Within 1 hour of discovery

Which of the following statements about the Privacy Act are true? - correct answer All of the above (answer)

a). Balances the privacy rights of individuals with the Government's need to collect and maintain information

# Jko Hipaa Pretest Answers

**Axzo Press**



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surrounding the HIPAA Privacy Rule and how it relates to and affects their practice This text provides comprehensive information about the rule itself how it affects service owners and independent contractors implementation guidelines sample template contract language and sample policies Mnemonics and other quick aids help readers remember important information Case based vignettes and real world applications emphasize the practical application of the law on medical transcriptions End of chapter critical thinking questions with answers in an appendix encourage readers to ponder and apply information

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*HIPAA Training Handbook for the Healthcare Staff* Opus Communications,2002

**Hipaa Focused Training 3a Privacy Uses and Disclosures** Daniel Farb, M.D.,2003-12-01

Hipaa Deskbook - Second Edition A. Frew,2015-03-29 The HIPAA Privacy and Security reference for healthcare providers business associates privacy officers attorneys and compliance officers who prefer hard copy reference materials within easy reach Official government materials have been arranged to put the authoritative language at your fingertips More than 100 pages of new materials have been added to the first edition 2013 to give you critical documents including The Omnibus Regulation updated Security and Privacy regulations Office of Civil Rights OCR audit standards that describe exactly what auditors are to ask for in terms of documentation OCR Sample format for Notice of Privacy Practices OCR Sample Business Associates Agreement OCR guidance on Risk Analysis Requirements under the HIPAA Security Rule with carry over for meaningful use expectations Self assessment checklists for physical safeguards administrative safeguards and technical safeguards for Risk Analysis compliance OCR sample list of interviews and questions for a HIPAA onsite compliance investigation HHS guidance on HIPAA when communicating with a patient s family friends or others HHS guidance on Disclosure to Law Enforcement HHS guidance to law enforcement on HIPAA restrictions and permitted disclosures HHS Frequently Asked HIPAA Questions This reference features a heavily detailed Table of Contents and Index for quick access to important points

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**HIPAA Answers** DecisionHealth (Firm),2014

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*Privacy Practices* Daniel Farb,2003-12-01      **Current Issues in HIPAA Compliance** Apex Legal Publishing,2025-03-28 In recent years HIPAA compliance requirements have seen huge changes in data storage and management and communications and interaction with remote workers and business associates As a result many covered entities are relying on compliance programs and systems that are inadequate or out of date Derived entirely and directly from government regulations and guidance publications this easy to follow guide introduces and explains all essential concepts necessary for an understanding of what is required to bring an organization into compliance with recent developments and current issues in the complex and often confusing regulatory framework governing medical records and information HIPAA compliance is mandatory for organizations where personal medical information is handled and penalties for non compliance can be devastating Covering all essential elements of the regulations and best practices necessary for compliance in handling electronic data remote workers and Business Associates this guide provides the information you must have along with a glossary of essential terms and phrases and a list of additional resources which can help bring you into full compliance without unnecessary expense or time and effort Partial List of Key Topics Electronic Transaction Standards Code Sets Unique identifiers PHI Defined Entities Required to Protect PHI De identification of Protected Health Information The Difference Between PHI and ePHI Technical Safeguards Physical Safeguards Administrative Safeguards Information Access Management Security Awareness and Training Security Incident Procedures Business Associate Agreements and Other Arrangements Secure Communications and HIPAA Compliance HIPAA Compliant IT Systems and Electronic Communications Data Backup and Disaster Recovery Plans Secure Data Management Practices for Remote Workers Tools and Technologies for Secure Remote Data Management Implementing BYOD Policies and Procedures HIPAA Business Associate Agreements Best Practices for Achieving HIPAA Compliance      HIPAA Training Handbook for the Nursing/clinical Staff Opus Communications,2003

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