

## HIPAA Privacy and Security Training Quiz

1. A covered entity may use protected health information (PHI) for treatment, payment, and healthcare operations.

True       False

2. A covered entity can disclose an individual's psychotherapy notes to third parties if the covered entity clearly indicates this type of disclosure in its Notice of Privacy Practices.

True       False

3. HIPAA information may be discussed with anyone as long as they are related to the individual.

True       False

4. PHI is health information that identifies the individual including, but not limited to, demographic information.

True       False

5. Patients can refuse to sign a form acknowledging receipt of the facility's Notice of Privacy Practices.

True       False

6. I need to report suspected HIPAA violations to my HIPAA Privacy/Security Officer immediately?

True       False

7. In your own words what does “Minimum Necessary” mean?

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8. The acronym for HIPAA stands for:

- a) Health Information Protection and Accountability Act
- b) Health Insurance Portability and Accountability Act
- c) Health Information Publication and Accumulation Act
- d) None of the above

9. Under the Privacy Rule, each facility must designate \_\_\_\_\_ who is responsible for the development and implementation of privacy policies and procedures for the facility:

- a) A Privacy Officer
- b) A HIPAA Officer
- c) An Ethics and Compliance Officer
- d) A mediator

10. Individually identifiable health information may **NOT** be:

- a) Faxed
- b) Mailed
- c) Sold

Name: \_\_\_\_\_ Date: \_\_\_\_\_