HIPAA/HITECH COMPETENCY TEST ANSWERS

1) An authorization for the release of paper PHI is required for: (Choose one)
   a) All protected healthcare information (PHI)
   b) All protected healthcare information (PHI) except relating to treatment, payment, healthcare operations or as required by law
   c) All patients who have liability or workers compensation claims
   d) Only patients who have a third party payer
   e) None of the above

2) All patient information is accessible under the “Minimum Necessary Standard” to all of our employees because? (Choose one)
   a) Every one knows everything, anyway!
   b) Because the Owner & HIPAA officer gave everyone permission
   c) Because all of our employees have duties that require access to both electronic and paper Protected Health Information (PHI)
   d) #1 is a false statement because access to patient information is given to employees by the HIPAA officer on a case by case basis
   e) b & c above

3) What is not required of us regarding the Privacy Notice:
   a) We must offer the Privacy Notice to each new patient on 1st visit
   b) We must obtain acknowledgment of receipt of the Privacy Notice or document a “good faith effort” was made to obtain the acknowledgement
   c) We must post the Privacy Notice on the premises accessible to all patients
   d) We must post the Privacy Notice on our website
   e) We must tell our vendors that we have a Privacy Notice

4) What should be done to minimize access to PHI &/or personal identifying information on our computers?
   a) Use passwords that have at least 10-12 characters, upper/lower case, alphanumeric and special characters
   b) Never use dictionary words, birthdates or other easily obtained information
   c) Always use the same password for all accounts
   d) Use pass phrases rather than passwords
   e) All of the above
   f) a & b
   g) a, b & d

5) Authorizations for release of paper PHI are required for: (Choose one)
   a) All protected healthcare information (PHI)
   b) All protected healthcare information (PHI) except that relating to treatment, payment, healthcare operations or as required by law
   c) All patients who have liability or workers compensation claims
   d) Any protected healthcare information shared with family members in emergency situation
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6) HIPAA education (choose one)
   a) Required upon employment and recommended annually thereafter
   b) Required upon employment and annually thereafter
   c) As needed based on compliance or non compliance
   d) Every two years
   e) Every three years

7) It is a HIPAA violation to (choose one)
   a) Use a sign in sheet
   b) Leave messages with a patient about his/her appointment
   c) Use the patient’s name when talking to them in the reception area
   d) Discuss financial or diagnostic related matters (within hearing of others)
   e) Discuss exercise techniques in the gym

8) What precautions should be used when sending a fax with PHI to another party? (Choose one)
   a) Use a cover sheet with a HIPAA statement
   b) Verify the fax number
   c) Verify the receiving party’s authority to receive PHI
   d) All of the above

9) What precautions should be taken to protect PHI/EPHI (choose the best answer)
   a) Use passwords
   b) Use time-limited screen savers
   c) Lock up records after hours if non-authorized persons could have access
   d) Perform back-ups of documentation and billing information
   e) Perform audits of access, security breaches, etc. per policy
   f) Use caution (auditory limits) when discussing sensitive matter with patients
   g) a-f

10. (All employees) What can you personally do to help the clinic comply with HIPAA Privacy? ________________________________

Name: ________________________________ /Date________________

Signature: ______________________________ Score: __________________