

## **Central State Community Services**

## **HIPAA/Confidentiality Test**

First Name *
Last Name *
Today's Date *
Worksite Location *
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- 1. What does HIPAA stand for? \*
  - OHealth Information Privacy and Accountability Act
  - OHealth Insurance Portability and Accountability Act
  - OHospital Information Privacy and Accountability Act
- 2. Which of the following is considered protected health information (PHI) under HIPAA? \*
  - OSocial Security Number
  - ODate of Birth
  - OMedical Record Number
  - OAll of the above
- 3. Under HIPAA, who is responsible for safeguarding protected health information (PHI)? \*
  - Only healthcare providers
  - Only individuals
  - OBoth healthcare providers and their business associates
- 4. What should you do if you receive a request for medical records from someone other than the individual? \*

- ullet OShare the records immediately.
- Obtain proper authorization from the individual or their legal representative before disclosing any information.
- OJust share information you think is necessary.
- 5. HIPAA violations can result in civil and criminal penalties, including fines and imprisonment.  $\mbox{\ensuremath{\ast}}$ 
  - OTrue
  - OFalse

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