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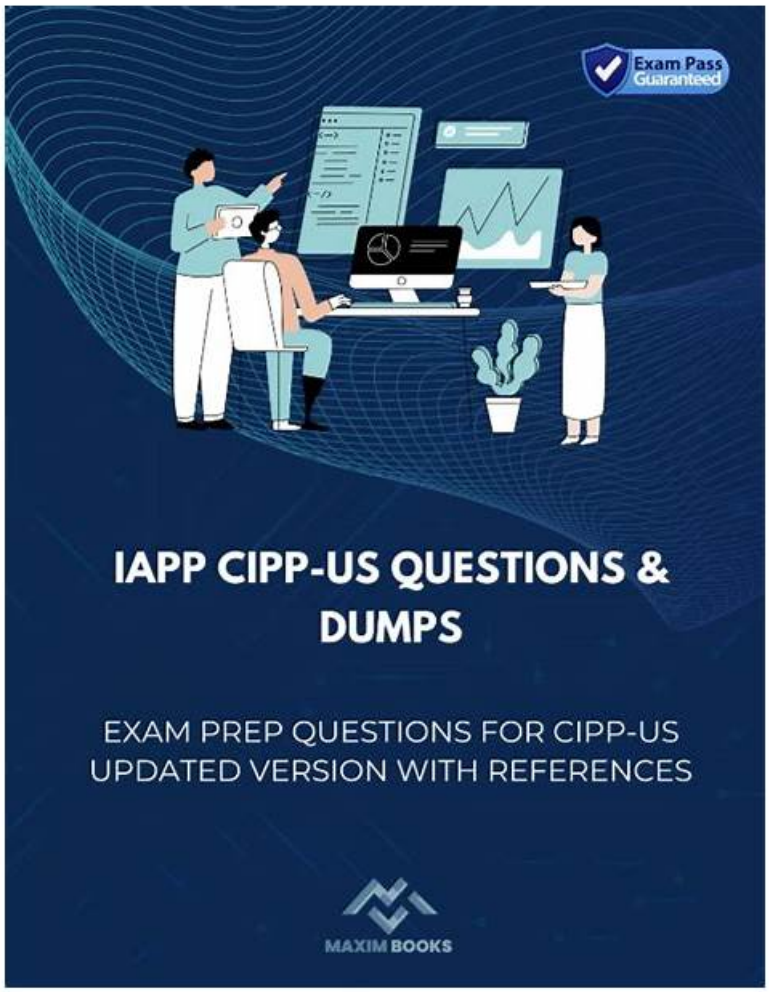

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What is the duration, language, and format of IAPP CIPP-US: Certified Information Privacy Professional/United States (CIPP/US) Exam

- Language: IAPP CIPP-US: Certified Information Privacy Professional/United States (CIPP/US) offered in English (U.S.), French, German
- Passing score: 85%
- Length of Examination: 150 minutes
- Format: Multiple choices, multiple answers
- Number of Questions: 90

IAPP Certified Information Privacy Professional/United States (CIPP/US) Sample Questions (Q197-Q202):

NEW QUESTION # 197
The Family Educational Rights and Privacy Act (FERPA) requires schools to do all of the following EXCEPT?

- A. Provide students with access to their records within a specified amount of time.
- B. Respond to all reasonable student requests regarding explanation of their records.
- C. Obtain student authorization before releasing directory information in their records.
- D. Verify the identity of students who make requests for access to their records.

Answer: C

Explanation:
FERPA - 34 CFR § 99.37. 99.37 What conditions apply to disclosing directory information? (a) An educational agency or institution may disclose directory information if it has given public notice to parents of students in attendance and eligible students in attendance at the agency or institution of: (1) The types of personally identifiable information that the agency or institution has designated as directory information; (2) A parent's or eligible student's right to refuse to let the agency or institution designate any or all of those types of information about the student as directory information; and (3) The period of time within which a parent or eligible student has to notify the agency or institution in writing that he or she does not want any or all of those types of information about the student designated as directory information.

NEW QUESTION # 198
SCENARIO
Please use the following to answer the next question:
Miraculous Healthcare is a large medical practice with multiple locations in California and Nevada. Miraculous normally treats patients in person, but has recently decided to start offering telehealth appointments, where patients can have virtual appointments with on-site doctors via a phone app.
For this new initiative, Miraculous is considering a product built by MedApps, a company that makes quality telehealth apps for healthcare practices and licenses them to be used with the practices' branding. MedApps provides technical support for the app, which it hosts in the cloud.
MedApps also offers an optional benchmarking service for providers who wish to compare their practice to others using the service.
Riya is the Privacy Officer at Miraculous, responsible for the practice's compliance with HIPAA and other applicable laws, and she works with the Miraculous procurement team to get vendor agreements in place. She occasionally assists procurement in vetting vendors and inquiring about their own compliance practices, as well as negotiating the terms of vendor agreements. Riya is currently reviewing the suitability of the MedApps app from a privacy perspective.
Riya has also been asked by the Miraculous Healthcare business operations team to review the MedApps' optional benchmarking service. Of particular concern is the requirement that Miraculous Healthcare upload information about the appointments to a portal hosted by MedApps.
What HIPAA compliance issue would Miraculous have to consider before using the telehealth app?

- A. HIPAA would require Miraculous to obtain patient consent before in-person appointment data can be shared with third parties.
- B. HIPAA would require Miraculous and MedApps to enter into a Business Associate Agreement.
- C. HIPAA does not permit in-person appointment data to be hosted in the cloud.
- D. HIPAA does not permit healthcare providers to use cloud hosting services.

Answer: B

Explanation:
According to HIPAA, a business associate is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information (PHI) on behalf of, or provides services to, a covered entity. A business associate agreement (BAA) is a written contract between a covered entity and a business associate that establishes the permitted and required uses and disclosures of PHI by the business associate, as well as the safeguards that the business associate must implement to protect the PHI. In this scenario, MedApps is a business associate of Miraculous, since it provides a telehealth app that involves the use or disclosure of PHI on behalf of Miraculous. Therefore, HIPAA would require Miraculous and MedApps to enter into a BAA before using the telehealth app.

NEW QUESTION # 199
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.
What is the most effective kind of training CloudHealth could have given its employees to help prevent this type of data breach?

- A. Training on techniques for identifying phishing attempts
- B. Training on the difference between confidential and non-public information
- C. Training on CloudHealth's HR policy regarding the role of employees involved data breaches
- D. Training on the terms of the contractual agreement with HealthCo

Answer: A

NEW QUESTION # 200
Which of the following conditions would NOT be sufficient to excuse an entity from providing breach notification under state law?

- A. If the entity followed internal notification procedures compatible with state law.
- B. If the data involved was accessed but not exported.
- C. If the entity was subject to the GLBA Safeguards Rule.
- D. If the data involved was encrypted.

Answer: B

Explanation:
Most state breach notification laws require entities to notify affected individuals and/or regulators when there is unauthorized access to or acquisition of personal information that compromises its security, confidentiality, or integrity. However, some states provide exceptions to this requirement under certain conditions, such as:
* If the data involved was encrypted or otherwise rendered unreadable or unusable, and the encryption key or other means of access was not compromised. This is based on the assumption that encrypted data is not accessible to unauthorized parties, even if they obtain the data.
* If the entity was subject to and complied with another federal or state law that provides similar or greater protection and notification requirements, such as the GLBA Safeguards Rule or the HIPAA Breach Notification Rule. This is to avoid duplication or

inconsistency of obligations for entities that are already regulated by other laws.
* If the entity conducted a risk assessment and determined that there is no reasonable likelihood of harm to the affected individuals, based on factors such as the nature and extent of the data, the circumstances of the breach, the evidence of misuse, and the ability to mitigate the risk. This is to allow entities to exercise some discretion and judgment in evaluating the potential impact of the breach. However, none of the state laws provide an exception for the mere access of data without exportation. Access alone is considered a breach that triggers the notification requirement, unless one of the other conditions applies. Therefore, option B is not a sufficient excuse for not providing breach notification under state law.
References:
* [IAPP CIPP/US Study Guide], Chapter 9: State Data Security Laws, pp. 209-211.
* CIPP/US Practice Questions (Sample Questions), Question 29.

NEW QUESTION # 201
Although an employer may have a strong incentive or legal obligation to monitor employees' conduct or behavior, some excessive monitoring may be considered an intrusion on employees' privacy? Which of the following is the strongest example of excessive monitoring by the employer?

- A. An employer who installs video monitors in physical locations, such as a changing room, to reduce the risk of sexual harassment.
- B. An employer who records all employee phone calls that involve financial transactions with customers completed over the phone.
- C. An employer who installs data loss prevention software on all employee computers to limit transmission of confidential company information.
- D. An employer who installs a video monitor in physical locations, such as a warehouse, to ensure employees are performing tasks in a safe manner and environment.

Answer: A

Explanation:
The strongest example of excessive monitoring by the employer is C. An employer who installs video monitors in physical locations, such as a changing room, to reduce the risk of sexual harassment. This would be considered an unreasonable invasion of employees' privacy, as it would violate their legitimate expectation of privacy in a place where they change their clothes.
Such monitoring would also likely violate the Electronic Communications Privacy Act (ECPA), which prohibits the interception of oral communications without consent or authorization.
Moreover, such monitoring would not be justified by a legitimate business interest, as there are less intrusive ways to prevent or address sexual harassment, such as policies, training, and reporting mechanisms.

NEW QUESTION # 202
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