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IAPP Certified Information Privacy Professional/United States (CIPP/US) Sample Questions (Q212-Q217):

NEW QUESTION # 212
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 statea.
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.
Of the safeguards required by the HIPAA Security Rule, which of the following is NOT at issue due to HealthCo's actions?

- A. Administrative Safeguards
- B. Security Safeguards
- C. Technical Safeguards
- D. Physical Safeguards

Answer: B

Explanation:
The HIPAA Security Rule requires covered entities and their business associates to implement three types of safeguards to protect the confidentiality, integrity, and availability of electronic protected health information (ePHI): administrative, physical, and technical. Security safeguards is not a separate category of safeguards, but rather a general term that encompasses all three types. Therefore, it is not a correct answer to the question. Administrative safeguards are the policies and procedures that govern the conduct of the workforce and the security measures put in place to protect ePHI. They include risk analysis and management, training, contingency planning, incident response, and evaluation. Physical safeguards are the locks, doors, cameras, and other physical measures that prevent unauthorized access to ePHI. They include workstation and device security, locks and keys, and disposal of media. Technical safeguards are the software and hardware tools that protect ePHI from unauthorized access, alteration, or destruction. They include access control, encryption, audit controls, integrity controls, and transmission security.
In the scenario, HealthCo's actions have potentially violated all three types of safeguards. For example:
HealthCo did not perform due diligence on CloudHealth before entering the contract, and has not conducted audits of CloudHealth's security measures. This could be a breach of the administrative safeguard of risk analysis and management.
HealthCo discovers that CloudHealth has not encrypted the PHI in accordance with the terms of its contract. This could be a breach of the technical safeguard of encryption. HealthCo provides its investigative report of the breach and a copy of the PHI of the individuals affected to law enforcement. This could be a breach of the physical safeguard of disposal of media, if HealthCo did not ensure that the media was properly erased or destroyed after the transfer.

NEW QUESTION # 213
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 does not permit in-person appointment data to be hosted in the cloud.
- B. HIPAA would require Miraculous and MedApps to enter into a Business Associate Agreement.
- C. HIPAA would require Miraculous to obtain patient consent before in-person appointment data can be shared with third parties.
- 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 # 214
Acme Student Loan Company has developed an artificial intelligence algorithm that determines whether an individual is likely to pay their bill or default. A person who is determined by the algorithm to be more likely to default will receive frequent payment reminder calls, while those who are less likely to default will not receive payment reminders.
Which of the following most accurately reflects the privacy concerns with Acme Student Loan Company using artificial intelligence in this manner?

- A. If the algorithm's methodology is disclosed to consumers, then it is acceptable for Acme to have a disparate impact on protected classes.
- B. If the algorithm makes automated decisions based on risk factors and public information, Acme need not determine if the algorithm has a disparate impact on protected classes.
- C. If the algorithm uses risk factors that impact the automatic decision engine. Acme must ensure that the algorithm does not have a disparate impact on protected classes in the output.
- D. If the algorithm uses information about protected classes to make automated decisions, Acme must ensure that the algorithm does not have a disparate impact on protected classes in the output.

Answer: D

Explanation:
The correct answer is D. If the algorithm uses information about protected classes to make automated decisions, Acme must ensure that the algorithm does not have a disparate impact on protected classes in the output. The Fair Credit Reporting Act (FCRA) protects consumers from unfair, inaccurate, and discriminatory treatment by creditors and other businesses that use credit reports. The FCRA prohibits creditors from using information about protected classes, such as race, color, religion, national origin, sex, marital status, age, or because they receive income from a public assistance program, to make decisions about credit. In the case of Acme Student Loan Company, the algorithm is using information about protected classes to make automated decisions about whether to send payment reminder calls. This could have a disparate impact on protected classes, such as people of color or people with low incomes. For example, people of color may be more likely to be identified as being at risk of default, even if they are just as likely to repay their loans as people of other races. Acme Student Loan Company must ensure that the algorithm does not have a disparate impact on protected classes. This could be done by using a variety of methods, such as:
* Testing the algorithm for accuracy, fairness, and bias before and after deployment
* Providing consumers with notice and consent options for the use of their data
* Allowing consumers to access, correct, or delete their data
* Implementing accountability and oversight mechanisms for the algorithm
* Ensuring compliance with applicable laws and regulations
References: https://economictimes.indiatimes.com/news/how-to/ai-and-privacy-the-privacy-concerns- surrounding-ai-its-potential-impact-on-personal-data/articleshow/99738234.cms

https://pupuweb.com/iapp-cipp-us-qa-privacy-concerns-acme-student-loan-company-artificial-intelligence/

NEW QUESTION # 215
SCENARIO
Please use the following to answer the next QUESTION
When there was a data breach involving customer personal and financial information at a large retail store, the company's directors were shocked. However, Roberta, a privacy analyst at the company and a victim of identity theft herself, was not. Prior to the breach, she had been working on a privacy program report for the executives. How the company shared and handled data across its organization was a major concern. There were neither adequate rules about access to customer information nor procedures for purging and destroying outdated data. In her research, Roberta had discovered that even low- level employees had access to all of the company's customer data, including financial records, and that the company still had in its possession obsolete customer data going back to the 1980s.
Her report recommended three main reforms. First, permit access on an as-needs-to-know basis. This would mean restricting employees' access to customer information to data that was relevant to the work performed.
Second, create a highly secure database for storing customers' financial information (e.g., credit card and bank account numbers) separate from less sensitive information. Third, identify outdated customer information and then develop a process for securely disposing of it.
When the breach occurred, the company's executives called Roberta to a meeting where she presented the recommendations in her report. She explained that the company having a national customer base meant it would have to ensure that it complied with all relevant state breach notification laws. Thanks to Roberta's guidance, the company was able to notify customers quickly and within the specific timeframes set by state breach notification laws.
Soon after, the executives approved the changes to the privacy program that Roberta recommended in her report. The privacy program is far more effective now because of these changes and, also, because privacy and security are now considered the responsibility of every employee.
Which principle of the Consumer Privacy Bill of Rights, if adopted, would best reform the company's privacy program?

- A. Consumers have a right to reasonable limits on the personal data that a company retains.
- B. Consumers have a right to correct personal data in a manner that is appropriate to the sensitivity.
- C. Consumers have a right to exercise control over how companies use their personal data.
- D. Consumers have a right to easily accessible information about privacy and security practices.

Answer: A

Explanation:
The Consumer Privacy Bill of Rights is a set of principles proposed by the Obama administration in 2012 to protect the privacy of consumers online and offline. The principles are based on the Fair Information Practice Principles, which are widely accepted as the foundation of privacy protection. One of the principles is the right to reasonable limits on the personal data that a company retains, which means that companies should collect and keep only the personal data they need for legitimate purposes, and dispose of it securely when it is no longer needed. This principle would best reform the company's privacy program in the scenario, as it would address the major concerns that Roberta identified in her report, such as the lack of rules and procedures for purging and destroying outdated data, and the excessive access to customer information by low-level employees. By implementing reasonable limits on the personal data that the company retains, the company would reduce the risk of data breaches, enhance customer trust, and comply with state breach notification laws. References:
* Fact Sheet: Plan to Protect Privacy in the Internet Age by Adopting a Consumer Privacy Bill of Rights
* IAPP CIPP/US Certified Information Privacy Professional Study Guide, Chapter 1: Introduction to U.S. Privacy Law, Section 1.2: The Consumer Privacy Bill of Rights

NEW QUESTION # 216
Which of the following best describes how federal anti-discrimination laws protect the privacy of private-sector employees in the United States?

- A. They limit the types of information that employers can collect about employees.
- B. They limit the amount of time a potential employee can be interviewed.
- C. They promote a workforce of employees with diverse skills and interests.
- D. They prescribe working environments that are safe and comfortable.

Answer: A

Explanation:

Federal anti-discrimination laws, such as Title VII of the Civil Rights Act of 1964, the Equal Pay Act of 1963, the Age Discrimination in Employment Act of 1967, and the Americans with Disabilities Act of 1990, prohibit employers from discriminating against employees or applicants based on certain protected characteristics, such as race, color, religion, sex, national origin, age, disability, and genetic information. These laws also limit the types of information that employers can collect, use, disclose, or retain about employees or applicants,in order to prevent discrimination or invasion of privacy. For example, employers cannot ask about an applicant's medical history, disability status, genetic information, or religious beliefs, unless they are relevant to the job or a bona fide occupational qualification. Employers also cannot use such information to make adverse employment decisions, such as hiring, firing, promotion, or compensation, unless they are justified by a legitimate business necessity or a reasonable accommodation. Employers must also safeguard the confidentiality of such information and dispose of it properly when it is no longer needed.
References:
* Federal Laws Prohibiting Job Discrimination Questions And Answers
* Laws Enforced by EEOC
* Employment and Anti-Discrimination Laws in the Workplace
* Protections Against Discrimination and Other Prohibited Practices
* 3. Who is protected from employment discrimination?

NEW QUESTION # 217
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