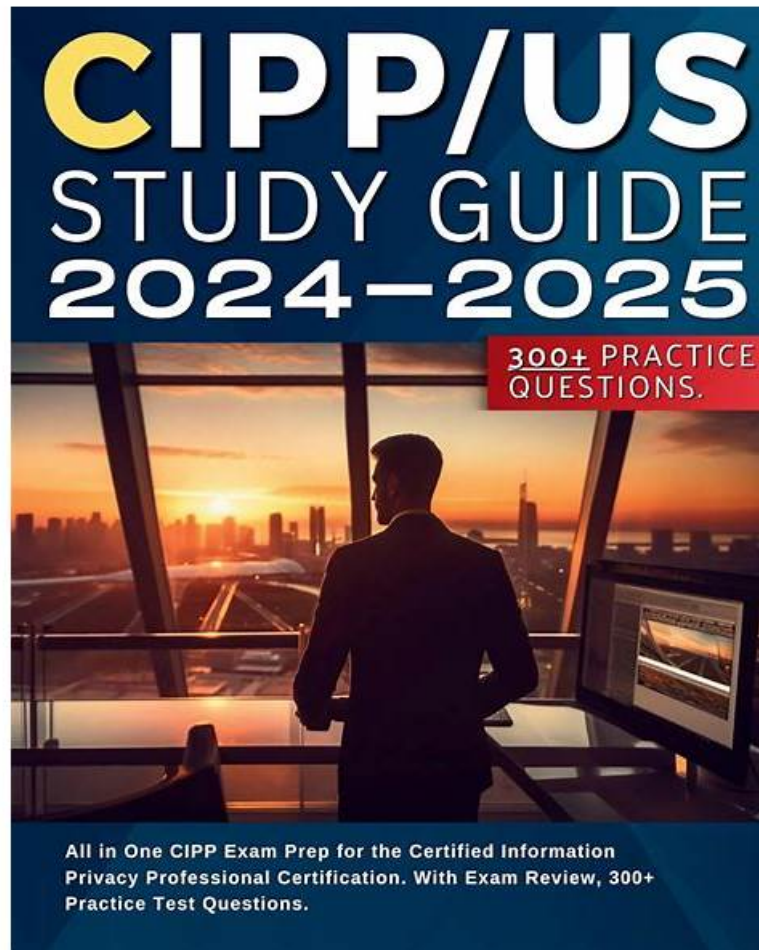


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What is the duration, language, and format of IAPP CIPP-US: Certified Information Privacy Professional/United States (CIPP/US) Exam

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

IAPP Certified Information Privacy Professional/United States (CIPP/US) Sample Questions (Q175-Q180):

NEW QUESTION # 175

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 significant reason that the U.S. Department of Health and Human Services (HHS) might impose a penalty on HealthCo?

- A. Because CloudHealth violated its contract with HealthCo by not encrypting the ePHI
- **B. Because HealthCo did not conduct due diligence to verify or monitor CloudHealth's security measures**
- C. Because HealthCo did not require CloudHealth to implement appropriate physical and administrative measures to safeguard the ePHI
- D. Because HIPAA requires the imposition of a fine if a data breach of this magnitude has occurred

Answer: B

Explanation:

According to the HIPAA Security Rule, covered entities are responsible for ensuring that their business associates comply with the security standards and safeguards required by the rule. This includes conducting due diligence to assess the business associate's security capabilities and practices, and monitoring their performance and compliance. Failure to do so may result in a violation of the rule and a penalty by the HHS.

In this scenario, HealthCo did not perform due diligence on CloudHealth before entering the contract, and did not conduct audits of

CloudHealth's security measures. This is the most significant reason why HHS might impose a penalty on HealthCo, as it indicates a lack of oversight and accountability for the protection of ePHI. References:

- * HIPAA Security Rule
- * HIPAA Business Associate Contracts
- * HIPAA Enforcement and Penalties

NEW QUESTION # 176

Which of the following privacy rights is NOT available under the Colorado Privacy Act?

- A. The right to limit the use of sensitive data.
- B. The right to correct sensitive data.
- C. The right to access sensitive data.
- D. The right to delete sensitive data.

Answer: A

Explanation:

"The CPA grants Colorado Consumers new rights with respect to their personal data, including the right to access, delete, and correct their personal data as well as the right to opt out of the sale of their personal data or its use for targeted advertising or certain kinds of profiling."

<https://coag.gov/resources/colorado-privacy-act/>

Even without knowing for certain the answer, one can reason that it should be D. It would be administratively difficult for businesses to adhere to varying limitation requests for each consumer... Therefore such a right would not make sense from a public policy perspective.

NEW QUESTION # 177

The criteria for an existing business relationship, as defined by TSR, includes:

- A. An offer has been requested within the last six months.
- B. A transaction taking place within the last 18 months.
- C. An offer has been requested within the past year.
- D. A transaction taking place within the past two years.

Answer: B

Explanation:

An existing business relationship exists when a transaction has taken place in the last 18 months or an offer has been requested in the last 3 months.

NEW QUESTION # 178

What is the main purpose of requiring marketers to use the Wireless Domain Registry?

- A. To ensure their emails are sent to actual wireless subscribers
- B. To acquire authorization to send emails to mobile devices
- C. To prevent unauthorized emails to mobile devices
- D. To access a current list of wireless domain names

Answer: C

Explanation:

The Wireless Domain Registry is a list of domain names that are used to transmit electronic messages to wireless devices, such as cell phones and pagers. The purpose of the registry is to protect wireless consumers from unwanted commercial electronic mail messages, by identifying the domain names for those who send such messages. Marketers are required to use the registry to avoid sending unsolicited emails to wireless devices, which may incur costs or inconvenience for the recipients. Sending such emails without the express prior authorization of the recipient is a violation of the CAN-SPAM Act of 2003. References: <https://www.fcc.gov/cgb/policy/domain-name-input>

<https://www.prnewswire.com/in/news-releases/the-wireless-registry-launches-worlds-first-global-registry-for-wireless-names-240222521.html>

NEW QUESTION # 179

Which of the following would NOT constitute an exception to the authorization requirement under the HIPAA Privacy Rule?

- A. Disclosing health information for public health activities.
- B. Disclosing health information to file a child abuse report.
- C. Disclosing health information needed to pay a third party billing administrator.
- D. Disclosing health information needed to treat a medical emergency.

Answer: C

Explanation:

Among the options provided, disclosing health information needed to pay a third party billing administrator would NOT constitute an exception to the authorization requirement under the HIPAA Privacy Rule. Generally, when disclosing health information for payment and healthcare operations purposes, specific patient authorization is not required. However, this exception applies primarily to disclosures made to healthcare providers, health plans, and other entities directly involved in the payment or healthcare operations process.

NEW QUESTION # 180

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