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CIPP/US, CIPP/US Practice exam 2024 with 100% correct answers

In what ways can the enforcement action be brought to the FTC's attention? - correct answer1. press reports covering the questionable practices 2. complaints from consumer groups of competitors

Which agency is responsible for educational privacy? - correct answerDepartment of Education

What are some of the ways that the FTC has played a prominent role in the development of US privacy standards? - correct answerThe FTC conducts public workshops on privacy issues, and reports on privacy policy and enforcement.

Access - correct answerThe ability to view personal information held by an organization. This may be supplemented by allowing updates or corrections to the information. U.S. laws often provide for "this" and correction when the information is used for any type of substantive decision making, such as for credit reports.

Americans with Disabilities Act (ADA) - correct answerBars discrimination against qualified individuals with disabilities; places restrictions on pre-employment medical screening.

Consumer Financial Protection Bureau (CFPB) - correct answerHas enforcement power for unfair, deceptive or abusive acts and practices for financial institutions.

Choice - correct answerThe ability to specify whether personal information will be collected and/or how it will be used or disclosed. "It" can be express or implied.

Common Law - correct answerLegal principles that have developed over time in judicial decisions (case law), often drawing on social customs and expectations.

Consent Decree - correct answerA judgment entered by consent of the parties (a federal or state agency and an adverse party) whereby the defendant agrees to stop alleged illegal activity, typically without admitting guilt or wrongdoing.

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Undergoing years of corrections and amendments, our CIPP-US exam questions have already become perfect. They are promising practice materials with no errors. We are intransigent to the quality issue and you can totally be confident about their proficiency sternly. As indicator on your way to success, our practice materials can navigate you through all difficulties in your journey. Every challenge cannot be dealt like walk-ins, but our CIPP-US simulating practice can make your review effective. That is why they are professional model in the line.

IAPP CIPP-US (Certified Information Privacy Professional/United States (CIPP/US)) Certification Exam is an internationally recognized certification exam for professionals who are interested in understanding the regulations and laws that govern privacy in the United States. CIPP-US exam covers the concepts of privacy, data protection, and compliance with regulations such as the General Data Protection Regulation (GDPR) and the California Consumer Privacy Act (CCPA).

Earning a CIPP-US Certification demonstrates an individual's commitment to the privacy profession and highlights their expertise in the field. It also opens up a range of career opportunities, as many organizations require individuals with this certification to ensure compliance with privacy laws and regulations. Overall, the CIPP-US exam is an essential certification for anyone looking to advance

their career in the field of privacy and data protection.

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IAPP Certified Information Privacy Professional/United States (CIPP/US) Sample Questions (Q141-Q146):

NEW QUESTION # 141

SCENARIO

Please use the following to answer the next QUESTION:

Declan has just started a job as a nursing assistant in a radiology department at Woodland Hospital. He has also started a program to become a registered nurse.

Before taking this career path, Declan was vaguely familiar with the Health Insurance Portability and Accountability Act (HIPAA). He now knows that he must help ensure the security of his patients' Protected Health Information (PHI). Therefore, he is thinking carefully about privacy issues.

On the morning of his first day, Declan noticed that the newly hired receptionist handed each patient a HIPAA privacy notice. He wondered if it was necessary to give these privacy notices to returning patients, and if the radiology department could reduce paper waste through a system of one-time distribution.

He was also curious about the hospital's use of a billing company. He questioned whether the hospital was doing all it could to protect the privacy of its patients if the billing company had details about patients' care.

On his first day Declan became familiar with all areas of the hospital's large radiology department. As he was organizing equipment left in the hallway, he overheard a conversation between two hospital administrators. He was surprised to hear that a portable hard drive containing non-encrypted patient information was missing. The administrators expressed relief that the hospital would be able to avoid liability. Declan was surprised, and wondered whether the hospital had plans to properly report what had happened.

Despite Declan's concern about this issue, he was amazed by the hospital's effort to integrate Electronic Health Records (EHRs) into the everyday care of patients. He thought about the potential for streamlining care even more if they were accessible to all medical facilities nationwide.

Declan had many positive interactions with patients. At the end of his first day, he spoke to one patient, John, whose father had just been diagnosed with a degenerative muscular disease. John was about to get blood work done, and he feared that the blood work could reveal a genetic predisposition to the disease that could affect his ability to obtain insurance coverage. Declan told John that he did not think that was possible, but the patient was wheeled away before he could explain why. John plans to ask a colleague about this.

In one month, Declan has a paper due for one of his classes on a health topic of his choice. By then, he will have had many interactions with patients he can use as examples. He will be pleased to give credit to John by name for inspiring him to think more carefully about genetic testing.

Although Declan's day ended with many questions, he was pleased about his new position.

How can the radiology department address Declan's concern about paper waste and still comply with the Health Insurance Portability and Accountability Act (HIPAA)?

- A. Post the privacy notice in a prominent location instead
- B. Direct patients to the correct area of the hospital website
- C. Confirm that patients are given the privacy notice on their first visit
- D. State the privacy policy to the patient verbally

Answer: C

Explanation:

HIPAA requires covered entities to provide a notice of privacy practices (NPP) to individuals who receive health care services from the covered entity. The NPP must describe how the covered entity may use and disclose protected health information (PHI), the individual's rights with respect to their PHI, and the covered entity's obligations to protect the privacy of PHI. The NPP must be provided to the individual no later than the date of the first service delivery, either in person or electronically. The covered entity must

also make the NPP available on request and post it on its website if it has one. The covered entity must also make a good faith effort to obtain a written acknowledgment from the individual that they received the NPP. If the individual refuses to sign the acknowledgment, the covered entity must document the attempt and the reason for the refusal.

The other options are not sufficient to comply with HIPAA. Stating the privacy policy verbally (option A) does not provide the individual with a written or electronic copy of the NPP that they can keep for future reference. Posting the privacy notice in a prominent location (option B) does not ensure that the individual receives the NPP or has an opportunity to review it before receiving services. Directing patients to the correct area of the hospital website (option C) does not provide the individual with the NPP at the time of service delivery, unless the individual agrees to receive the NPP electronically and has access to the website at that time. References:

- * Notice of Privacy Practices for Protected Health Information
- * Model Notices of Privacy Practices
- * Sample Notice: Availability of Notice of Privacy Practices
- * Notice of Privacy Practices
- * Notice of Privacy Practices (NPP) Distribution and Acknowledgement

NEW QUESTION # 142

Which federal act does NOT contain provisions for preempting stricter state laws?

- A. The Children's Online Privacy Protection Act (COPPA)
- B. The Fair and Accurate Credit Transactions Act (FACTA)
- C. The Telemarketing Consumer Protection and Fraud Prevention Act
- D. The CAN-SPAM Act

Answer: C

Explanation:

The federal act that does NOT contain provisions for preempting stricter state laws is the Telemarketing Consumer Protection and Fraud Prevention Act¹. This act authorizes the Federal Trade Commission (FTC) to establish and enforce rules for telemarketing practices, such as the Do Not Call Registry, the prohibition of robocalls, and the disclosure of material information². However, the act also explicitly states that it does not "annul, alter, or affect, or exempt any person subject to the provisions of this section from complying with, the laws of any State with respect to telemarketing practices, except to the extent that those laws are inconsistent with any provision of this section, and then only to the extent of the inconsistency"¹. This means that states can enact and enforce their own laws regarding telemarketing, as long as they are not less protective than the federal law. In contrast, the other three acts listed in the question do contain preemption clauses that limit or override the authority of states to regulate certain aspects of electronic communications, online privacy, and credit transactions^{3,4,5}. References: 1: Telemarketing Consumer Protection and Fraud Prevention Act²: Telemarketing Sales Rule | Federal Trade Commission³: CAN-SPAM Act: A Compliance Guide for Business⁴: Children's Online Privacy Protection Rule ("COPPA") | Federal Trade Commission⁵: Fair and Accurate Credit Transactions Act of 2003 - Wikipedia : IAPP CIPP/US Certified Information Privacy Professional Study Guide, Chapter 5: Federal Trade Commission and Consumer Privacy, p. 144-145, 149-150, 154-155

NEW QUESTION # 143

Which of the following types of information would an organization generally NOT be required to disclose to law enforcement?

- A. Money laundering information under the Bank Secrecy Act of 1970
- B. Personal health information under the HIPAA Privacy Rule
- C. Information about medication errors under the Food, Drug and Cosmetic Act
- D. Information about workplace injuries under OSHA requirements

Answer: B

NEW QUESTION # 144

Which of the following statements is most accurate in regard to data breach notifications under federal and state laws:

- A. You must notify the Federal Trade Commission (FTC) in addition to affected individuals if over 500 individuals are receiving notice.
- B. The only obligations to provide data breach notification are under state law because currently there is no federal law or regulation requiring notice for the breach of personal information.

- C. When providing an individual with required notice of a data breach, you must identify what personal information was actually or likely compromised.
- D. When you are required to provide an individual with notice of a data breach under any state's law, you must provide the individual with an offer for free credit monitoring.

Answer: B

Explanation:

Data breach notification laws in the United States vary by state and territory, and there is no comprehensive federal law that applies to all types of personal information. Some federal laws, such as HIPAA, GLBA, and the FDIC rule, impose data breach notification requirements for specific industries or sectors, but they do not cover all types of personal information or all entities that collect, store, or process such information.

Therefore, the only obligations to provide data breach notification for the breach of personal information are under state law, unless a specific federal law applies to the entity or the information involved. The other statements are incorrect because:

* A. You do not have to notify the FTC in addition to affected individuals if over 500 individuals are receiving notice, unless you are a health care entity subject to HIPAA, in which case you have to notify the Department of Health and Human Services (HHS) within 60 days of the breach.

* B. When providing an individual with required notice of a data breach, you do not have to identify what personal information was actually or likely compromised, unless the state law requires you to do so.

Some states, such as California, require the notice to include the types of personal information that were or are reasonably believed to have been the subject of the breach, while others, such as Alabama, do not specify the content of the notice.

* C. When you are required to provide an individual with notice of a data breach under any state's law, you do not have to provide the individual with an offer for free credit monitoring, unless the state law requires you to do so. Some states, such as Connecticut, require the offer of appropriate identity theft prevention and mitigation services for at least 12 months, while others, such as Arizona, do not impose such a requirement. References: Data Breach Notification in the United States and Territories, Data Breach Notification Laws in the United States: What is Required and How is that Determined?, US State Data Breach Notification Law Matrix, Breach Notification in United States, Data Breach Notification Laws: How to Manufacture a Confident Response

NEW QUESTION # 145

SCENARIO

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