

HIO-201^{Q&As}

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QUESTION 1

ABC Hospital implements policies and procedures to ensure that all members of its workforce have appropriate access to electronic protected health information. These policies and procedures satisfy which HIPAA security standard?

- A. Security Management Process
- B. Facility Access Control
- C. Security Awareness and Training
- D. Workforce Security
- E. B Security Management Process

Correct Answer: D

QUESTION 2

Signed authorization forms must be retained:

- A. Indefinitely, because the life of a signed authorization is indefinite
- B. Six) years from the time it expires.
- C. For as long as the patient\\'s records are kept.
- D. Until it is specifically revoked by the individual.
- E. Ten (10) years from the date it was signed.

Correct Answer: B

QUESTION 3

Which of the following is NOT a correct statement regarding HIPAA requirements?

- A. A covered entity must change its policies and procedures to comply with HIPAA regulations, standards, and implementation specifications.
- B. A covered entity must reasonably safeguard PHI from any intentional or unintentional use or disclosure that is in violation of the regulations.
- C. A covered entity must provide a process for individuals to make complaints concerning privacy issues.
- D. A covered entity must document all complaints received regarding privacy issues.



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E. The Privacy Rule requires that the covered entity has a documented security policy.

Correct Answer: E

QUESTION 4

Once a year, a team at ABC Hospital reviews environmental and operational changes that may have had an impact on the security of electronic PHI. This is an example of:

- A. Transmission Security
- B. Evaluation
- C. Audit Controls
- D. Integrity
- E. Security Management Process

Correct Answer: B

QUESTION 5

Select the correct statement regarding the "Minimum Necessary" standard in the HIPAA regulations.

- A. In some circumstances a covered entity is permitted, but not required, to rely on the judgment of the party requesting the disclosure as to the minimum amount of information necessary for the intended purpose. Some examples of these requesting parties are: another covered entity or a public official.
- B. The privacy rule prohibits use, disclosure, or requests for an entire medical record,
- C. Non-Covered entities need to redesign their facility to meet the requirement for minimum necessary uses.
- D. The minimum necessary standard requires covered entities to prohibit maintenance of medical charts at bedside and to require that X-ray light boards be totally isolated.
- E. If there is a request for more than the minimum necessary PHI, the privacy rule requires a covered entity to deny the disclosure of information after recording the event in the individual\\'s case file.

Correct Answer: A

QUESTION 6

The key objective of a contingency plan is that the entity must establish and implement policies and procedures to ensure The:

- A. Creation and modification of health information during and after an emergency.
- B. Integrity of health information during and after an emergency.



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- C. Accountability of health information during and after an emergency.
- D. Vulnerability of health information during and after an emergency.
- E. Non-repudiation of the entity.

Correct Answer: B

QUESTION 7

Health information is protected by the Privacy Rule as long as:

- A. The authorization has been revoked by the physician
- B. The patient remains a citizen of the United States.
- C. The information is under the control of HHS.
- D. The information is in the possession of a covered entity.
- E. The information is not also available on paper forms.

Correct Answer: D

QUESTION 8

A key date in the transaction rule timeline is:

- A. October 16, 2003 -- small health plans to begin testing without ASCA extension
- B. October 16, 2004 -- full compliance deadline for small health plans
- C. April 16, 2004 -- small health plans to begin testing with ASCA extension
- D. April 16, 2003 deadline to begin testing with ASCA extension
- E. April 14, 2003; deadline to begin testing with the ASCA extension.

Correct Answer: D

QUESTION 9

HIPAA establishes a civil monetary penalty for violation of the Administrative Simplification provisions. The penalty may not be more than.

- A. \$1 000000 per person per violation of a single standard for a calendar year
- B. \$10 per person per violation of a single standard for a calendar year.



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- C. \$25000 per person per violation of a single standard for a calendar year.
- D. \$2,500 per person per violation of a single standard for a calendar year
- E. \$1000 per person per violation of a single standard for a calendar year

Correct Answer: C

QUESTION 10

An Electronic Medical Record (EMR):

- A. Is another name for the Security Ruling.
- B. Requires the use of biometrics for access to records.
- C. Is electronically stored information about an individual\\'s health status and health care.
- D. Identifies all hospitals and health care organizations.
- E. Requires a PK1 for the provider and the patient.

Correct Answer: C

QUESTION 11

ANSI ASO X12 is the standard for

- A. Security requirements.
- B. Privacy requirements.
- C. Is another name for the Security Rule.
- D. Representation of all health care claims.
- E. Encrypting all information for use over a P1