PRIVACY BREACH

PRIVACY OFFICER’S RESPONSE CHECKLIST

This checklist provides guidance to the Privacy Officer in the case of a breach, or suspected breach, of electronic protected health information (ePHI). Additional information is contained in the Breach Notification Policy.

|  | | **Action Step** | **Responsible Contact** | **Notes** *(Include Date Action Carried Out)* |
| --- | --- | --- | --- | --- |
| Description of Incident | | | | |
|  | Incident Received and Documented | | *Privacy Officer* |  |
|  | * Reported By (and contact information) | |  |  |
|  | * Date and Time Report Received | |  |  |
|  | * Date and Time of Incident | |  |  |
|  | * Date and Time Incident Discovered | |  |  |
|  | * Source of breach? If application, ID of application. | |  |  |
|  | Customer and/or Partner Involvement | | *Privacy Officer* | *Locate Signed BA Agreement; If No BA with Vendor, Document Why Not* |
|  | * Description of Incident | |  | *Include Name of Individual(s) Involved, ePHI, Description of what, why, how incident happened* |
|  | If Applicable, Security Incident Initiated | | *Security Officer* |  |
| Internal Notification (as Appropriate) | | | | |
|  | | IT Leadership | *Chief Technology Officer or Chief Security Officer* |  |
|  | | Risk Management, Compliance Officer, Human Resources, Leadership, etc. | *Privacy Officer* |  |
|  | | Legal Counsel | *Privacy Officer* |  |
|  | | Building Services/Facilities | *Compliance Officer* | *Contact any other relevant parties (Rackspace, data center owners, etc)* |
| External Notification (as Appropriate) | | | | |
|  | | External Legal Counsel | *Listed below* |  |
|  | | Law Enforcement Officials | *To be Notified by Privacy Officer or*  *Risk Management* | *Based on Geographic Location; Nature of Crime* |
|  | | * Date/Time |  |  |
|  | | * Agency |  |  |
|  | | * Officer |  |  |
|  | | Customers | *To be Notified by*  *Privacy Officer or Security Officer* |  |
|  | | * Date/Time |  |  |
|  | | * Agency |  |  |
|  | | * Agent |  |  |
|  | | Office for Civil Rights |  |  |
|  | | State and/or Federal Agency, if Required (e.g., Health Plans with Medicare Plans – Contact CMS) | *Privacy Officer* |  |
| Investigation Components | | | | |
|  | | Complete Risk Assessment to Determine Potential for Significant Risk of Financial, Reputational, or Other Harm (see Attachment A for PHI Data Elements) | *Privacy Officer* | *See Breach Notification Policy* |
|  | | Assess/Engage Need for Forensics | *Chief Technology Officer*  *or Chief Security Officer* | *Considerations: Does a Contract with a Vendor Exist? If Not, Approval of Senior Leadership?* |
|  | | Assess/Engage Need for Private Investigator (e.g., research Craigslist, E-Bay, etc. for stolen equipment) | *Privacy Officer or*  *Risk Management* | *Considerations: Does a Contract with a Vendor Exist? If Not, Approval of Senior Leadership?* |
| Mitigation/Follow-Up Activities | | | | |
|  | | Report to Senior Leadership/BOD | *Privacy Officer* |  |
|  | | Completion of Investigation Report | *Privacy Officer* |  |
|  | | Completion of Workforce Member Sanctions | *Privacy Officer* |  |
|  | | Communication to Staff – Learning Opportunity (e.g., newsletter article, meeting presentation, etc.) | *Privacy Officer* |  |
|  | | Record Disclosure Information in Accounting of Disclosures Records. | *Privacy Officer* |  |
|  | | Completed Checklist Retained with Supporting Documentation for six years | *Privacy Officer* |  |

**HIPAA Defined PHI Data Elements**

Note: Any single or combination of ePHI data elements used, accessed, or disclosed without an authorization is a breach. A risk assessment must be carried out to determine if there is potential harm to the individual and whether or not notification should be carried out (e.g., Identity Information Trifecta: Name, DOB, SSN#).

|  |  |  |  |
| --- | --- | --- | --- |
| 1 | Name | 10 | Account Numbers |
| 2 | Geographic Subdivision Smaller than a State | 11 | Certification/License Numbers |
| 3 | All Elements of Dates Related to Individual (birth, death, adm) | 12 | Vehicle Identifiers and Serial Numbers Including License Plates |
| 4 | Telephone Numbers | 13 | Device Identifiers and Serial Numbers |
| 5 | Fax Numbers | 14 | Web URLs |
| 6 | Electronic Mail Address | 15 | Internet Protocol Addresses |
| 7 | Social Security Number | 16 | Biometric Identifiers, Including Finger and Voice Prints |
| 8 | Medical Record Numbers | 17 | Full Face Photos and Comparable Images |
| 9 | Health Plan Beneficiary Numbers | 18 | Any Unique Identifying Number, Characteristic or Code |

**Key Contacts/Information Sources**

| **Name** | **Title** | **Phone** | **E-Mail Address** |
| --- | --- | --- | --- |
| Kevin Coker | Privacy Officer | 501-319-4156 | kcoker@molecularmatch.com |
| Nick Tackes | Chief Technology and  Security Officer | 949-573-5288 | ntackes@molecularmatch.com |
|  | Compliance Leader |  |  |
|  | Legal Counsel |  |  |