Across
3. We use _____ in order to keep charts inaccessible to people who do not have “need to know” about PHI
6. The medical ______ of a person being served is an example of a designated record set.
8. Anytime a person feels a violation of their privacy rights has occurred, they have the right to file a grievance with the ________ ________
14. It is staff’s responsibility to keep information __________
15. One of the five HIPAA principles
22. Staff that violate HIPAA policies will be __________
25. The second “A” in HIPAA stands for __________
27. You will receive ________ upon hire and annually thereafter.
28. The “H” in HIPAA stands for ________

Down
1. The Privacy Officer is located in __________
2. PCS staff may discuss a person being served over the phone with another ________ but it must be done in a private area.
4. An annual ________ is an example of PHI
5. We should avoid discussing persons served in ________
7. The first “A” in HIPAA stands for __________
9. HIPAA reduces the occurrence of _________.
10. The “I” in PHI stands for ________-
11. Staff will have ______ access to health information of a person being served
12. The “P” in HIPAA stands for ________
13. When _____ are about persons being served, they are not to be left in plain sight for others that have no “need to know”.
16. Staff may converse about persons being served as needed to ______ programs and health plans
17. The “P” in PHI stands for _______
18. __________ with others about persons served in public areas is prohibited
19. Any requests for disclosures of PHI must be forwarded to your ___________
20. HIPAA defines and protects ________
21. A __________ includes any item, collection, or grouping of information that includes PHI and is collected or used by a provider
23. The “I” in HIPAA stands for __________
24. When discussing a person being served, you should move to a ______ area