Breach Risk Assessment Form

A breach is an impermissible use or disclosure under the Privacy Rule that compromises the security or privacy of the protected health information. A breach of PHI is presumed when information is released in violation of HIPAA standards unless the covered entity or business associate completes a risk assessment and shows that there is a "low probability that the PHI has been compromised." The risk assessment must examine four factors to determine if there was a breach:

1) The nature and extent of PHI, including the type of identifiers and the likelihood of re-identification of the data
2) The unauthorized person who used or accessed the PHI
3) Whether the PHI was actually acquired or viewed
4) The extent to which the risk to the PHI has been mitigated (45 CFR § 164.402(2)).

Date Breach Discovered:	Number of Clients affected:
Description of what happened:	
1) What kind of PHI was involved in the breach (e.g., full name, social security number, date of birth, home address, patient ID number or billing number, diagnosis, insurance information, etc.)?	
2) Who used or accessed the PHI? To whom was the disclosure made?	
3) Was the PHI actually viewed or accessed?	
4) Has the risk to the PHI been mitigated so that the practitioner can be sure the information will not be used. Explain?	

Based on the risk assessment, it has been determined that:

☐ This is not a breach and notification is not required.

☐ This is a breach. Notification is required. Indicate the notice provided.

Notice provided (check all that apply):

Individual notice ☐ Date_____

Media Notice ☐ Date_____

HHS Notice ☐ Date_____

Covered entities and business associates have the burden of demonstrating that all required notifications have been provided or that a use or disclosure of unsecured protected health information did not constitute a breach. A covered entity or business associate should maintain documentation that all required notifications were made or that notification was not required. A log shall be kept documenting all breaches of unsecured PHI. Sample Breach Notification forms, a Breach Incident Log, and a Breach Notification Policy can be found at www.socialworkers.org/hipaa/sample.asp.