



ANDREW M. CUOMO  
Governor

Department  
of Health

HOWARD A. ZUCKER, M.D., J.D.  
Commissioner

LISA J. PINO, M.A., J.D.  
Executive Deputy Commissioner

## DOS Privacy Issue Reporting Procedure

**What to report:** All potential unauthorized access and disclosure of Medicaid Confidential Data.

**When to report:** As soon as possible.

**How to report:** Complete pages two and three of this issue notification form and send it to the DOS Security and Privacy Bureau's mailbox:  
[incidentresponse@health.ny.gov](mailto:incidentresponse@health.ny.gov)



ANDREW M. CUOMO  
Governor

# Department of Health

HOWARD A. ZUCKER, M.D., J.D.  
Commissioner

LISA J. PINO, M.A., J.D.  
Executive Deputy Commissioner

## Security and Privacy Issue Notification Form

**Instructions:** Complete the form below and send to the DOS Incident Response’s mailbox at: [incidentresponse@health.ny.gov](mailto:incidentresponse@health.ny.gov)

*Please do not put Protected Health Information (PHI) into this form. For questions on how to fill out the form below contact [incidentresponse@health.ny.gov](mailto:incidentresponse@health.ny.gov)*

<b>1. Contact Information for this Incident</b>		
Name:	Title:	Program Office:
Email address:	Work Phone:	Mobile Phone:
<b>2. Incident Description</b>		
Provide a brief description of the issue:		
<b>3. Incident Details</b>		
Date and time the issue was discovered:		
Describe the type and quantity of data impacted:		
Approximate number of devices/systems affected by the issue:		
Approximate number of users affected by the issue:		
Approximate number of individual member records affected by the issue:		
Have any corrective actions been taken? (Please describe):		
Has the issue been resolved? (Please describe):		



**ANDREW M. CUOMO**  
Governor

**Department  
of Health**

**HOWARD A. ZUCKER, M.D., J.D.**  
Commissioner

**LISA J. PINO, M.A., J.D.**  
Executive Deputy Commissioner

**4. Risk Assessment:** The HIPAA Breach Notification Rule presumes the event to be a breach unless the organization demonstrates that there is low probability the PHI has been viewed by unauthorized personnel.

To determine the probability that the PHI has been viewed by unauthorized personnel, please answer the following questions:

**a.** What type of data (name, birthday, CIN, social security number, etc.) was involved?

**b.** Did an unauthorized disclosure occur? If yes, please list the sender of the data, and who received the data.

**c.** Did any unauthorized person(s) obtain the PHI?

**d.** Did any unauthorized person(s) view the PHI?

**e.** Has the risk to the PHI been mitigated?