

Federal Trade Commission

The nation's consumer protection agency

Notice of Breach of Health Information

OMB Control No: 3084-0150 (exp. 9/30/2012)

Are you in the business of offering or maintaining personal health records? Does your company offer products or services that interact with personal health records – for example, an online weight tracking program that sends information to a personal health record or pulls information from it? If that describes your line of work – and if you're not covered by the Health Insurance Portability & Accountability Act (HIPAA) – the law requires you to take steps if you've had a breach involving information in a personal health record not secured in a certain way. Under the law, 16 C.F.R. Part 318, you must:

- 1. Notify everyone whose information was breached;
- 2. In many cases, notify the media; and
- 3. Notify the Federal Trade Commission (FTC).

The FTC has designed this form to make it easier for you to report a breach to us. For more on notifying the people whose information was breached, visit www.ftc.gov/healthbreach.

For all breaches

Complete this form and send it to:

Federal Trade Commission Associate Director – HBN Division of Privacy & Identity Protection 600 Pennsylvania Avenue, N.W. Mail Stop NJ-3158 Washington, DC 20580

- Include your own contact information. Don't include any personally identifiable information involved in the breach.
- Verify the form arrived at the FTC by using a mailing method that gives you proof of delivery. For security reasons, please don't email the form.

<u>Timelines</u> These timelines refer to when you must notify the FTC of the breach. If the <u>law</u> requires you to contact the people whose information was breached, you must notify them as soon as you can – and no later than 60 days after discovering the breach.

For breaches involving the records of 500 or more people

Complete this form and send it to the FTC within 10 business days of discovering the breach.

For breaches involving the records of fewer than 500 people

Complete this form and send it to the FTC by the 60th day of the calendar year following the breach. For example, if you discover a breach involving fewer than 500 people on June 30, 2009, send this form to the FTC no later than 60 days into the calendar year of 2010. If you experience two breaches like this in one calendar year – one on June 30th and another on November 1st – complete a separate form for each breach, staple them together, and send them to the FTC no later than 60 days into the calendar year of 2010.

Questions? Call the FTC at (202) 326-2252, email hbn@ftc.gov, or send a letter to the address above.

Paperwork Reduction Act Statement: Under the Paperwork Reduction Act, as amended, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Your company or organization					
Name of your company or organization:			Website:		
Address:					
City		State)	Zip	
Contact person at your company or organization:					
Contact telephone:	About how many employees does your company or organization have?				
Contact email address:	What products or services do you offer?				
Information abo	out the	brea	ıch		
Type of breach: Lost or stolen laptop, computer, flash on the stolen password or credentials Unauthorized access by an employee Hacker Other (describe)	or contra	ctor			
Date(s) the breach happened (if you know):	Have you made the breach public?				
From: / / To: / /	If YES, when did you make it public?				
Date the breach was discovered: / / How many individuals were affected by the breach?					
Comments:	1				
Type of information involved (check all that apply):					
Personal Information Name Address Date of birth Social Security Number Drivers license or identification card number Financial information (credit card number, bank account number, etc) Health insurance information (insurance carrier, insurance card number, etc.) Other Personal or Health Information (describe):	Health	Basic Disea Medic Treatr Immu Allerg Inform Test r Herec Menta Inform Corre- Living power	information (a se or medical sations ments or proce nizations ies nation about che esults litary condition al health information about di spondence be	edures nildren s nation et, exercise, weight, etc. tween patient and providers e directives, or medical	

What steps are you taking to investigate the breach?
What steps are you taking to mitigate losses?
What steps are you taking to protect against further breaches?
List any law enforcement agencies you've contacted about the breach.
Breach notification
Have you notified the people whose information was breached?
☐ YES. We notified them on:
Attach a copy of the letter to this form. Don't include any personally identifiable information, other than your own contact information.
☐ NO. Our investigation isn't complete.
If you determine you need to notify them, as soon as you can – and no later than 60 days after discovering the breach – you must: 1) Notify the people whose information was breached; and 2) Send a copy of the letter to the FTC. Don't include any personally identifiable information, other than your own contact information.
If you determine you don't need to notify the people whose information was breached, send a letter to the FTC at the address below explaining why notification isn't necessary.
Has anyone at your business or organization received information that someone has been harmed by this breach? For example, has a customer called you to complain about identity theft? Or are you aware of any public disclosure of information that resulted from the breach?
If YES, describe the harm you've found out about. Don't include any personally identifiable information.

Print form and send it to:

Federal Trade Commission Associate Director – HBN Division of Privacy & Identity Protection 600 Pennsylvania Avenue, N.W. Mail Stop NJ-3158 Washington, DC 20580

For FTC use:
Reference Number: