



Incident Report Details:

1. Line of Business
2. Date of Incident:
3. Date of discovery of incident by Entity:
4. Date Incident was reported to the Entity’s Privacy Official:
5. Status of investigation (e.g., completed, estimated completion date, etc.)
6. Status of Corrective Action (e.g., devising plan, implementing, completed, etc.)

Data and Recovery

7. Was the data recovered?
8. If the data recovered, specify what, when, and who has it now:
9. If not recovered, explain: (still missing / shredded / under investigation)

Incident Description – including

10. What data elements were involved and the extent of the data involved:

The following data elements were compromised:

1	
2	
3	
4	
5	
6	

11. How many enrollees were affected by the breach?
12. Description of the unauthorized person known or reasonably believed to have improperly used or disclosed PHI/PI. (PHI = Protected Health Information; PI = Personal Information)
13. Description of where the PHI/PI is believed to have been improperly transmitted sent or utilized.
14. Cause of Incident or probable cause.
15. Impact of Incident -potential misuse of data, identity theft, etc.
16. Was a CHG business associate, subcontractor, or other vendor involved and/or responsible for the breach?
17. Mitigation - steps to reduce harmful effects, i.e., notification of members.

Corrective Action - steps to prevent reoccurrence, such as retraining of staff or creation/revision of procedures.

	Action Items	Comments	Date Completed
1			
2			
3			

Notification

18. Did CHG notify the following individuals of the breach:
 - a. Individuals affected by breach?
 - b. CMS?
 - c. Secretary of Department of Health and Human Services?
 - d. California Attorney General?
 - e. Prominent media outlets?