



What is an Incident?

An incident is any event that may impact patient privacy or security, such as sending a message to the wrong patient or getting lured by a crafty phishing email that steals your login password.

Must all incidents be reported?

Yes, the BU HIPAA Policy requires all workforce members to report any suspected incidents or potential breaches to their supervisor and HIPAA Contact. The HIPAA Contact is responsible for ensuring the incident is reported to the HIPAA Officers: <https://www.bu.edu/policies/hipaa-breaches/>.

How should HIPAA Contacts report incidents?

To ensure a prompt response, please send all suspected incidents to ithelp@bu.edu. Our IT Help Center will promptly alert the BU HIPAA Officers.

Alternatively, you can report directly to hipaa@bu.edu or using our anonymous hotline: <https://www.bu.edu/compliance/report-a-concern/>.

What information should I include in an incident report?

Only a general description, such as “sent records to the wrong patient” or “possible account compromise.” You should never include patient names or any other HIPAA identifiers when reporting an incident. If identifiers, such as names, are necessary for the investigation we will gather that information from you.

When does an incident become a breach?

An incident can only become a “breach” if the BU HIPAA Privacy and/or HIPAA Security Officer make the determination that an incident is a “breach,” as defined by the HIPAA Breach Notification Rule. Since only the HIPAA Officers can make the determination that an incident is a breach, all incidents must be reported, even if you think it’s insignificant or low risk.

If you have questions reach out to: buinfosec@bu.edu or your HIPAA Privacy and Security Officers at hipaa@bu.edu.



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