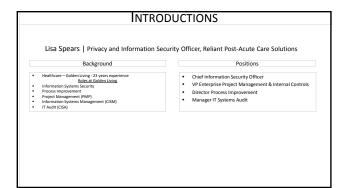
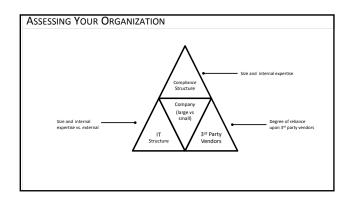
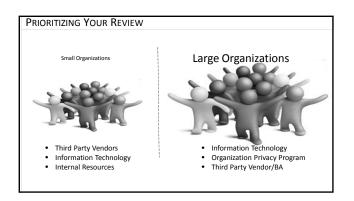
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CYBERSECURITY IN THE POST-ACUTE ARENA		
٨٥	CENIDA	٦
Agenda		
Introductions		
2 Assessing Your Orga	anization	
3 Prioritizing Your		
	marks and Breaches > nce 101 & Cybersecurity 101	
	non Threats & Vulnerabilities	
7 60	impliance Metrics	
_		
INTRO	DUCTIONS	٦
INTRO	300110113	
Amy Brantley Chief Compliance C	Officer, Reliant Post-Acute Care Solutions	
Background	Positions	
Attorney – 25 years experience Healthcare – 14 years experience	Chief Compliance Officer & EVP IT	
Healthcare Experience Reliant Post-Acute Care Solutions (current)	Chief Privacy Officer Assistant GC Healthcare & VP Compliance	
Golden Living Arkansas Children's Hospital	Labor & Employment Counsel	
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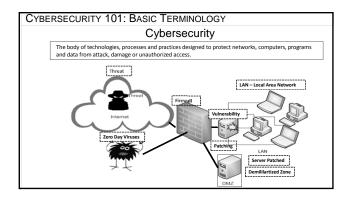


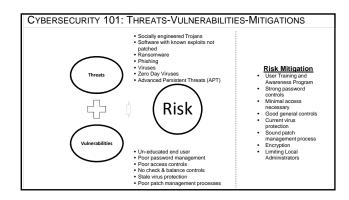


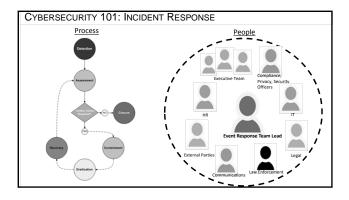


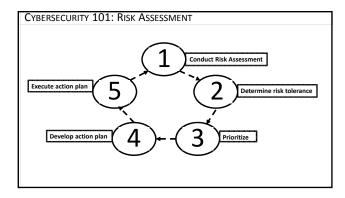
Ponemon Institute Benchmark ¹	
Study Participants: 91 covered entities and 84 business associates	
\$6.2B Cost of breaches to healthcare organizations	
90% Healthcare organizations in the study having a data breach in past 2 years	
45% Healthcare organizations in the study having a more than 5 data breach in past 2 years	
\$2.2M Average estimated cost of a breach	
¹ Panemon Institute LLC, Susti Annual Benchmark Study on Privacy & Security of Healthcare Data, May 2016	
EXAMPLES OF 2016 BREACHES ²	1
EXAMPLES OF 2010 DREACHES ² Centene IRS Announced January - 2016 February 2016	
Centene - multi-line health-care enterprise 950,000 members potentially impacted 6 hard rifnes (lost with PH) 700,000 individuals 950,000 individuals	
Lab services from 2009 to 2015 It is not clear if the devices were encrypted It is not clear if the devices were encrypted The Interview of th	
Announced March – 2016 expanded in February 2016 to include as many as 224 century Oncology, a Fort Myers, Fia-based 224 century Oncology, a Fort Myers, Fia-based Fig. 1 1 affected 114,000 accounts. That number was expanded in February 2016 to include as many as 224,000 accounts affected.	
cancer care provider 2.2 million patients based across all 50 states and internationally, Hackers broke into a company database in • Nearly 30,000 FBI and Department of Homeland	
October, accessing personal information of Security workers affected patients, including names, Social Security - Records including names, Social Security - Records including names, Social Security - Records including names, Information on around 9,000 DHs employees and around 20,000 FBI data and insurance information. - Remoteves including names titles and notart	
The company said it had "no indication that the information has been insused in any way." Sarah Kuranda, "The 10 Biggest Data Breaches Of 2016 (\$o Far)", www.KBN.com., luly 28, 2016	
COMPLIANCE 101: HIPAA SECURITY RULE	1
RULE: All covered entities and their business associates are required to develop and document a <u>security program</u> to guard against real and potential threats of disclosure or	
loss, which will include policies, procedures and safeguards to protect <u>Electronic PHI</u> (or ePHI).	
Administrative Physical Technical • Security Management Process • Facility Access Controls • Access Control	
Assigned Security Responsibility Workstation Use Workforce Security Information Access Management Security Awareness and Training Person or Entity Authentication Transmission Security	
Security Incident Procedures Contingency Plan Evaluation Business Associate Contracts and Other Arrangements	

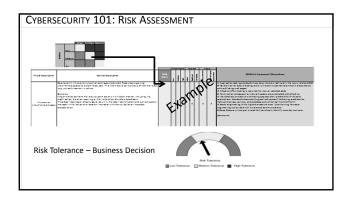
COMPLIANCE 101: HIPAA PRIVACY RULE	-
Rule: Protects all "PHI" (protected health information), which includes just about any	
piece of information that might possibly identify a person, in any form, including oral information	
Grants individuals broader rights in their PHI:	
Access	
Amendment	
Disclosure Accounting	-
Restrictions	
Confidential Communications	
	-
	-
COMPLIANCE 101: BUSINESS ASSOCIATE	7
Business Associate (BA)	
Definition	
Any entity that "creates, receives, maintains, or transmits" PHI in performing	
a function, activity, or service on behalf of a covered entity. • Examples: billing companies, accountants, insurance agents/brokers, payroll	
vendors, consultants, law firms, data processing firms • Any entity that has access to PHI to do something for a Covered Entity.	
Requirements	
Covered Entity (CE) cannot release or disclose PHI to business associates	
unless both parties have a Business Associates Agreement (BAA) in place. BAA is not a Non Disclosure Agreement (NDA). BAA should minimally	
include: • Confidentiality clause	
Breach disclosure requirements and process Disposition requirements and process at BAA termination	
Rights of CE to audit the BA	
COMPLIANCE 101: BUSINESS ASSOCIATE	7
DOWNFLIMINGE TOT. DUSINESS ASSOCIATE	1
Best Practices for Business Associates Engagement	
Select your yenders carefully as they can be jointly or directly liable	
for security breaches	
Engage all expertise needed (Legal, Procurement, Operations,	
Security Officer, Privacy Officer) to create a well rounded and all	
inclusive agreement	
Ask for and review vendor privacy and security policies to get a sense of controls in place	
Make sure basic technical security controls are in place – encryption, patching, anti-virus, password management, etc.	
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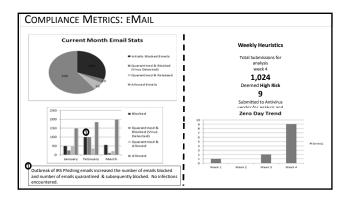




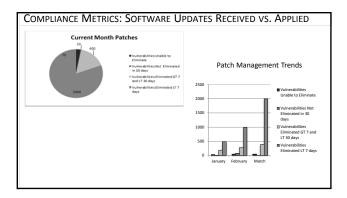


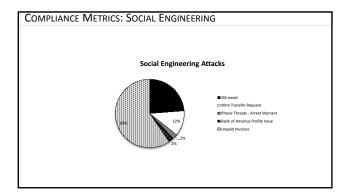


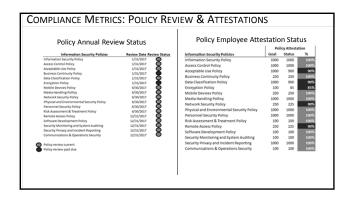




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QUESTIONS?	