CYBERSECURITY AND PRIVACY RISKS THAT CREATE ENFORCEMENT AND OTHER EXPOSURE

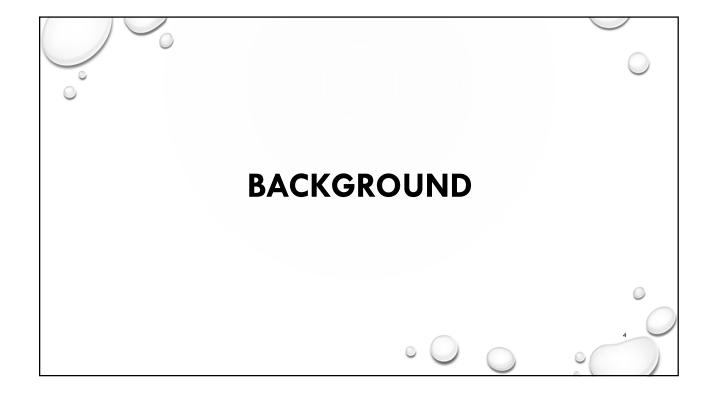
TIMOTHY NOONAN, ACTING DEPUTY DIRECTOR, HEALTH INFORMATION PRIVACY DIVISION
DHHS OFFICE FOR CIVIL RIGHTS
JOAN PODLESKI, CHIEF PRIVACY OFFICER
CHILDREN'S HEALTH SYSTEM OF TEXAS
MARTI ARVIN, VP AUDIT STRATEGY
CYNERGISTEK, INC.

DISCLAIMER:

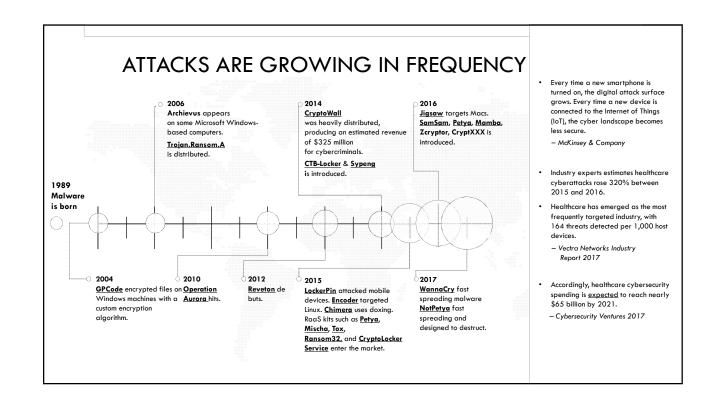
THE VIEWS EXPRESSED IN THIS PRESENTATION
BELONG TO THE SPEAKERS AND DO NOT
NECESSARILY REPRESENT THE VIEWS OF THEIR
ORGANIZATIONS OR OTHER ORGANIZATIONS.
NOTHING IN THIS PRESENTATION CONSTITUTES
LEGAL ADVICE.

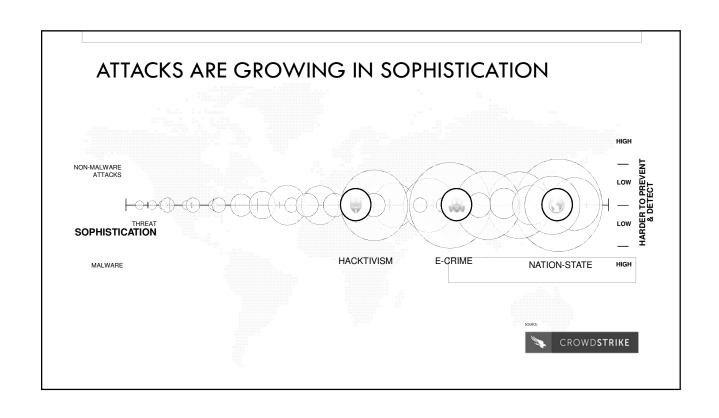
PRESENTATION OVERVIEW

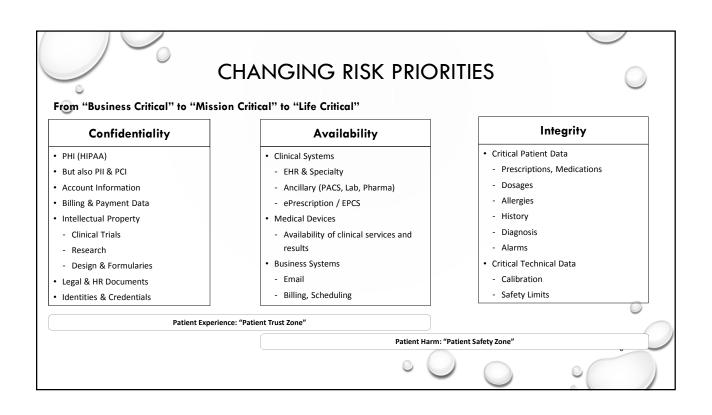
- BACKGROUND ON THE EVOLUTION OF PRIVACY AND SECURITY RISKS IN HEALTHCARE
- PRIVACY AND INFORMATION SECURITY PROGRAM MATURITY IN HEALTHCARE
- RECENT SETTLEMENTS WHAT WENT WRONG?
- OCR PHASE II AUDITS- AN OVERVIEW OF THE FINDINGS







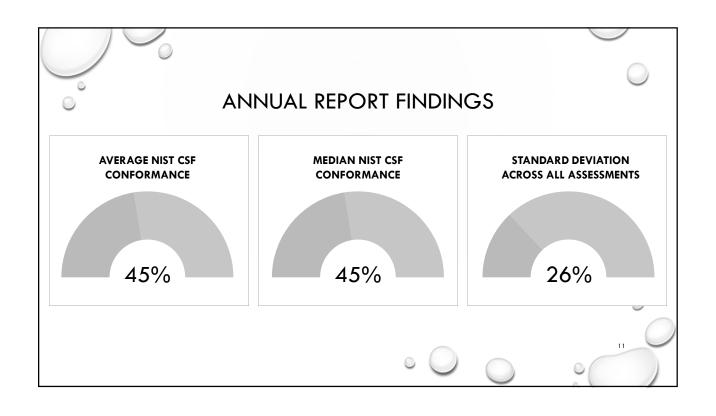




PRIVACY AND INFORMATION SECURITY PROGRAM MATURITY IN HEALTHCARE

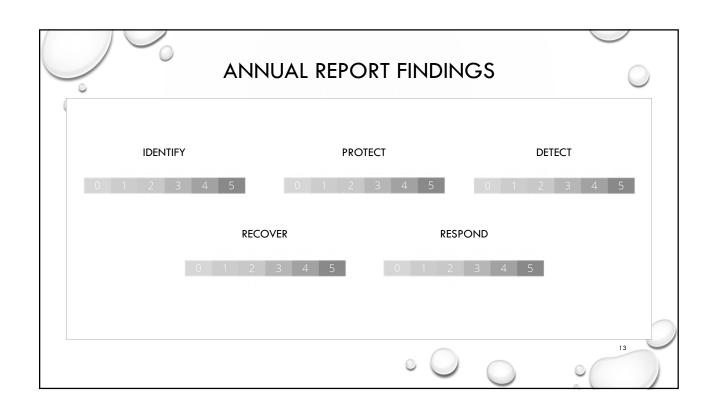
ANNUAL REPORT OVERVIEW

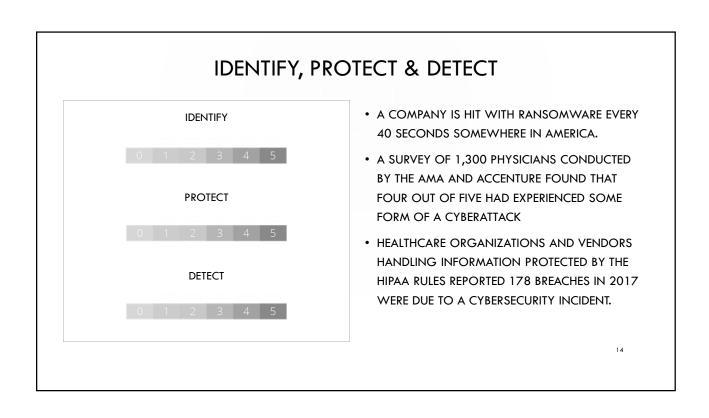
- ANALYZED THE AGGREGATED MATURITY RATINGS OF ASSESSMENTS PERFORMED IN 2017 USING THE NIST CSF AS THE BENCHMARK STANDARD
- PROPRIETARY DATA BASED ON THIRD-PARTY ANALYSIS, NOT SELF REPORTING
- SAMPLE REPRESENTS THE ENTIRE CONTINUUM OF CARE, FROM CRITICAL ACCESS HOSPITALS TO LARGE AMCS TO BUSINESS ASSOCIATES
- DISSECTED FINDINGS BY MULTIPLE CRITERIA: SIZE, REVENUE, TYPE, ETC.



ANNUAL REPORT FINDINGS

- RESULTS SHOW US THAT THERE IS STILL CONSIDERABLE ROOM FOR IMPROVEMENT IN CYBERSECURITY, DESPITE OVER TEN YEARS OF REGULATION
- WE AS AN INDUSTRY ARE NOT EQUIPPED OR PREPARED TO ADDRESS CYBER THREATS OR INCIDENTS WHEN THEY OCCUR, OR EVENT IDENTIFY WHERE RISKS MAY BE
- "A CHAIN IS ONLY AS STRONG AS ITS WEAKEST LINK."

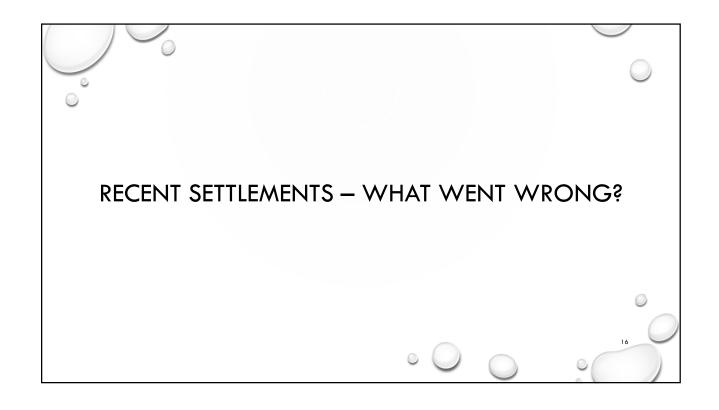


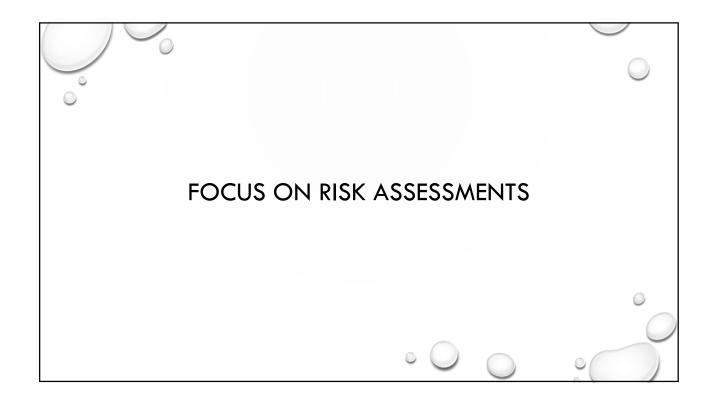


RESPOND & RECOVER

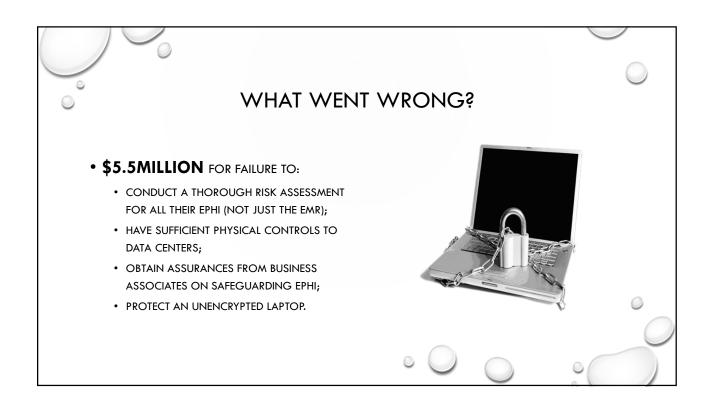


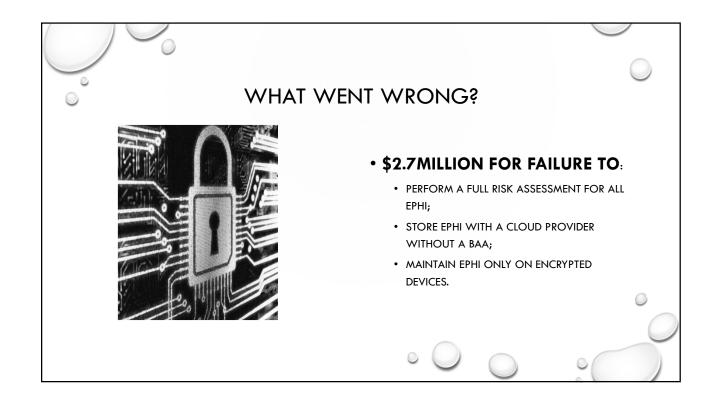
- BETWEEN LOST CHARGE CAPTURE, UNFORESEEN OVERTIME, AND PAYMENT DELAYS PROVIDERS CAN END UP AS MUCH AS \$10M - \$50M IN THE RED QUICKLY
- "IF YOU FAIL TO PLAN, YOU ARE PLANNING TO FAIL!" B. FRANKLIN

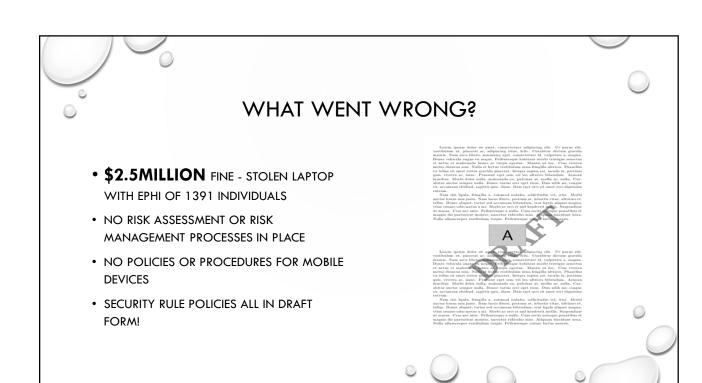








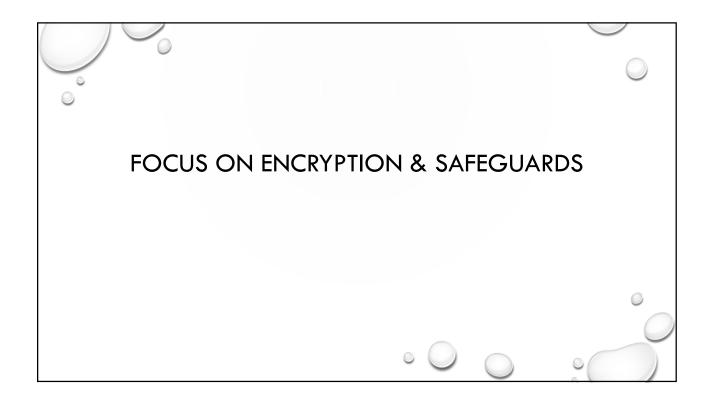


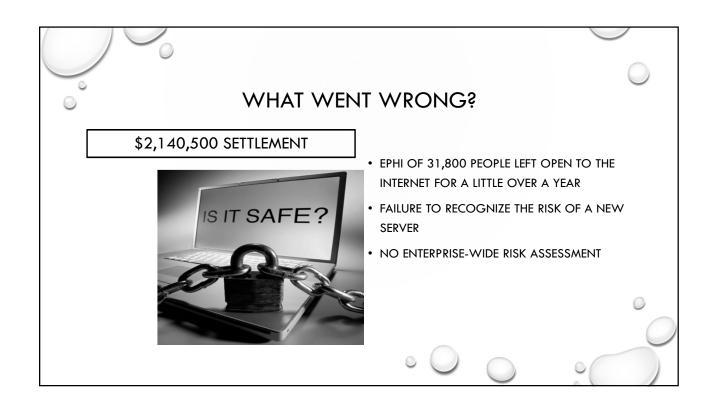


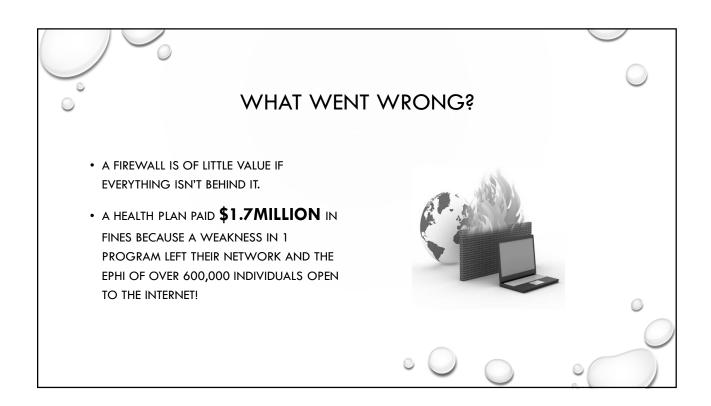
WHAT WENT WRONG

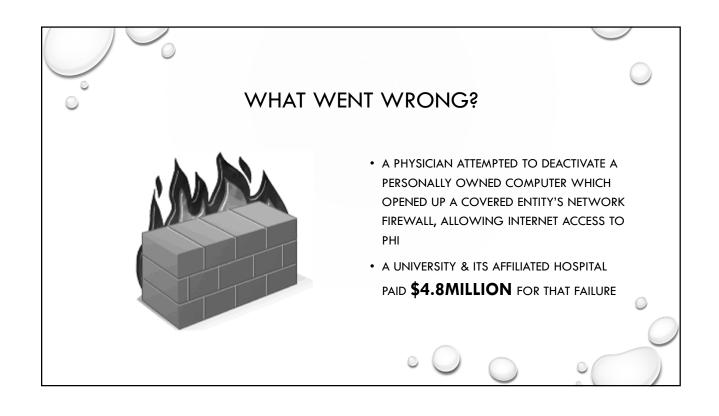
ANTHEM, INC. - \$16,000,000

- 78.8M INDIVIDUALS AFFECTED
 - LARGEST HEALTH DATA BREACH IN U.S.
- GAINED ACCESS THROUGH SPEAR FISHING IN FEB. 2014
- DATA EXTRACTED FROM DEC. 2014 TO JAN. 2015
 - INCLUDED NAMES, ADDRESSES, DATES OF BIRTH, EMAIL ADDRESSES, SSNS, MEDICAL ID NUMBERS AND EMPLOYMENT INFORMATION
- ISSUES WITH RISK ANALYSIS, INFORMATION SYSTEM ACTIVITY REVIEW, SECURITY INCIDENT RESPONSE AND REPORTING, AND ACCESS CONTROLS
- 2 OTHER SETTLEMENTS -
 - NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS (DECEMBER 2016)
 - CLASS ACTION (AUGUST 2018)

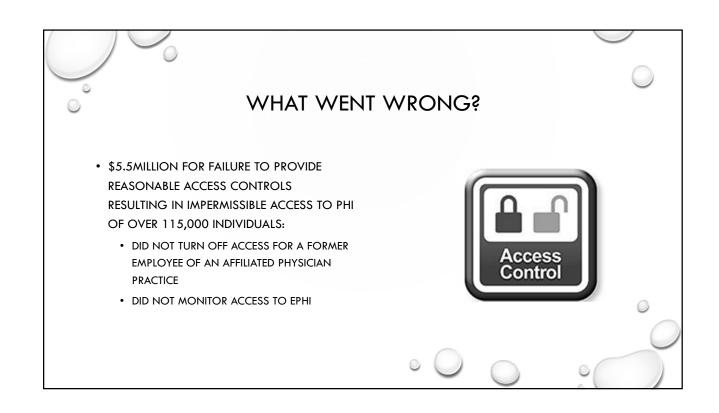












WHAT WENT WRONG

ABC Cases \$999,000

- BOSTON MEDICAL CENTER \$100,000
- BRIGHAM AND WOMEN'S HOSPITAL \$384,000
- MASSACHUSETTS GENERAL HOSPITAL \$515,00
 - BWH AND MGH ARE MEMBERS OF PARTNERS HEALTHCARE AN INTEGRATED HEALTH CARE DELIVERY SYSTEM THAT INCLUDES COMMUNITY HOSPITALS, PRIMARY CARE AND SPECIALTY PHYSICIANS, SPECIALTY FACILITIES, COMMUNITY HEALTH CENTERS AND OTHER HEALTH-RELATED ENTITIES
- ALL THREE INVOLVED FILMING FOR "SAVE MY LIFE: BOSTON TRAUMA"
- SIMILAR TO ANOTHER ABC TV SHOW "NY MED"
 - "NY MED" RESULTED IN A 2016 SETTLEMENT WITH NY PRESBYTERIAN FOR \$2.2M
- OCR FILMING GUIDANCE <u>HTTPS://WWW.HHS.GOV/HIPAA/FOR-PROFESSIONALS/FAQ/2023/FILM-AND-MEDIA/INDEX.HTML</u>

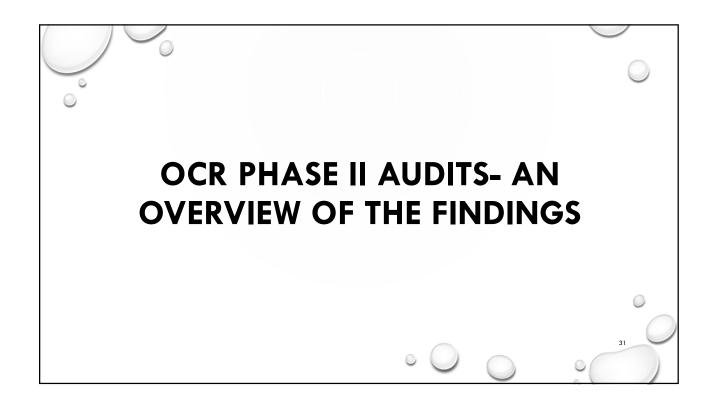
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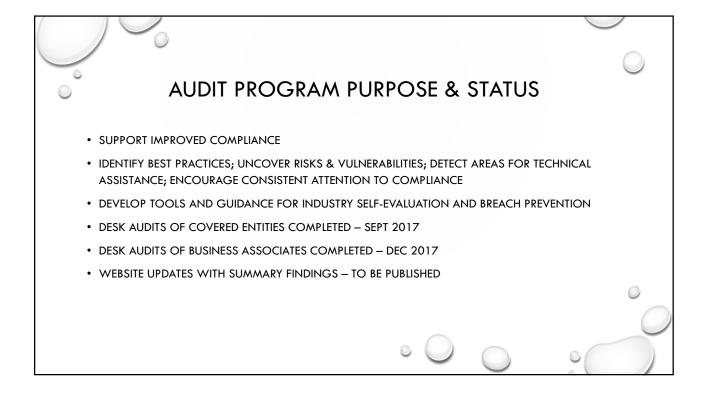


AND IT'S NOT JUST HIPAA

- ALL 50 STATES NOW HAVE SOME TYPE OF DATA BREACH NOTIFICATION STATUTE
 - ALABAMA ADDED IN APRIL 2018
 - ALL BUT 8 CONCERN ELECTRONIC DATA ONLY
- IN JUNE, NEW JERSEY AG ANNOUNCED FORMATION OF A NEW DATA PRIVACY & CYBERSECURITY SECTION
- ALSO IN JUNE, THE NEW CALIFORNIA CONSUMER PRIVACY ACT WAS PASSED
- IN SEPTEMBER, THE MASSACHUSETTS AG SIGNED A \$250,000 SETTLEMENT AGREEMENT WITH UMASS MEMORIAL MEDICAL CENTER FOR A PRIVACY VIOLATION
- AND LET'S NOT FORGET ABOUT GDPR!









PHASE 2 - AUDIT PROVISIONS

- FOR COVERED ENTITIES (166):
 - SECURITY RULE (63): RISK ANALYSIS AND RISK MANAGEMENT;
 - BREACH NOTIFICATION RULE: CONTENT AND TIMELINESS OF NOTIFICATIONS; $\underline{\textbf{OR}}$
 - PRIVACY RULE: NPP AND INDIVIDUAL ACCESS RIGHT
- FOR BUSINESS ASSOCIATES (41):
 - SECURITY RULE: RISK ANALYSIS AND RISK MANAGEMENT AND
 - BREACH NOTIFICATION RULE: REPORTING TO COVERED ENTITY
- SEE AUDITEE PROTOCOL GUIDANCE FOR MORE DETAILS: http://www.hhs.gov/sites/default/files/2016hipaadeskauditauditeeguidance.pdf



CE DESK AUDIT RATINGS

		Rating					
Element #	Provision	1	2	3	4	5	N/A
P55	Notice	2	34	40	11	16	0
P58	eNotice	59	16	4	6	15	3
P65	Access	1	10	27	54	11	0
BNR 12	Timeliness	67	6	2	9	12	7
BNR13	Content	14	15	24	38	7	5
S2	Risk Analysis	0	9	20	21	13	0
S3	Risk Management	2	2	15	28	16	0

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BA DESK AUDIT RATINGS

			Rating							
Element #	Provision	1	2	3	4	5	N/A			
BNR17	Notice to CEs	0	2	4	3	0	32			
S2	Risk Analysis	3	4	16	12	6	0			
S 3	Risk Management	0	5	8	21	7	0			

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INITIAL TAKE-AWAYS

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Best Outcomes

Providing timely notice of breach

Posting of NPP on website

Providing required NPP content

OCR will examine entity practices for lessons learned that can be shared in technical assistance

Most Room for Improvement

Risk Management

Risk Analysis

Enabling Individual Access

Review OCR guidance and technical assistance

