

# Cyber Security and Health Care Privacy

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## Cyber Security and Health Care Privacy

### **The Current Cyber Security and Privacy Legal Landscape and Enforcement Actions**

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Cyber Security and Health Care Privacy

**Emerging Technologies:  
Cyber Security and Privacy Risks  
for Healthcare-related Entities**

Cyber Security and Health Care Privacy

**Addressing Risks from Supply Chain and  
Third-party Vendors to Reduce Enforcement Risks**

# Appendix: Additional Materials

# Privacy, Security, & Compliance Challenges: Vendor Management

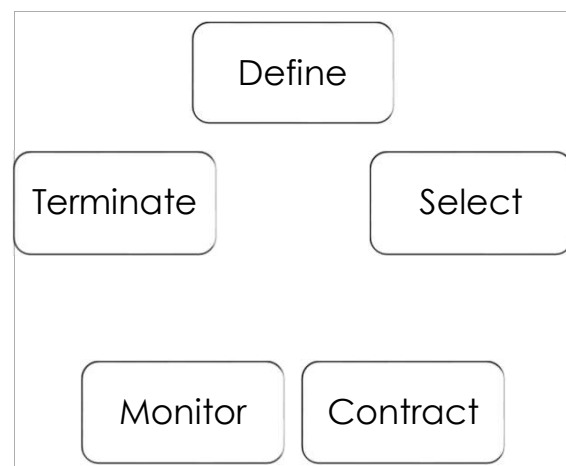
## Healthcare Vendors in the News



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## Vendor Security Must Improve

- ▶ Requirements Definition
- ▶ Pre-Contract due diligence
- ▶ Contract security specifications
- ▶ Performance monitoring
- ▶ Breach Notification
- ▶ Contract termination
- ▶ Documentation



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## Defining Requirements

- ▶ Examine scope of effort
- ▶ Determine what level of Minimum Necessary
- ▶ Identify security requirements
- ▶ Develop SLAs for Privacy and Security
- ▶ Incorporate into RFI, RFP and/or SOW
- ▶ Classify vendor
- ▶ Not all vendors create the same risk



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## Due Diligence: Pre-Contract

- ▶ Tailor requests to scope of contract
- ▶ Security standard followed
- ▶ Include privacy and security questionnaire
- ▶ Request documentation
- ▶ Review third-party assessments
- ▶ Proof of training
- ▶ Conduct site visit
- ▶ Privacy and security incident history



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## Contract Security Specifications

- ▶ Define expectations, material changes, subcontractors
- ▶ Minimum Necessary
- ▶ Transmission, storage & processing
- ▶ Incident response
- ▶ Audit/monitoring
- ▶ Reporting requirements
- ▶ Contingency operations



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## Maintenance

- ▶ For contracts lasting more than six months
- ▶ Periodic audits of key processes
- ▶ Testing of contingency plans/operations
- ▶ Renewal of third-party assessments



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## Breach Notification

- ▶ Timeliness of notifications
- ▶ Assistance in investigation/risk assessment
- ▶ Indemnification for certain costs
- ▶ Notifications to public



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## Contract Termination

- ▶ Termination for cause vs. end of contract
- ▶ Disposition of data if in receipt
- ▶ User/system access
- ▶ Reminder of Minimum Necessary
- ▶ Other continued responsibilities



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## Assessing for Compromise: Business Associate?

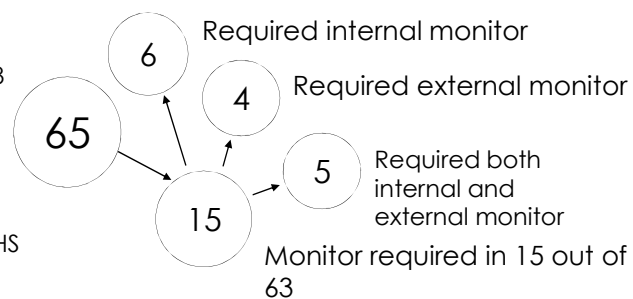
- ▶ Hospital vendor's pager network dispatches imaging and respiratory services. Messages contain PHI. No business associate agreement in place.
  - ▶ PHI identifiable and sensitive
  - ▶ Stored on vendor's IT system
  - ▶ PHI acquired by vendor and workforce
  - ▶ BA agreement now in place
- ▶ Has PHI been "compromised?"



## Enforcement Highlights

63 OCR Settlements  
 \$107 Million  
 In settlements & CMPs  
 13 settlements or CMPs in 2016  
 9 settlements or CMPs in 2017  
 11 settlements or CMPs in 2018  
 2 settlements or CMPs in 2019  
 42 of 67  
 enforcement actions  
 arose from breach reports to HHS

4 Civil Money  
 Penalty Actions  
 \$12,087,800 Total CMPs





## Recent Cases of Interest

### **Touchstone Medical Imaging, LLC**

- ▶ Records exposed almost 308K
- ▶ Settlement amount \$3,000,000
- ▶ OCR got an email informing it of the data compromise
- ▶ FBI alert TMI the same day
- ▶ 2 year RA/CAP

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## Recent Cases of Interest

### **Touchstone Medical Imaging, LLC**

- ▶ Findings
  - ▶ Impermissibly exposed the records of almost 308 K individuals
  - ▶ Failed to implement technical P & Ps to limit access to FTP servers
  - ▶ Failure to have timely BAA (issue identified 5/14, BAA entered 6/16)
  - ▶ Failure to have any BAA, as of RA/CAP TMI still had not entered BAA
  - ▶ No risk analysis until 4/14
  - ▶ Failure to timely respond to known security incident, 5/9/14 to 9/26/14
  - ▶ Failure to timely notify individuals and media, breach discovered 5/9/14 notification occurred 10/3 and 10/4 respectively

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# HCCA Enforcement Compliance Conference

Cyber Security and Health Care Privacy

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## New technology? Vendor? Cloud?

- Update your Risk Analysis
- Update relevant policies and procedures
- Update your data map
- Understand data flow and how and where data is processed
- Understand access points
- Servers/SaaS/IaaS/PaaS- configurations
- HIPAA requires more than just an annual review
- If there is a breach OCR should and will look closely at this

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# Updates To Risk Analysis

- New or Material Change in Uses/Disclosures of PHI
- Data Maps/Asset Inventories
  - Accurate?
  - Reflect real world?
  - Don't rely on terms of contracts

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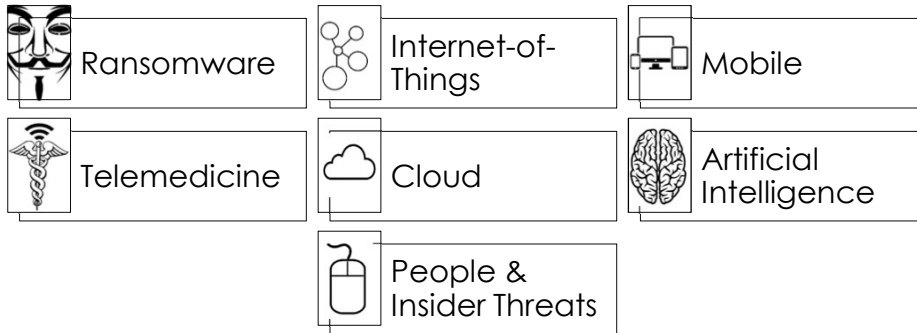
# Risk Analysis?

- Existing?
  - If not, why not?
- Review before agreeing on contract terms
- Is an update needed after execution?
- M&A inherited risk?
- Is client aware of the risks?
  - Existing incidents? Breaches? Bad policies?

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## Emerging technologies: Cybersecurity and privacy risks for healthcare-related entities



## Current & Future Regulatory Landscape

