HIPAA Security Rule Training

Greater Kansas City Dental Society

June 4, 2019

Presented by David Holtzman, JD, CIPP

Executive Advisor, CynergisTek

Today’s Presenter

- Executive Advisor, CynergisTek, Inc.
- Subject matter expert in health information privacy policy and compliance issues involving data protection and breach notification standards
- Experienced in developing, implementing and evaluating health information privacy and security compliance programs
- Former senior advisor for health information technology and the HIPAA Security Rule, HHS Office for Civil Rights

David Holtzman
CynergisTek, Inc.

Agenda

- Objective
- HIPAA Security Rule Basics
- Password Management
- Malicious Programs and Incidents
- Log-in Monitoring
- Security Reminders
- Security Best Practices

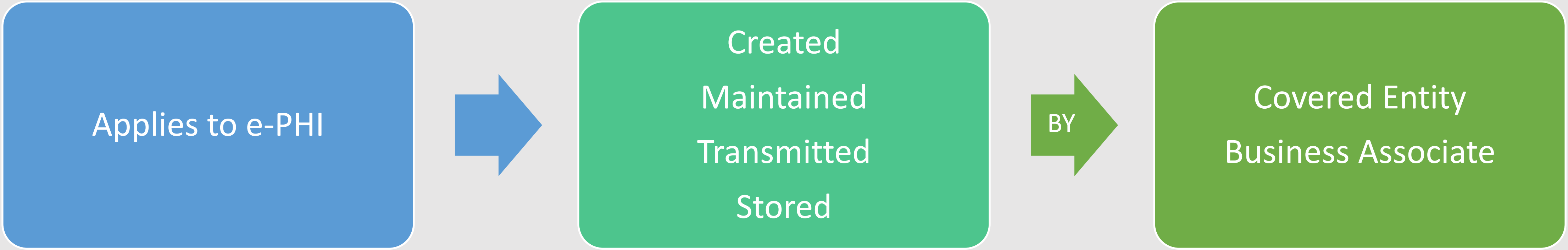
Objective: To Create awareness on best practices required to protect information and assets

The **HIPAA Security and Awareness Training** standard requires an organization train all members in their workforce on its security policies and procedures and includes the following implementation specifications:

- **HIPAA Security Rule Basics**
- **Password Management**
- **Protection from Malicious Software**
- **Log-in Monitoring**
- **Security Reminders**

HIPAA Security Rule

Scope of HIPAA Security Rule



Applies to e-PHI

Created

Maintained

Transmitted

Stored

BY

Covered Entity

Business Associate

The Guiding Principles of Security Rule

- Ensure e-PHI is used, stored, transmitted or received with:
  - ○ **Confidentiality**
    - Only the right people see it
  - ○ **Integrity**
    - The information is what it is supposed to be – no unauthorized alteration or destruction
  - ○ **Availability**
    - The right people can see the e-PHI when needed

Goals of HIPAA Security Standards

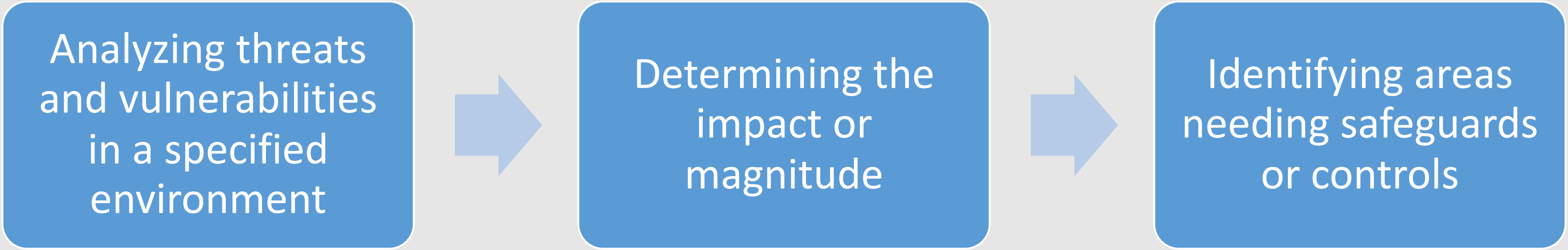
- Protect e-PHI against reasonably anticipated threats or hazards to the security or integrity of information
- Protect against reasonably anticipated uses and disclosures not permitted by the Privacy Rule
- Establish policies, procedures and training to ensure compliance by workforce
  - Administrative Standards
  - Physical Standards
  - Technical Standards

Risk Assessment

- An assessment of threats and vulnerabilities to information systems that handle e-PHI.
- This provides the starting point for determining what is appropriate and reasonable.
- Organizations determine their own technology and administrative choices to mitigate their risks.
- The risk analysis process should be ongoing and repeated as needed when the organization experiences changes in technology or operating environment.
- For additional information: https://www.hhs.gov/hipaa/for-professionals/security/guidance/guidance-risk-analysis/index.html?language=es

What is Risk Assessment?

The process of:



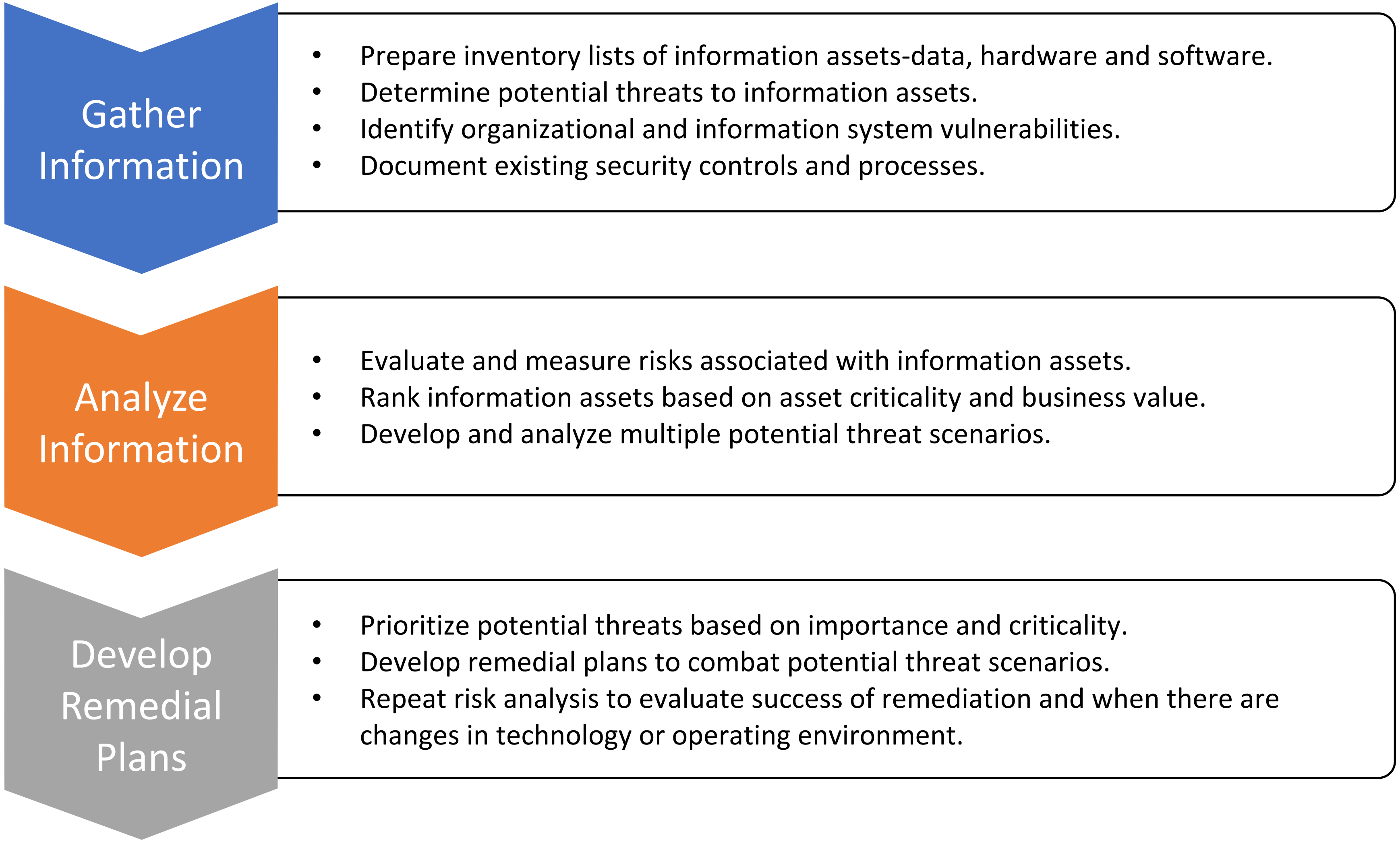
Analyzing threats and vulnerabilities in a specified environment

Determining the impact or magnitude

Identifying areas needing safeguards or controls

For additional information: Security Risk Analysis Tool https://www.healthit.gov/topic/privacy-security-and-hipaa/security-risk-assessment-tool

Performing a Risk Analysis



Gather Information

- Prepare inventory lists of information assets-data, hardware and software.
- Determine potential threats to information assets.
- Identify organizational and information system vulnerabilities.
- Document existing security controls and processes.

Analyze Information

- Evaluate and measure risks associated with information assets.
- Rank information assets based on asset criticality and business value.
- Develop and analyze multiple potential threat scenarios.

Develop Remedial Plans

- Prioritize potential threats based on importance and criticality.
- Develop remedial plans to combat potential threat scenarios.
- Repeat risk analysis to evaluate success of remediation and when there are changes in technology or operating environment.

For additional information: https://www.healthit.gov/topic/privacy-security-and-hipaa/security-risk-assessment-tool

Password Management

Protecting Against Internal Threats: Passwords

- Do not share – never give a password to someone else
- Use strong passwords for your network account and any other applications.
  - Create a password with a minimum of 8 characters
  - Your password should contain at least three of the following four components:
    - Uppercase Letters (A B C D)
    - Lowercase Letters (a b c d)
    - A Number (1 2 3 4)
    - A Special Character (%, ^, *, !, ?)
- Change your password regularly – at least every 90 days.
- You cannot reuse the last 5 generations of a password.
- Change your password immediately if you think it is compromised!
- For additional information refer to: https://www.ftc.gov/news-events/blogs/business-blog/2017/08/stick-security-require-secure-passwords-authentication

Password Security

- Choose a secure password
- Don’t write it down anywhere near your computer, place it in a secure location
- Log-off or lock your workstation when leaving your desk

Password Security User Responsibilities

- Change passwords often
- Don’t use the same password for multiple accounts
- Don’t email or share your password with others
- Do not store or embed your password in shortcuts or scripts

Unauthorized Access

- Unauthorized access includes but is not limited to the following:
  - Sharing your system login information for another’s use
  - Using someone else’s login information to access systems
  - Accessing information that is beyond your “need-to-know” or not within your role
- You are always responsible for securing your login information (credentials such as user IDs, passwords)
- Do not share your credentials

User Responsibilities When Sending Email

- Review Attachments
- Double Check Addresses
- Use Encryption with Confidential Data
- Do Not Use Personal Accounts
- Do Not Share Your Password
- Remember That All Emails Are Saved

- For additional information: https://www.ftc.gov/news-events/blogs/business-blog/2017/08/stick-security-store-sensitive-personal-information-securely

Malicious Programs & Protections

Malicious Programs

- These programs pretend to be legitimate. Their objective is to fool the user into installing them. Then the computer or information system gets infected.
- Malware often comes disguised in email messages that invite you to click on a hyperlink to access another website or down load a file to your computer
- This is often called Phishing
- Do not download or install programs in your computer.
- Allow trained IT personnel to evaluate, install and configure applications that are authorized by the dental practice.

- For additional information refer to: https://www.ftc.gov/news-events/blogs/business-blog/2018/11/cybersecurity-small-business-phishing

Malicious Programs

- Malicious programs invade the computer and are difficult to identify. These programs can come through:
  - Email
  - External media (USB, CD, DVD, etc.)
  - Disgruntled employee installs malicious software
  - Accessing a fraudulent internet address or website
  - For additional information to: https://www.ftc.gov/news-events/blogs/business-blog/2018/12/cybersecurity-small-business-business-email-imposters

Ransomware Symptoms

- Has the capacity to block the user from executing programs on their machine; all the machine presents are sites where to pay the ransom.
- Closes the programs that you’re using.
- Encrypts your data to such an extent that you can’t open files or applications.
- For more information: https://www.hhs.gov/sites/default/files/RansomwareFactSheet.pdf

Ransomware: How To Prevent It

- Continuous monitoring (24 x 7) of external connections to detect and block malicious and unwanted messages
- Anti-Virus and Anti-Spyware applications are in place and updated for all devices and computers that connect to your dental practice information system
- Isolation and inspection of the infected computer, to determine the type of Ransomware and avoid contamination on other computers.
- Preventive blocking of personal e-mail sites from the internal network.
- For more information: https://www.ftc.gov/news-events/blogs/business-blog/2018/11/cybersecurity-small-business-ransomware

Log-in Monitoring

HIPAA Monitoring Safeguards

- Network Protected by Firewalls
- Network Intrusion Detection Systems
- User account activity – computer use is monitored!
- Log-In Monitoring
  - Report unsuccessful log-in attempts to the IT service provider
  - IT technology may be monitoring unsuccessful log-in attempts to your account

HIPAA Violations & Consequences for Employees & Associates:

- Mandatory re-education and training
- Corrective action plan
- Verbal or written warning and/or documentation in HR record
- Disciplinary action, up to termination of employment or contract

- For additional information refer to: https://www.ftc.gov/tips-advice/business-center/guidance/protecting-personal-information-guide-business

Security Reminders

Security Reminders: Periodic reminders to supplement initial HIPAA security training

Examples:

- A “security tip of the day” at the time of logon, or when they access the organization’s intranet.
- A “Security Awareness” column in monthly or quarterly newsletters.
- Notify users of security incidents by broadcast e-mail, including an explanation of the remedial actions that have been taken to prevent a repeat incident.
- Post interesting articles on computer security in the mailroom or cafeteria/breakroom.
- For more information: https://www.healthit.gov/topic/privacy-security-and-hipaa/privacy-security-training-games

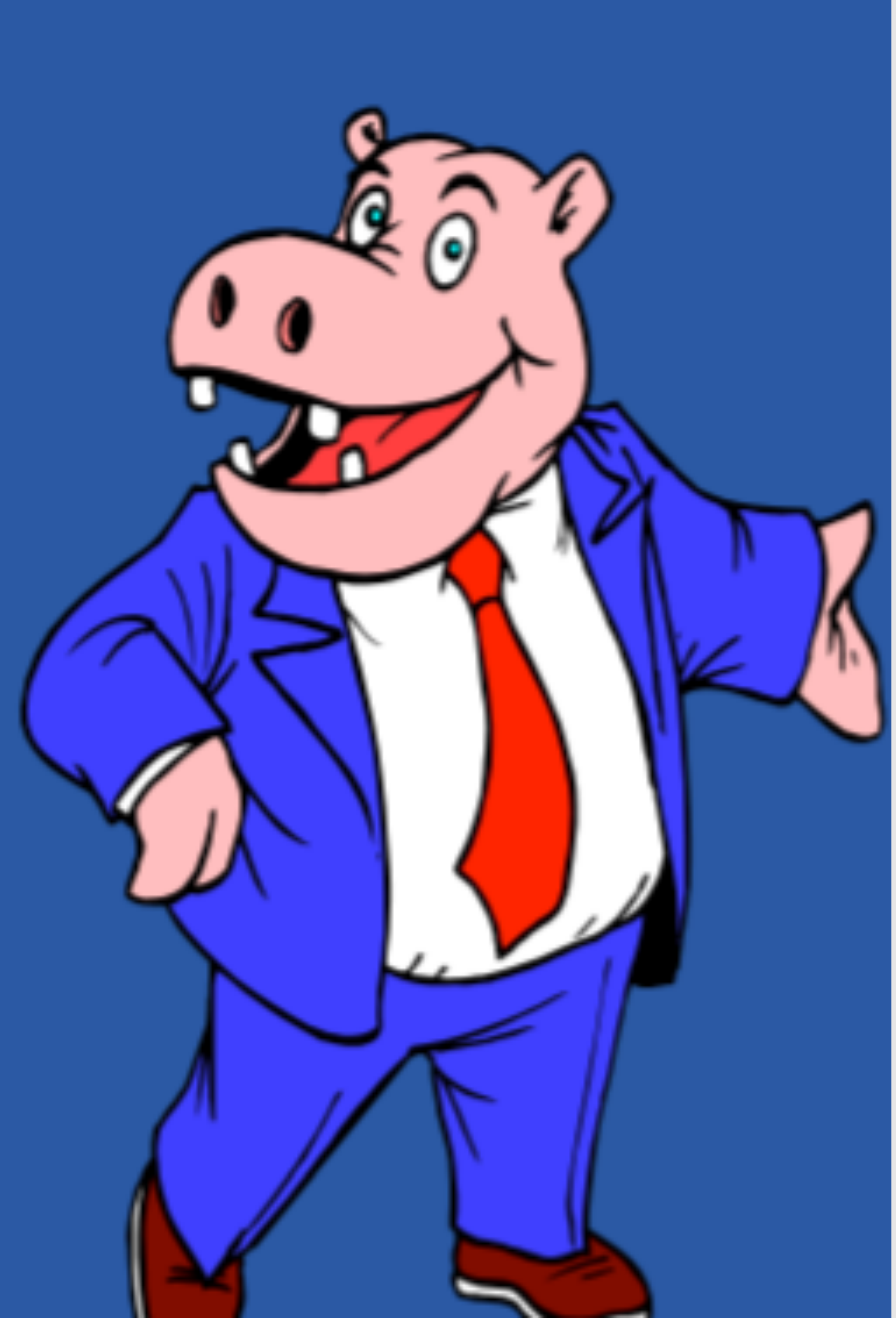
Security Best Practices

Security Best Practices

- Check the authenticity of all communications. Ask before clicking a link or opening a file.
- Do not open e-mails that you are not expecting and if they are from unknown persons.
- Do not click on links or open applications attached on e-mails.
- Only visit reputable web sites.
- Do not access your personal e-mail on corporate devices.
- Do not download or install unauthorized programs.
- For more information: https://www.healthit.gov/topic/privacy-security-and-hipaa/how-can-you-protect-and-secure-health-information-when-using-mobile-device

Resources for Further Learning

- HHS Office for Civil Rights (OCR)
  - https://www.hhs.gov/hipaa/for-professionals/index.html
- HHS Office of the National Coordinator for Health IT (ONC)
  - https://www.healthit.gov/topic/privacy-security-and-hipaa
- Federal Trade Commission (FTC) Data Security for Small Businesses
  - https://www.ftc.gov/tips-advice/business-center/privacy-and-security/data-security



Questions?

Thank you for your attention and participation

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