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Partnering for Electronic Delivery of Information in Healthcare

HIPAA Security Compliance – An Industry Perspective

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Federal Security Environment

- HIPAA Security Rule
  - Contingency Plan
  - Logging and Auditing
- December 2006 Security Guidance
  - Mobile and wireless
- NIST Special Publications
  - Risk Assessment
  - HIPAA Security
- Breach and Breach Notification
  - Encryption
  - Data Destruction
- Additional HITECH Act Requirements
  - Enforcement
- Standards and Certification
- Red Flags

Federal Security Guidance Ideas

- WEDI SPWG: Small Practice Implementation White Paper
- Original OESS Security outlines
- NIST HIPAA Security Special Publications

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Thank You!

- Any Questions?
- For additional information, please contact:

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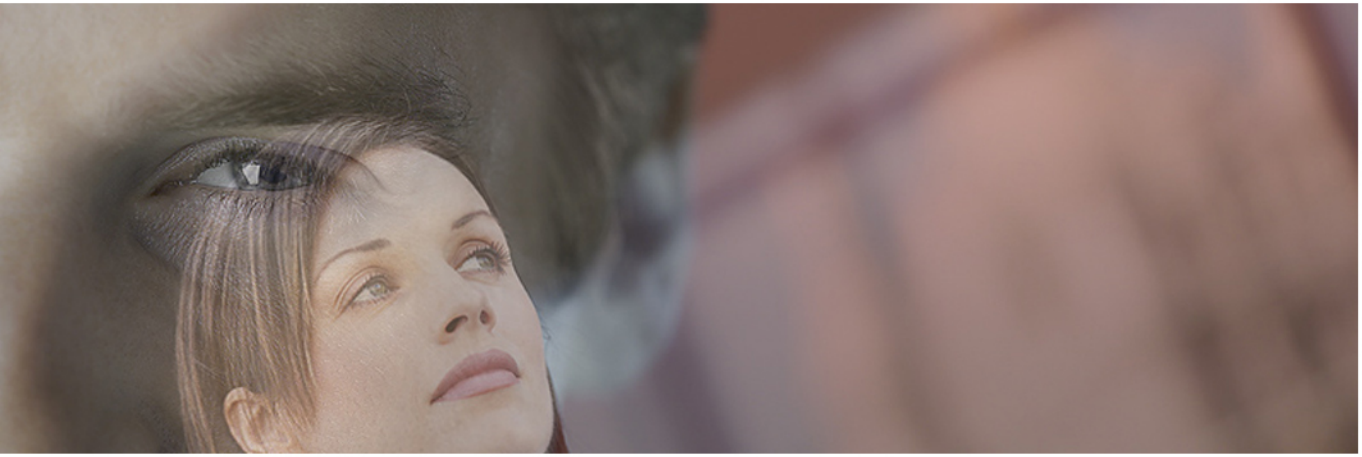

HIPAA Security Compliance: Physician Practice Perspective

Safeguarding Health Information: Building Assurance Through HIPAA Security
OCR-NIST – May 12, 2010

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About MGMA

The Medical Group Management Association mission…

To continually improve the performance of medical group practice professionals and the organizations they represent

MGMA has

- 22,500 members…
- Who manage and lead 13,700 organizations
- With 275,000 physicians
- Providing about 40% of U.S. physician services

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Current Environment

- Increasing numbers of practices are adopting EHRs
- HIEs are growing in number and are impacting practice data flow
- Data sharing for clinical purposes and P4P on the rise
- Patients are increasingly worried that sensitive health information might leak because of weak security
- Successful acceptance of EHRs and PHRs will require earning the public's trust their PHI will be kept private and secure
- Health care lags significantly behind other industries in security
- Providers face unique security challenges and have limited abilities and resources

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Where are Practice Risks?

- Loss of financial data (identity theft)
- Permanent loss of confidential information
- Temporary loss of medical records
- Unauthorized access to confidential information
- Loss of physical assets (i.e., computers, smartphones)
- Damage to practice reputation, patient confidence
- Business continuity
- Government enforcement

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New HITECH Challenges

- Accounting for disclosures for treatment, payment, healthcare operations (practices with an EHR)
  - PHI in multiple locations
  - Collection
  - Usefulness to patient
- Breach notification
  - "Burden of proof"
  - Patient notification issues
  - HHS/Media alert
- Electronic copies of medical records
- Business associates as covered entities
- Sale of PHI/marketing
- Enforcement

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Physician Practice To-Do List…

- ✓ Identify systems that have covered data
- ✓ Implement full Privacy and Security Rule compliance including risk assessment, policies, procedures, etc.
- ✓ Develop breach notification policy and plans– you need this for state laws and start logging breaches now
- ✓ Evaluate existing privacy and security policies and procedures and assess whether current administrative, technical and physical safeguards are sufficient to protect the privacy and security of PHI.
- ✓ Determine if currently encrypt or have the capability to encrypt PHI (the cost of encryption likely is less expensive than addressing a security breach)
- ✓ Review medical record retention and destruction policies to confirm that data is being destroyed properly
- ✓ Train…and retrain staff
- ✓ Don't be in denial – willful neglect will cost you

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Opportunities for NIST/OCR

- Additional “RFIs” to solicit opinions/perspectives from the industry
- Directly link Security with Privacy (especially breach)
- Directly link Security and Privacy with business continuity
- Create “readable” guidance/templates on critical issues and terms such as:
  - Encryption
  - Business associates
  - Minimum necessary
  - Limited data set
  - Privacy notice
- Expand/update and promote the 7-part “Security Series”
- Face-to-face educational sessions / focus groups at conferences
- National provider conference calls when new regulations / guidance released
- Solicited audits (similar to OSHA) / publish (anonymously) the results and recommended corrective actions (i.e., http://www.osha.gov/SLTC/hazardouswaste/osha.html)

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Safeguarding Health Information: Building Assurance Through HIPAA Security
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HIPAA Security Compliance: Health Information Management (HIM) Perspective

Dan Rode, MBA, CHPS, FHFMA
Vice President, Policy and Government Relations

AHIMA
American Health Information Management Association®

AHIMA-HIM

82 year-old nonprofit professional association

7 professional credentials including privacy & security

57,000+ members/ 40 employer types/ 125 different functions in health information and informatics including: collection, abstraction, coding, reporting, transfer, storage, analysis, disbursement, and protection of health information

Association working in a variety of standards and best practice arenas including transactions terminologies and classifications, quality reporting, ISO, and confidentiality, privacy and security

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HIM Current Issues -- HIPAA

- Paper – hybrid – electronic records
- Security Risk Assessment
  - Budget
  - Interface with IT hardware and software changes
  - Lack of control (systems and disclosure) in larger institutions
  - Vendor dependency
- Logging and audit capacity
- Patient access:
  - For paper record/information
  - "Portals"
  - Limitations on "electronic requests"

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HIM Current Issues – HIPAA (continued)

Extremely limited requests for accounting

Use of security varies – it may be in the system but it may not be turned on.

- Integration of systems
- Education by vendors

Understanding of security options and use is low.

Product capacity and demand ➔ ➔

Encryption anxiety

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HIM Current Issues -- Transition

- Certification dependency
- Information (RFI) and Request (RFP)
- Involvement and understanding of local health information exchange (HIE) activities
  - Involvement and understanding of HIM functions and requirements
  - Policymaker understanding
- New relationships and partnerships
- Federal and state requirements – conflicts
- Breach requirements – federal, state, and "risk."
- Legacy systems
- Data integrity!

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HIM Current Issues – ARRA-HITECH

- Minimum Meaningful Use – product limitations
- Maintaining security with data sequestering and individual data "privacy" requests
- Working with business associates – data access issues
- Involvement with patients and security, integrity, and accessibility requirements – understanding?
  - Portal requirements and accessibility
- Understanding of NIST standards
- Use v Disclosure requirements and impact on security requirements and processes
- Authentication anxiety!!!
- Lack of common identifiers – integrity
- Education

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Resources and Contact

AHIMA General Webpage: www.ahima.org
HITECH: www.ahima.org/arra
Positions, comments, etc.: www.ahima.org/advocacy

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HIMSS
transforming healthcare through IT

architects of change

HIPAA Security Compliance – An Industry Perspective

May 12, 2010

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HIMSS Survey Headlines

Despite changes in the privacy and security and landscape:

- Healthcare organizations have made relatively little change in the past year across a number of critical areas in the security environment
- Risk assessments are not universal among responding organizations
- While most organizations don't have a plan in place to respond to a threat or security breach, many actively attempt to determine the cause of a breach at their organization

Survey Headlines

- Organizations are widely using some technologies (audit logs and firewalls) but are not fully leveraging all technologies available to secure patient information
- Audit logs are widely used among the organizations represented in this survey
  - Data from firewalls, application logs and server logs are retained in the audit logs
- Organizations are still using manual capabilities to assess data in the audit logs

Survey Headlines

- Healthcare organizations widely share information with other organizations, such as government entities
  - **This data sharing will increase in the future**
- Healthcare organizations are also increasingly allowing patients and surrogates to access information

New Requirements under ARRA

- Breach Notification
  - Organizations are already notifying
  - **~60% report theft or loss of electronic devices**
- Accounting of Disclosures
  - Regulation writing underway
- Sale and Marketing of PHI
- Coverage of Business Associates
- Enforcement/Penalties

Security Guidance Ideas

- Security Risk Assessment
  - Security Risk Assessment for Small Organizations
  - Data Flow Analysis
- Security Framework/Guidance
  - Deal with multiple statutory/regulatory requirements
- Accounting of Disclosures
- Breach Detection and Response
- Guidance for Business Associates
- Securing Wireless Devices