

# HIPAA Security Rule and HITECH Breach Notification Trends in Enforcement Activity

Nineteenth HIPAA Summit March 9, 2011

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### **Topics**

- How OCR Enforces the HIPAA Security Rule
- HIPAA Security Rule Enforcement Recap
- HITECH Breach Notification Recap
- Some Lessons Learned





# How OCR Enforces the HIPAA Security Rule



### Complaints Alleging a Violation

- Every complaint received by OCR is reviewed & analyzed
- An investigation is launched if the facts and circumstances alleged indicate a failure to comply
- Complaints that allege violations under more than one of OCR's authorities (e.g., privacy, security, or breach notification rules) will be investigated as a single case



# Compliance Reviews

- Reviews policies and procedures of a covered entity to determine compliance with the health information privacy rules
- OCR initiates when a media report or information from another agency reports a failure to safeguard PHI or other indication of noncompliance with the HIP rules
- OCR initiates a review in all breach reports of >500 made to HHS



# HIPAA Security Rule Enforcement Activity



## Security Complaints & Reviews Opened



\* Partial Year

Security Rule delegated to OCR July 27, 2009



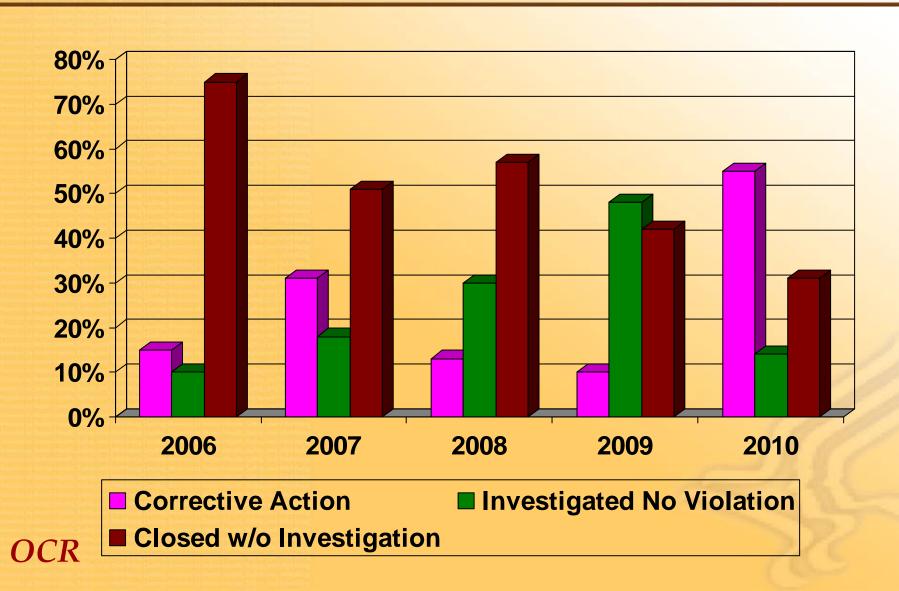
# Security Complaints & Reviews Resolved

	2005	2006	2007	2008	2009	2010	TOTAL
Corrective Action	0	9	41	21	9	70	150
Investigated and No Violation Found	0	6	24	50	41	18	139
Closed Without Investigation	7	44	68	93	36	40	287
TOTAL:	7	59	133	164	86	128	577

**Security Rule delegated to OCR July 27, 2009** 



# Security Closures by Type





#### Most Frequent Security Rule Issues

Standard or Specification	Type of Safeguard	Count
Response and Reporting (R) §164.308(a)(6)(ii)	Administrative	179
Awareness & Training §164.308(a)(5)(i)	Administrative	144
Access Control §164.312(a)(1)	Technical	141
Information Access Management §164.308(a)(4)(i)	Administrative	126
Workstation Security §164.310(c)	Physical	84

**OCR** 



# HITECH Breach Notification Rule Reports and Trends



# **Breach Notification Highlights**

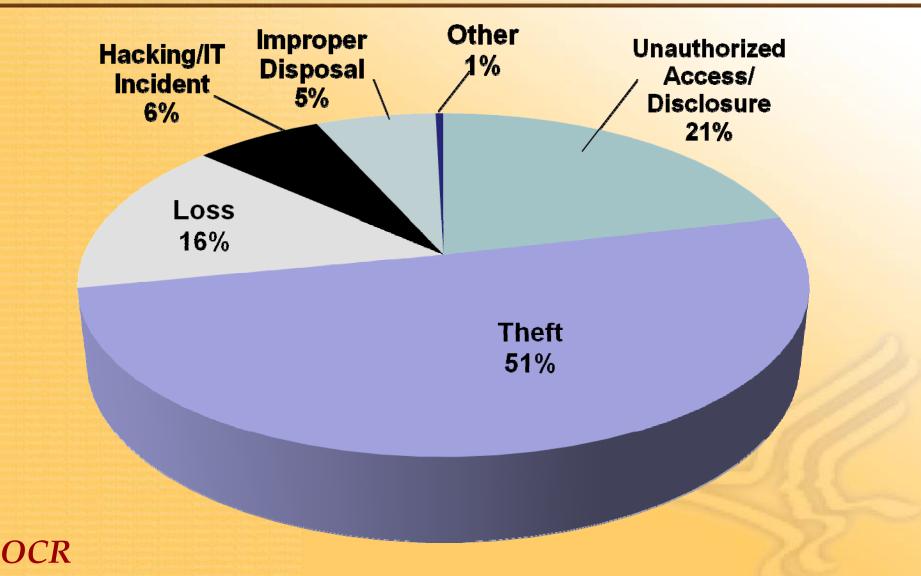
September 2009 through December 2010

- 221 reports involving a breach of over 500 individuals
  - Theft and Loss are 67% of large breaches
  - Laptops and other portable storage devices account for 38% of large breaches
  - Paper records are 21% of large breaches
- 14,000+ reports of breaches of under 500 individuals



# **Breach Notification:**

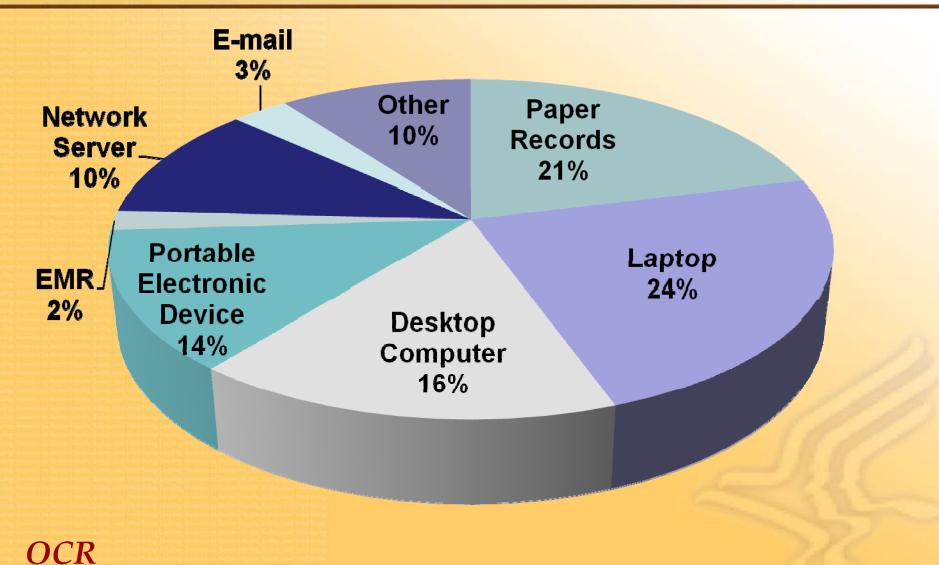
500+ Breaches by Type of Breach





#### **Breach Notification:**

500+ Breaches by Location of Breach





#### **Lessons** Learned

- Reduce risk through network or enterprise storage as alternative to local devices
- Encryption of data at rest on any desktop or portable device/media storing EPHI
- Clear and well documented administrative and physical safeguards on the storage devices and media which handle EPHI
- Raise the security awareness of workforce members to promote good data stewardship



#### Want More Information?

The OCR website, <a href="http://www.hhs.gov/ocr/privacy/">http://www.hhs.gov/ocr/privacy/</a> offers a wide range of helpful information about health information privacy including educational information, FAQ's, rule text and guidance for the Privacy, Security, and Breach Notification Rules.

