



# The AFEHCT-WEDI Internet Encryption Interoperability Pilot

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Kepa Zubeldia, M.D.  
Claredi

## Why a Pilot

- HIPAA NPRM
  - Technology independent
  - Encryption and Digital Signatures
- HCFA's Internet Policy (Nov 24, 1998)
  - Technology independent
  - Encryption and Authentication/Identification
  - Specifies some minimum technology requirements

## Uncertainty in both

- What exactly do I need to do ?
- How can I tell for sure that I am in compliance ?
- How much is this going to cost me ?
- Will my security and encryption software work with the software installed at
  - hospital(s), HMO(s), providers ?
  - Medicare Carrier/Intermediary ?

# Pilot Focus

- Internet only
- Healthcare only, both Medicare and others.
- Administrative simplification transactions
- Business to business
  - Specifically Provider to Payer (or Clearinghouse)
- Integration into provider and payer systems
- Interoperability and legacy systems

## Out of focus

- Dial-up, leased lines, Frame relay, etc.
- Other non-healthcare electronic commerce
- Medical records, other non-transaction data
- General consumer Internet
- Merits of XML, CORBA, EDIFACT, etc.
- Software distribution
- Programming languages
- “My way of doing it is the best”

# Internet

- Communications pipeline
- Web facilities, HTTP, HTML, XML, ...
- EDI transaction support
  - Computer-to-computer, application-to-application
  - No human intervention

# Assumptions

- Firewall in place to protect connection
- Only trading partners in the USA
- Scalable to all of health care
- Multiple pilots
  - Different alternatives
    - to see which one works better
  - Same method
    - to prove interoperability

# Workgroups

- Batch file transfer
- Real Time
- Web Browser
- E-mail
- Virtual Private Network
- Certification Authority
- Final Report



# Batch EDI Workgroup

- Batch EDI file transfers in both directions
  - what encryption ?
    - PGP, encryption required
  - what digital signatures ?
    - PGP, signature required
  - what file transfer mechanism ?
    - FTP, with individual accounts (no anonymous FTP)
    - Specific file name extensions, and/or directories
  - how to identify the trading partner ?
    - PGP digital certificate, login/password not enough

## Batch EDI results

- Simple to use, inexpensive, very efficient, easy to automate or script.
- Creation of FTP account can be automated.
- Both X.509 certificates or peer certification (for small sites) work well.
- Very interoperable. Works well with legacy systems as well as PCs.

# Real Time EDI Workgroup

- Real time EDI transaction transfers between applications
  - what encryption ?
    - SSL version 3, or TLS version 1, minimum 128 bits
  - what user authentication ?
    - digital certificate required at server end, optional at client end for X12, required for NCPDP.
    - X12 Transaction has authentication in the EDI data.
  - what transfer mechanism ?
    - persistent sessions
    - session per transaction

## Real Time results

- Envoy built it... nobody came.
- SSL software libraries are complex to use.
- SSL wrappers are easy to use but have limitations (revocation, access control.)
- One session per transaction inefficient.
- Software vendors eager to work with us and improve their products.
- Great hopes for the future... if they come.

# Web browser Workgroup

- Web based interface standards
  - Assume SSL version 3, or TLS version 1
  - Minimum encryption strength ?
    - 128 bits (HCFA specifies DES3) or more
    - 40, 56 bits must be disabled at server
    - Server requires digital certificate
  - what user authentication ?
    - login / password, or
    - client browser certificates
    - token or smart card optional

## Web browser results

- Easiest to deploy and support.
- Deployment of 128 bit browsers getting easier, still a challenge.
- Strong preference of login/password over the use of client certificates.
- Server access control with client certificates is difficult to implement.

## E-mail Workgroup

- Electronic mail protection. Both encryption and digital signature required.
  - what encryption ?
    - S/MIME, EDIINT-S/MIME, EDIINT-PGP
    - Minimum 112 bits. Recommended 128 bits.
  - what authentication ?
    - digital signatures required
    - acknowledgment of receipt/delivery required

## E-mail results

- Easy to deploy in non-interoperable way.
- Message tracking, acknowledgement of delivery still not fully interoperable.
- Prone to operator (mail sender) errors.
- Difficult to automate in the server.
- EDIINT seems like the best option.
- Needs more work.



# VPN Workgroup

- Virtual Private Network
  - Multi-vendor interoperability
- Authentication issues
  - VPN authenticates network end points
  - HCFA requires end user authentication

## VPN results

- Interoperability among vendors is a problem.
- Single vendor solutions work VERY well.
- Windows 2000 could become the standard.

# Certification Authority Workgroup

- User Authentication and Identification
  - Who needs to be identified ?
    - individual ID, entity ID, servers
  - What needs to be verified ?
    - identity, healthcare license
  - Who needs to verify it ?
    - payer, “registration authority”, or third party CA
  - How to verify the identity ?
    - Strong verification: physical presence before registration authority is required. The application must be notarized.

# Certification Authorities

- Four CAs, one VA in the pilot as of December of 99:
  - ARCANVS, CHIME, Unisys, CitX.
  - Valicert.
- Agreement on common Certificate policies and identification requirements:
  - Individual, Entity, Licensed Individual, Licensed Entity, Server, Licensed Server.
  - High security of authentication using Notary Public.
- Interconnected and replicated repositories:
  - Access via LDAP and HTTP. Some also X.500.
  - National shared virtual backbone with certificates and core data elements.
  - Individual value added directories with additional information.

# Certification Authority results

- Healthcare Certificate Policies, Certificate Profiles, Directory Profile.
- Adequate authentication requirements.
- Certificate mobility essential: tokens or smart cards strongly recommended.
- LDAP access control very effective, but needs do be integrated with applications.
- Directory replication technically difficult.
- Healthcare Root CA recommended.



## More Information

- Draft of final report
  - <http://www.edisec.org/report.html>
- WEDI
  - <http://www.wedi.org/>
- AFEHCT
  - <http://www.afehct.org/>
- Email
  - mailing list: (now inactive)
  - [Kepa.Zubeldia@claredi.com](mailto:Kepa.Zubeldia@claredi.com)

## Report Table of Contents (1 of 2)

- Executive Summary
- Batch file transfer workgroup
- Web browser workgroup
- E-mail workgroup
- Real Time applications workgroup
- Certification Authority workgroup
- Virtual Private Network workgroup
- Reporting workgroup
- Accomplishments, Next Steps, Recommendations



## Report Table of Contents (2 of 2)

- The working proposals
- Certificate Policies
- Certificate Profiles
- Directory Profile
- HCFA Internet Policy
- HCFA - Pilot understandings
- Glossary
- Reports from participants
- CA Master Document

# Pilot Recommendations

- WEDI to create a PAG in conjunction with an AFEHCT Workgroup for creating policy and technical recommendations on Internet Security.
- Educational forum in WEDI.
- WEDI and AFEHCT should work with industry experts to establish, and test against, “reference implementations” in the public domain.

## Pilot recommendations (cont.)

- Pilot to be used as a base for national standards for Internet Security under HIPAA.
- HCFA and rest of industry should consider implementing the security techniques proven during the pilot.

Questions ?