

# 

# "HIPAA-Proof" Your Healthcare Data: Safeguards at the Database Level

Ted Julian VP Marketing & Strategy Application Security Inc.

## Agenda

- HIPAA requirements
- HIPAA Safeguards and Databases
- How To Ground HIPAA Compliance in Databases
  - Vulnerability Management Establish Safeguards
  - Activity Monitoring Flag Safeguard Compromise
- Summary



#### **HIPAA Requirements**

# Privacy Rule - data that relates to:

- Past, present, or future medical condition
- Provision of health care
- Past, present, or future payment
- Requires consent and notification
- Security Rule
  - Administrative Safeguards
  - Physical Safeguards
  - Technical Safeguards
  - Organizational Requirements
  - Policies and Procedures



Administrative Safeguards (164.308)	
Section / Standard	Implementation Specifications
164.308 (a) (1) – Security Management Process	Risk Analysis ®, Risk Management ®, Sanction Policy ®,
	Information System Activity Review ®
164.308 (a) (2) – Assigned Security	®
Responsibility	
164.308 (a) (3) – Workforce Security	Authorization and/or Supervision (A), Workforce Clearance
	Procedure Termination Procedures (A)
164.308 (a) (4) – Information Access	Isolating Health care Clearinghouse Function ®, Access
Management	Authorization (A), Access Establishment and Modification (A)
164.308 (a) (5) – Security Training and	Security Reminders (A), Protection from Malicious Software (A),
Awareness	Log-in Monitoring (A), Password Management (A)
164.308 (a) (6) – Security Incident Procedures	Response and Reporting ®
164.308 (a) (7) – Contingency Plan	Data Backup Plan ®, Disaster Recovery Plan ®, Emergency
	Mode Operation Plan ®, Testing and Revision Procedure (A),
	Applications and Data Criticality Analysis (A)
164.308 (a) (8) – Evaluation	®
164.308 (b) (1) – Business Associate Contracts	Written Contract or Other Arrangement ®
and Other Arrangement	

 $\mathbb{R}$  = Required, (A) = Addressable

<b>TECHNICAL SAFEGUARDS (164.312)</b>	
Section / Standard	Implementation Specifications
164.312 (a) (1) – Access Control	Unique User Identification ®, Emergency Access Procedure ®, Automatic Logoff (A), Encryption and Decryption (A)
164.312 (b) – Audit Controls	®
164.312 (c) (1) – Integrity	Mechanism to Authenticate Electronic Protected Health Information (A)
164.312 (d) – Person or Entity Authentication	®
164.312 (e) (1) – Transmission Security	Integrity Controls (A) Encryption (A)

 $\mathbb{R}$  = Required, (A) = Addressable



Avoid one-offs:

- Consider broader security control / safeguard frameworks
- Make HIPAA controls / safeguards part of this broader framework
- ISO 27001 (formerly ISO 17799) is pretty popular





- Understand IT management & organization
- Blueprint IT infrastructure
- Identify business units that hold patient data
- Develop strategy for administering technology and applications at these business units





- Identify separate application and data owners
- Evaluate IT controls and monitoring
- Engage in risk assessment of controls and monitoring





#### General IT process

- Application and data owner process
- Integrated application-specific process



#### **Common Threat to HIPAA**

## UNAUTHORIZED PATIENT RECORD DELETION, MODIFICATION OR ACCESS

Q1: Where are patient records?A: in transit over the networkB: on a general-purpose hostC: in a database



#### **Are Databases Vulnerable?**

	Oracle	MS SQL Server	Sybase	IBM DB2	MySQL
Default & Weak Passwords					
Denial of Services & Buffer Overflows					
Misconfigurations & Resource Privilege Management					



# **Any Breaches?**

# of Affected Customers	What Was Breached	Date of Disclosure
???	DB	17-Jan-07
800,000	DB	21-Nov-06
19,000	DB	29-Aug-06
200,000	DB	9-Feb-06
40,000,000	DB	17-Jun-05
3,900,000	TP	6-Jun-05
1,400,000	DB	8-Mar-05
1,200,000	TP	25-Feb-05
310,000	??	9-Mar-05
145,000	n/a	15-Feb-05
	Customers   ???   800,000   19,000   200,000   40,000,000   3,900,000   1,400,000   1,200,000   310,000	Customers   Breached     ???   DB     800,000   DB     19,000   DB     200,000   DB     40,000,000   DB     3,900,000   TP     1,400,000   DB     1,200,000   TP     310,000   ??

#### Total Affected Records - '05-present: 100+ million

Source: Privacy Rights Clearinghouse, http://www.privacyrights.org/ar/ChronDataBreaches.htm

# **Any Breaches?**

- Breaches of privacy at insurers and other payers went up from 45 percent last summer to 66 percent in January.
- Most respondents experienced between one and five breaches, but 20 percent reported six or more.
- Yet, Security Rule compliance remains low:
  - Though the deadline passed over a year ago, 80% of payers and only 56% of providers have implemented the Security standards.
  - Of those claiming full compliance, many "compliant" Providers and Payers could not confirm that they had implemented all key Security standards.

Source: bi-annual Phoenix Health Systems and HIMSS study, April & October 2006



- Less than 25% of the 22,964 privacy complaints submitted between April 2003 and September 2006 were investigated
- Of the 5,400 investigated complaints, informal action was taken in 3,700 of the cases.
- In the other 1,700 investigated complaints, the accused health care organizations were pardoned

Source: The 3rd Annual Review of Medical Privacy and Security Enforcement, January 2007

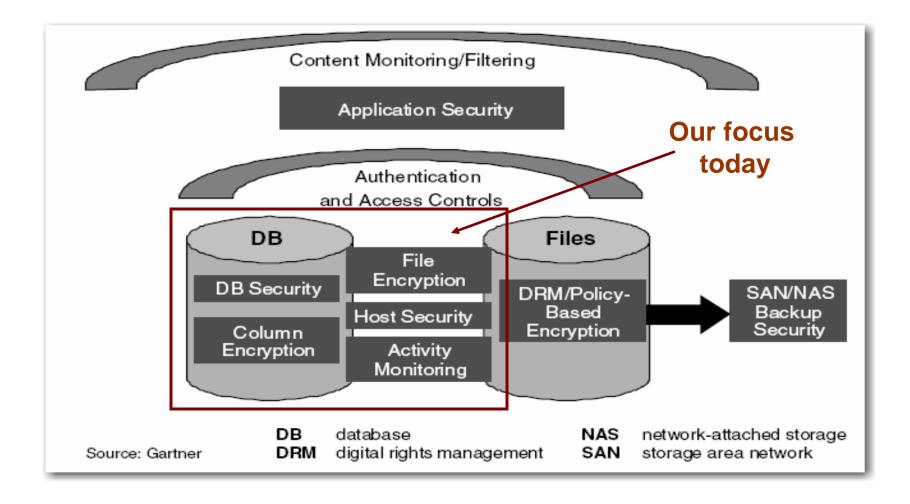


Forrester predicts protecting databases for HIPAA, including non-production, "will become a key requirement...all personal information (PI) and personal health information (PHI) in any data repository or file be secured at all times, and only privileged users should have access" <sup>1</sup>

<sup>1</sup> Source: "Trends 2006: DBMS Security," Forrester Research, Nov 2005



#### **Gartner on HIPAA & Data**



#### **HIPAA & Databases**

- Yikes! What can we do!? How can we:
  - establish safeguards on the database
  - tighten security on the crown jewels
  - ground HIPAA compliance in our databases



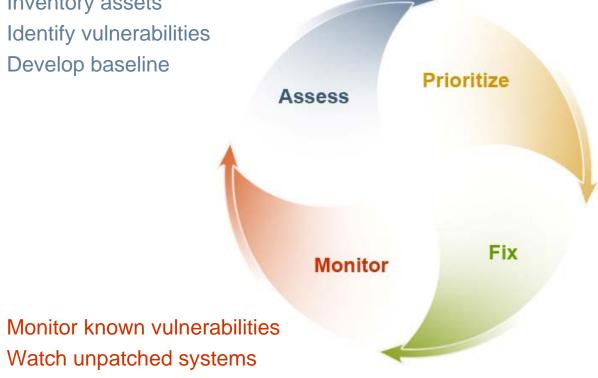
#### **Grounding HIPAA In the Db**

#### Apply the vulnerability management lifecycle...

- Inventory assets
- Identify vulnerabilities

Alert other suspicious activity

**Develop baseline** 

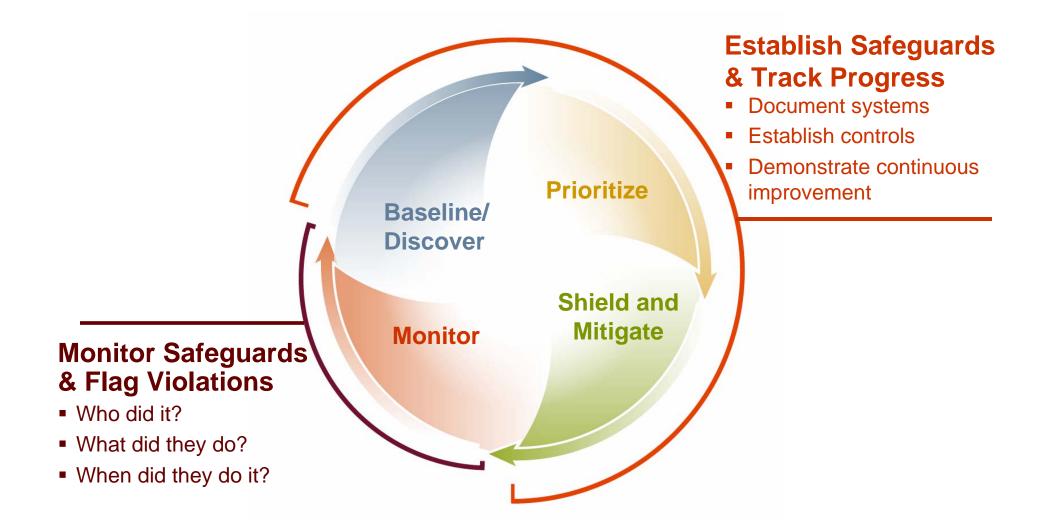


- Prioritize based on vulnerability data, threat data, and asset classification
- Document security plan

- Eliminate high-priority vulnerabilities
- Establish controls
- Demonstrate progress



#### **Grounding HIPAA In the Db**





# Five Components of Activity Monitoring

Auditing Component	What Is It?	Why Do It?
Access & Authentication	What systems were accessed, when, and how	Establish system controls and gather system information
Users & Administrators	Who did it and what did they do	Establish user controls and gather user information
Suspicious Activity	Flags misuse	Insider threats
Vulnerability & Threat	Identifies threats	External threats
System Changes	Baselines desired state, flags variations	Maintain controls & flag misconfigurations



## **Vuln Mgmt Process Benefits**

- Common agreement on safeguards
- Start with simple stuff
- Add more safeguards and more systems over time
- Easy to demonstrate continuous improvement



#### **Summary: HIPAA To The Db**

- There are no silver bullets that bring HIPAA safeguards to the database
- Vulnerability management and activity monitoring can help
  - aligns with existing people, process, and technology
  - solutions can automate the process
- End result is significant:
  - Security for the crown jewels
  - Repeatable and demonstrable HIPAA compliance, grounded in the database

Ted Julian VP Marketing & Strategy Application Security Inc. tjulian@appsecinc.com http://www.appsecinc.com







# Thank you!