



# Anatomy of a Breach: A Near Miss

Massachusetts League of Community Health Centers

Community Health Institute

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Falmouth, MA



# Presentation Overview

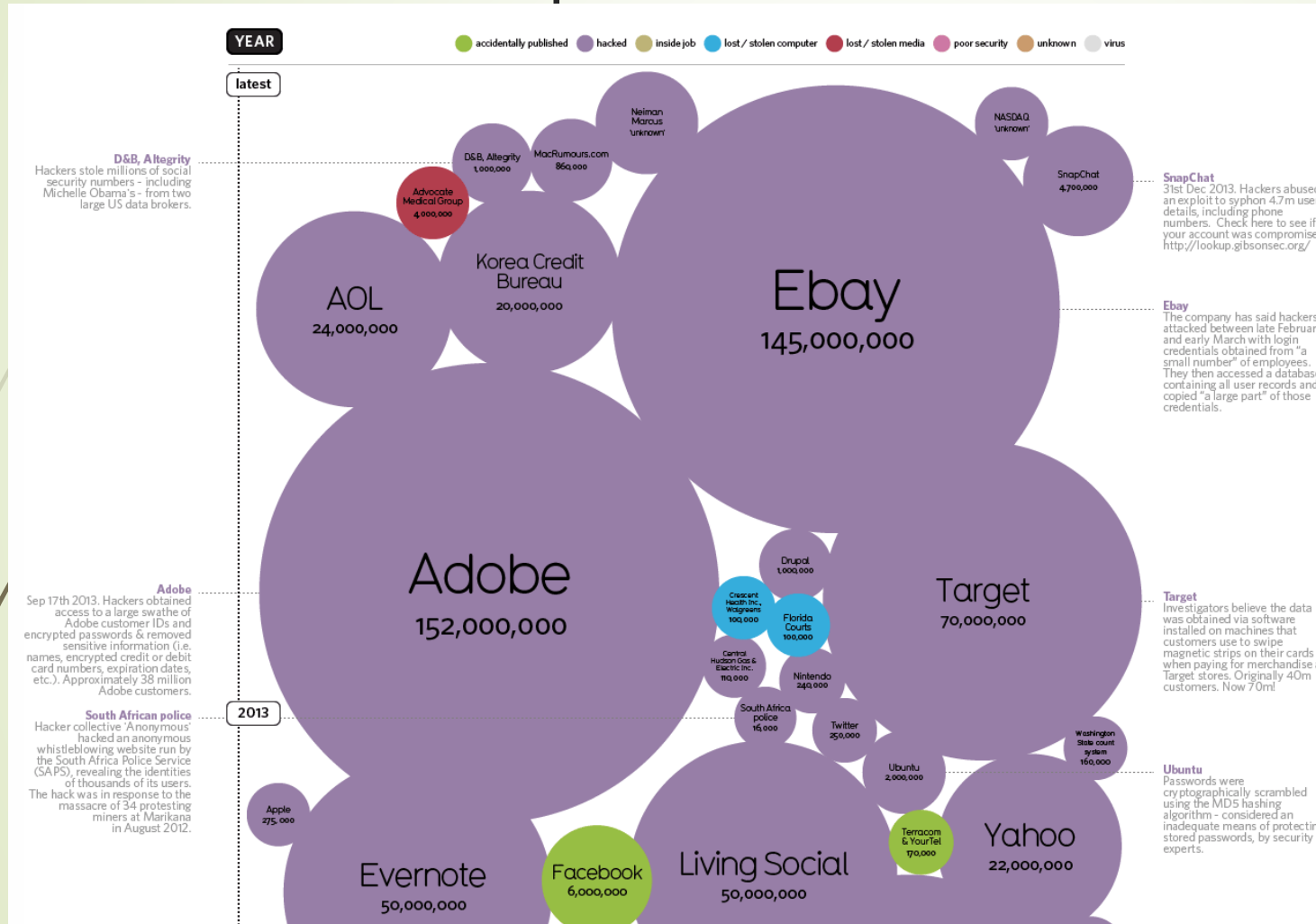
- ▶ Introductions:  
John Cupples, CEO, Cupples Associates Consulting, LLC.
- ▶ The Context
- ▶ Case Study of a Near-miss Breach at Lynn Community Health Center: Lisa Ewing, CHCIO, Lynn CHC.
- ▶ Lessons Learned:  
Alicia Peters-Torrey, Consulting Partner, Cupples Associates Consulting, LLC.

# The Context

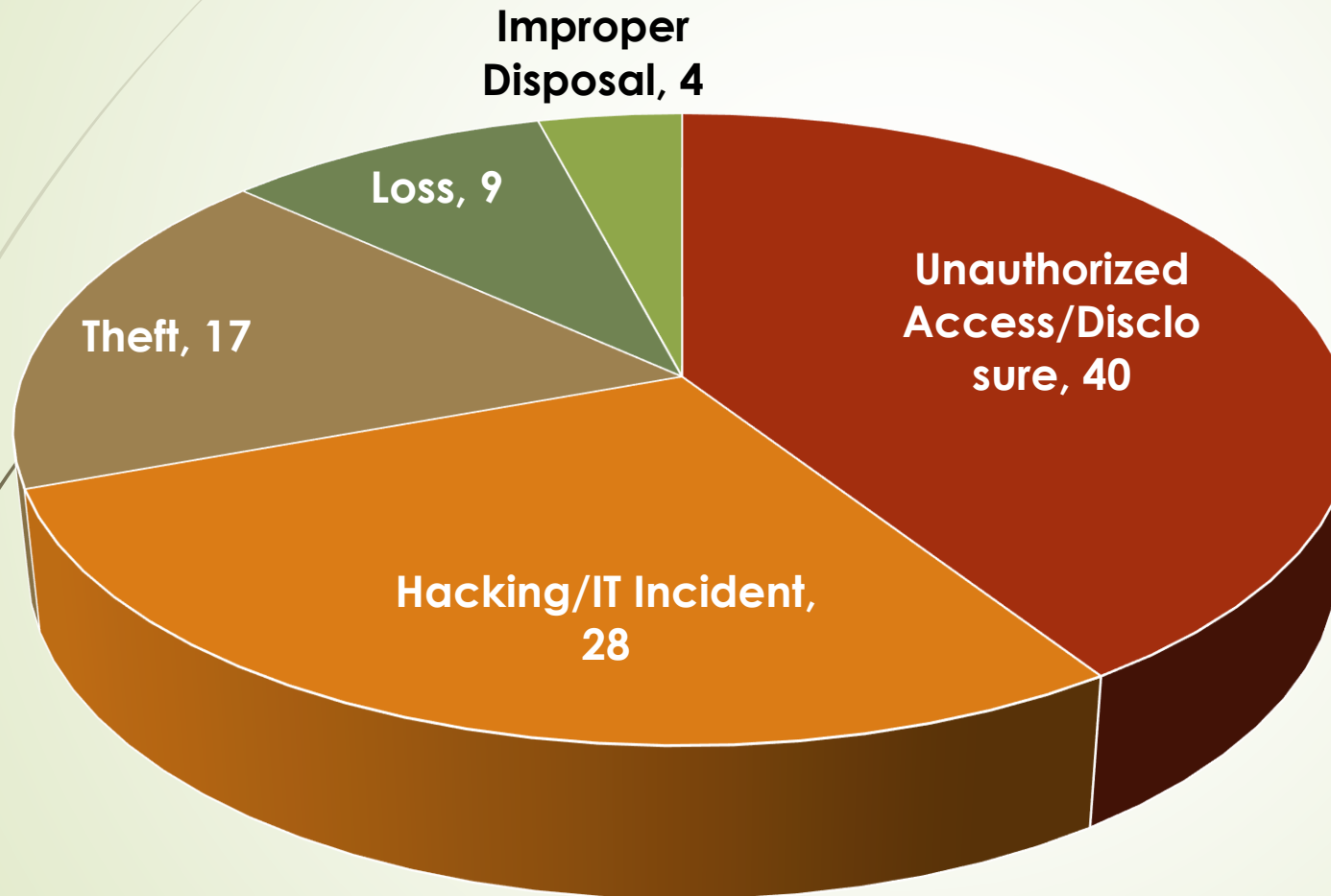
- A tidal wave of Breaches
- An era of Cyber “insecurity”
- Not “If” but “When”

# We're Swimming in an Ocean-sized "Swamp" of Breaches

We must assume with each passing day, our data is less secure.



# 2017 HIPAA Breaches >500



- Total medical records breached: 726,838
- 40 of the 90 Breaches (or 39%) were caused primarily by **workforce member error** or **malicious activity**.

*Not if, but when*





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# Lynn Community Health Center

A Case Study

# Cyber Security at Lynn

- ▶ Cyber insurance
- ▶ Sage Data Security – log analysis and alerts
- ▶ Encryption
- ▶ Firewalls – new Palo Alto
  - ▶ Multiple levels of internet access depending on role
- ▶ Password Protection Practices
  - ▶ Change every 90 days
  - ▶ Minimum 8 mixed characters
  - ▶ Recommend use of phrases for complexity and ease of use
- ▶ Quantros Incident Reporting system
- ▶ Dedicated Information Security Officer with CISSP credential
- ▶ HIM Director – Certified Privacy Officer
- ▶ Regular meetings of our Privacy and Security Committee
- ▶ Weekly tips and information in our ITS Weekly Newsletter
- ▶ Training – orientation and ongoing
  - ▶ Phishing campaigns



# What Happened?

- ▶ Email was received by several senior leadership staff
  - ▶ At first glance, this appeared to be a follow up to an actual request that had come from a partner organization
  - ▶ A staff member opened the link and entered their user name and password
  - ▶ 22 hours passed before we became aware and had the staff member change their password
- ▶ Implemented Incident Response plan (IT Director, Privacy Officer, ISO)
  - ▶ Opened Quantros incident and opened and Incident Response form
  - ▶ Reimaged 2 laptops
  - ▶ Created temporary rule to block emails (I/O) with 'see attached'
  - ▶ Contacted our security partner to review logs
  - ▶ Contacted our legal counsel to review our cyber insurance to ensure we were compliant with the insurance contract (i.e., notifications, etc.)
  - ▶ Reviewed O365 logs
  - ▶ Contacted Cupples Associates for input and to assist with a review of our process

# Incident Response Program

- ▶ Quantros Incident Reporting Application
- ▶ Incident Response form
- ▶ Daily meetings with CIO, IT Director, Privacy Officer, ISO for the duration of the event
- ▶ Engage security partner(s)
- ▶ Post incident Lessons Learned meeting with Privacy and Security Committee
- ▶ Regular review of SRA and Security Audit to ensure we are making progress on our gaps

# A Fortunate Resolution

- Only one document that contained patient data (PHI or PII) was accessed
- Patient was notified by registered mail
- Follow up:
  - Additional traffic monitoring was added that will allow us more insight in the event of future compromises
  - Using the event as a JC training exercise
  - Used the event as an educational tool for staff
  - Used the event to learn more about tools available to us in O365 (logs, auditing reports)



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# Lessons Learned:

From the Lynn Case

From the Increasingly Insecure Context

“Expect the Best,  
Prepare for the Worst,  
Capitalize on What Comes”

– Zig Ziglar

# Expect the Best

## ASSESSMENT

Network Access Control

Network Audit Tools

CyberCrime Climate

Social Engineering

RISK

## MANAGEMENT

Office 365/Cloud Storage

Sage Activity Monitor

Password Management

Phishing Campaign

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*if when a new threat emerges,  
how will your team*

- ▶ **Prioritize**
- ▶ **Decide**
- ▶ **Document**



# Prepare for the Worst

## C.F.R. §164.308 (6) Security Incident Response and Reporting:

(i) *Standard: Security incident procedures.* Implement policies and procedures to address security incidents;

(ii) *Implementation specification: Response and reporting.* Identify and respond to suspected or known security incidents; mitigate, to the extent practicable, harmful effects of security incidents that are known to the covered entity or business associate; and document security incidents and their outcomes

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*if when a breach happens, how will your team*

- ▶ **Respond**
- ▶ **Communicate**
- ▶ **Document**

# Capitalize on What Comes

*~~if~~ when you've  
completed your  
breach response,  
how will your team*

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- ▶ **Learn**
- ▶ **Change**
- ▶ **Leverage**

# Today's Presenters

- ▶ **Lisa Ewing:** Lisa is the CHCIO at Lynn Community Health Center, and has held that position for more than six years. She is a board member as well as past president of New England HIMSS. Lisa can be reached at [lewing@lchcnet.org](mailto:lewing@lchcnet.org)
- ▶ **Alicia Peters-Torrey:** Alicia is a consulting partner with Cupples Associates Consulting. Previously she served as CIO at Joslin Diabetes Clinic. Alicia has a long career in community health center information technology. Alicia can be reached at [apeterstorrey@gmail.com](mailto:apeterstorrey@gmail.com)
- ▶ **John Cupples:** John began his health center career in 1974 as founding director of Southern Jamaica Plain Health Center. After a career in hospital management, he founded Cupples Associates Consulting with a mission of assisting safety-net providers in improving access, quality and efficiency. John can be reached at [jcupples@cupplesassociates.com](mailto:jcupples@cupplesassociates.com)

# For More Information:

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1. Graphical presentation of breach data worldwide:  
<https://informationisbeautiful.net/visualizations/worlds-biggest-data-breaches-static/>
2. HIPAA Basics regarding the Privacy, Security, and Breach Rules:  
<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/HIPAAPrivacyandSecurityTextOnly.pdf>
3. The basics of the Breach Notification Rule: <https://www.hhs.gov/hipaa/for-professionals/breach-notification/index.html>