

HIPAA Compliance & Meaningful Use Tech Tips

HIPAA Compliance Tech Tips

Technical Requirements You May Not Understand

HIPAA Compliance can be a mystery. It can be even more mysterious when you don't understand technology. When you dig deep and try to understand the tasks and procedures you need to protect electronic data you are likely to encounter technical terms—and IT buzzwords— that are confusing. Here are some tips you can use to ensure that your technology foundation is secure enough to support HIPAA compliance. Remember that HIPAA compliance is a fundamental requirement for you to earn and keep your Meaningful Use incentive money.

Overview

HIPAA protects any combination of something that can identify a patient along with anything related to their diagnosis or treatment, in any form—written, verbal, or electronic. The Security Rule provides a framework for protecting electronic Protected Health Information (ePHI.) HIPAA compliance was designed to be flexible enough to apply to health care organizations of all kinds and sizes. Some HIPAA Security Rule



requirements are Required and others Addressable. Addressable specifications are sometimes confused as being Optional, which is not true. The US Department of Health & Human Services says "a covered entity must implement an addressable implementation specification if it is reasonable and appropriate to do so, and must implement an equivalent alternative if the addressable implementation specification is unreasonable and inappropriate, and there is a reasonable and appropriate alternative."

Our advice if you want to achieve HIPAA Compliance is to assume that everything in the Security Rule is required, and you should set a very high bar if you decide not to implement an Addressable item. If you believe that an Addressable specification is not reasonable or appropriate, you must document your decision and hope it stands up to a HIPAA audit or data breach investigation.

Speak Geek?

If you don't understand the terms you should contact an IT Managed Services provider to help you evaluate your network. When it comes to surviving a HIPAA audit or data breach investigation, you need an IT professional. Like the specialists doctors refer patients to, and the tests that they order to see what is happening under a patient's skin, your technology must be evaluated by someone with the proper skills and experience, who must look deep into your network to identify its strengths and weaknesses. Make sure they understand the HIPAA compliance requirements you face. One way is to ask if they employ a Certified HIPAA Security Professional.

Business-class operating system

When you turn on a computer the first thing you encounter is the operating system, usually Windows or Macintosh. What you may not know is that there are different versions, some with little or no security built in to save costs and keep prices low. Consumer versions of Windows and Macintosh do not protect the files stored on the device, and do not allow you to securely connect to a network. You need to have a business-class version of the operating system and make sure it is properly set up to protect stored data and to securely join a network. This means you should not be buying computers for your network from retail stores that offer low-cost consumer products. Make sure you achieve HIPAA compliance by purchasing professional models with business-class security. Also, Windows XP will be losing its security updates in April, 2014, which means that XP computers and medical instruments with imbedded XP computers will no longer be HIPAA compliant and will be at a high risk of being breached. Office 2003 is being retired and carries the same risks.

Business-class E-mail & Text Messaging

Webmail services like G-mail, Hotmail, Yahoo!, and those provided by your Internet Service Provider (ISP) are not secure enough to send Protected Health Information (PHI.) These services do not provide end-to-end e-mail security, and the vendors will not sign Business Associate Agreements. A small medical practice paid a \$ 100,000 fine for using webmail and an online calendar for PHI. For HIPAA compliance you need to use a secure e-mail solution provided by a secure server you own; a secure Cloud e-mail or encryption service from a vendor that will sign a Business Associate Agreement; or by using the secure communications tools included in your certified Electronic Health Record (EHR) system. Faxes are OK between practices and pharmacies, unless your system converts the fax into an e-mail, which cannot be sent to a webmail account. TEXTING USING THE CELL CARRIER'S SYSTEMS IS NOT SECURE OR HIPAA-COMPLIANT. NEVER TEXT PATIENT INFO AND MAKE SURE YOUR ANSWERING SERVICE IS NOT TEXTING.

Secure Network Infrastructure

There are two ways to set up a Windows network, a Workgroup or a <u>Domain</u>. A peer-to-peer <u>Workgroup</u> is a loosely connected group of workstations. A Domain is centrally managed and includes security features. You cannot be compliant with many HIPAA requirements like Information System Activity Review, Unique User Identification, <u>Audit Controls</u>, and Person or Entity Authentication in

a Workgroup. You need a Domain. You may need to purchase a server, convert your existing server into a Domain Controller, or create a secure network in the Cloud. A Workgroup is a deal-breaker if you have any protected data anywhere other than your <u>certified EHR</u> system unless you have another way to log access and retain logs for six years. Keep in mind all the old files you still must retain.

Encryption

While encryption is Addressable for HIPAA compliance, if you don't have it and a device containing health information is lost or stolen, you must notify patients and report the loss to the federal government for an investigation. If a lost or stolen device is encrypted you do not have to notify patients or the government. You can purchase encryption for almost every type of computer. You can even purchase laptops that automatically self-encrypt when you turn them off or close the lid. In 2012 a state health department paid a \$ 1.7 million penalty for a lost unencrypted hard drive. A hospital paid a \$ 1.5 million fine for a lost unencrypted laptop. In 2014 a health care provider paid \$ 1.725 million for losing an unencrypted laptop. Encryption costs a lot less than patient notification and fines.

Passwords and Automatic Logoff

Yes, I know they are inconvenient and annoying. However, HIPAA compliance requires audit trails to identify which user accessed patient records. For this reason individual users must log on and off by themselves, and not allow sharing of passwords or piggy-backing multiple users during a single session. Automatic logoff is Addressable, but the alternative choices are expensive and very inconvenient. While you do not have to use Automatic Logoff, the alternative is to NEVER (ever) allow a patient in the room with an unlocked computer. You would either have to have the doctor wait in an examining room for each patient to arrive and stay until they leave, or hire additional staff to NEVER (ever) leave a patient in a room with an unlocked computer. There are ways to make logging back on more convenient, like fingerprint readers and proximity cards. Accept the facts that you need to have each user log in and out, and that automatic logoff must be used. Like airport security and searches on the way into ball games and concerts, Security is a new way of life.

Firewall

Your network is connected to the Internet by a router or a firewall. A router directs traffic between two networks—your internal network and the Internet. A firewall does the same, but includes security features to block unauthorized traffic to achieve HIPAA compliance. A firewall can also filter Internet traffic to prevent viruses and other malware from reaching your computers (another HIPAA compliance requirement.) You need a business-grade firewall including the additional subscription-based features to properly protect your network. Recently a \$ 400,000 fine was paid when a firewall stopped blocking unauthorized traffic and 17,500 patient records were breached. You can probably figure out that a firewall costs a lot less than the fine and the cost to notify the patients.

Professional IT Staff or IT Managed Services

While it may seem like fun for a doctor to manage your network in his spare time, or a good role for his nephew, brother-in-law, or neighbor who can set up a home network, HIPAA compliance requires either a full-time certified staff or a Managed Services arrangement with a professional IT service provider. Managed Service Providers (MSPs) offer remote services that continually monitor and maintain your network at a fraction of the cost of a full-time IT staff.

First, networks that meet HIPAA compliance need to be configured with Security at multiple levels in mind (firewall, PC's, laptops, tablets, smart phones, and servers.) Then they must be monitored and managed to ensure that Security is still working. IT Managed Service providers use remote monitoring and management tools to continually monitor your network, identify problems before they can result in damage, and keep everything updated with security patches. When the \$ 400,000 was assessed for the firewall that stopped blocking unauthorized traffic, the HIPAA enforcers noted that the problem was not detected for over 10 months and that proper system activity reviews would have alerted the medical practice much sooner. A Managed Services provider would have likely been alerted immediately. Make sure any outsourced provider signs a <u>Business Associate Agreement</u> and implements a HIPAA compliance program. Managed Services = HIPAA Compliance.

