

Dialogue on HIPAA/HITECH Compliance

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Safeguarding Health Information: Building Assurance through HIPAA
Security
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Resolution Agreement with Idaho State University

- ePHI of approximately 17,500 individuals was accessible from August 2010 to May 20, 2011 because an ISU server firewall was disabled;
- ISU's risk analyses and assessments of its clinics were incomplete and inadequate to thoroughly identify potential risks or vulnerabilities to ePHI as well as an assessment on the likelihood of whether potential risks would occur;
- OCR further concluded that ISU did not apply proper security measures and policies to address risks to ePHI and that it did not have in place procedures for routine review of information system activity which could have detected the breach in the firewall much sooner;
- Overall, ISU failed to ensure the uniform implementation of required Security Rule protections at each of its covered clinics;
- ISU agreed to a corrective action plan and paid OCR a settlement of \$400,000.

Total of \$14,883,345 in Resolution Agreements and CMPs Since 2008

Covered Entity	Amount	Date
Hospice of North Idaho	\$50,000	December 28, 2012
Massachusetts Eye and Ear Institute	\$1.5 Million	September 17, 2012
Alaska DHSS	\$1.7 Million	June 26, 2012
Phoenix Cardiac Surgery	\$100,000	April 13, 2012
BCBS Tennessee	\$1.5 Million	March 13, 2012
University of California at Los Angeles Health System	\$865,500	July 6, 2011
Massachusetts General Hospital	\$1 Million	February 14, 2011
Cignet Health of Prince George's County, MD (CMP)	\$4.3 Million (Summary Judgment by U.S. District Court for \$4,782,845.43)	February 4, 2011 (August 28, 2012)
Management Services Organization of Washington, Inc.	\$35,000	December 13, 2010
Rite Aid Corporation	\$1 Million	July 27, 2010
CVS Pharmacy, Inc.	\$2.25 Million	January 16, 2009
Providence Health & Services	\$100,000	July 16, 2008

Total Complaints filed (since 2003): 74,554

Total Cases Investigated: 26,513

Total Cases with Corrective Action: 17,767

Be Smart and Implement Best Practices

Risk analysis, ongoing risk management, and routine information system reviews are the cornerstones of an effective HIPAA security compliance program.



Together, proper security measures and policies help mitigate potential risk to patient information.

Questions?

OCR website www.HHS.gov/OCR