

The Office of the National Coordinator for  
Health Information Technology



# Overview: Office of the Chief Privacy Officer Security-Related Initiatives

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Chief Privacy Officer

Putting the **I** in **HealthIT**  
[www.HealthIT.gov](http://www.HealthIT.gov)





- Chief Privacy Officer position created in HITECH Act
- OCPO's responsibilities include:
  - Advise the National Coordinator on privacy, security, and data stewardship of electronic health information
  - Coordinate with other Federal agencies, State and regional efforts, and foreign countries with regard to the privacy, security, and data stewardship of electronic individually identifiable health information

# OCPO Responsibilities: Privacy and Security



- Policy development, coordination and outreach across HHS, federal government, states and internationally
- Programmatic support
- Research



- Cross agency task force led by OMB and ONC
- Cybersecurity Workgroup
  - Recommended: investigate means of making security as easy as possible for the provider using health IT



# **Security Policy in Some Key Health Related Regulations Other than HIPAA**



- MU Stage 1 requires eligible providers and hospitals to
- Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308(a)(1) and implement security updates as necessary and correct identified security deficiencies as part of its risk management process.
  - Certification criteria E H R must be capable of
    - Automatic log-off
    - Encrypting data in transit in accordance with Annex A Federal Information Processing Standards (FIPS) Publication 140-2



## MU Stage 2 proposed security

- Highlights need to assess the reasonable and appropriateness of encrypting electronic protected health information at rest
- Use secure electronic messaging to communicate with patients (eligible providers)
  - Email
  - Patient portals
  - PHRs



## MU Stage 2 Certification Criteria

If . . .

- E H R technology manages the health information on an end user device; and
- eHI remains stored on device after use of E H R has stopped **then**
- EHI must be encrypted by default (and disabled by a limited set of identified users)



# Patient Protection and Affordable Care Act (ACA)



- Final Rule on Availability of Medicare Data for Performance Measurement
  - Federal Register, vol. 76, page 76542 (!2/07/11)
- Qualified entities (conduct data analytics)
  - Are not considered business associates of CMS
  - Must have a rigorous data privacy and security program to qualify to receive Medicare data
  - Must sign a stringent data use agreement



- Establishment of Exchanges and Qualified Health Plans Final Rule
  - Federal Register, vol. 77, page 18310 (03/27/12)
- State health insurance exchanges must establish and implement privacy and security standards that are consistent with the Fair Information Practice Principles.
  - 45 CFR 155.260



# ONC Programmatic Support



- 62 Regional Extension Centers
  - Working with 132,000 primary care providers
  - 70% of small practice providers in rural
  - 75% of federally funded health centers
- Support health care providers to help them adopt and become meaningful users of EHRs

# Some Recent Security Related Projects



- Data segmentation initiative
- Security training videos
- Mobile devices



- Standards and Interoperability Framework
- Assessing proposed metadata tag standards for privacy
  - Include some which facilitate access control
- Example user stories include:
  - Information related to substance abuse treatment, which is given heightened protection under the law.

<http://wiki.siframework.org/Data+Segmentation+for+Privacy>

# Training Materials – Series of Security Video Games Due for Release Summer of 2012



**Cybersecure**  
Your Medical Practice

0  
Your Score

Can I take my laptop home tonight so I can get caught up on billing for last week? I'm way behind. When I did that last time it really helped me catch up.

make decision

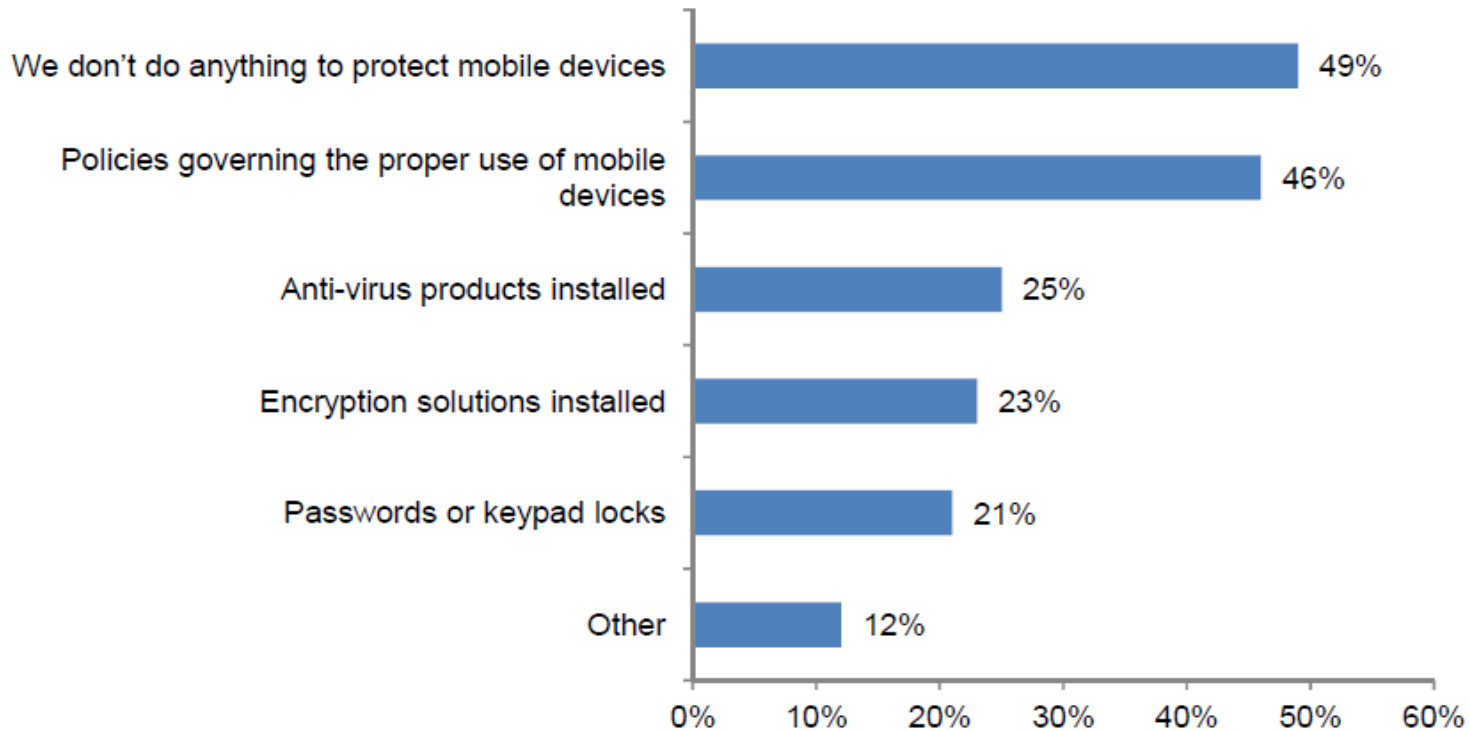
Round 1 Week 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

# Mobile Devices



**Bar Chart 3: Does your organization use any of the following security solutions or procedures to safeguard patient data contained on mobile devices?**

More than one choice permitted



- Ponemon Institute, 2011





- Mobile device good practices videos and materials
  - Mobile Device Roundtable
  - Collected public comments
  - Research project on security configurations of mobile devices



## Smartphone devices:

Device	Operating System	Version
Apple iPhone 4	iOS	4.3.5 & 5.0.1
HTC Vivid	Android 2.3.4	HTC Sense 3.0
Blackberry Curve	OS 6.0 Bundle 2949	6.0.0.668
HTC T9295 Windows Phone	Windows Phone 7.5 OS	7.10.7720.68





## Tablet devices:

Device	Operating System	Version
iPad 2	iOS	4.3.5 & 5.0.1
Motorola XOOM	Android Honeycomb	3.2.1
Viewsonic Viewpad	Microsoft OS	Windows 7 Professional
Viewsonic Viewpad	Android 2.2	1.4
Blackberry Playbook	QNX Software	1.0.8.6067
HP Touchpad	HP webOS	3.0.5
Samsung Galaxy Tab	Android OS	2.2



# Configuration is Key



- LMI conducted tests
- Tests showed the level of security “out of the box” and
- Security can be improved with additional configuring on device
- Full briefing on their findings in the break out session “ONC Mobile Device Project” later today

# Closing Thoughts



We *all* have a role to play in keeping health information private and secure.

- Government should establish P/S policies that are appropriate, affordable and workable
- Vendors should create easy-to-use P/S features and communicate importance
- Providers and staff should understand their role in protecting patient privacy
- Patients should understand their rights and basic means of securing their PHI

# We Are All in This Together





# Questions?