Monthly Cyber Briefing

February 6, 2025





Meeting Logistics





All attendees are on mute.



Questions



Resources

Type your questions Upcoming events, in the Q&A box. slides & resources linked.



Recording

Recording will be provided after event.



Survey

Survey will prompt at the end of webinar.



Agenda & Speakers

- Cyber & Regulatory Update
- The Return of OCR Audits: What It Means and How to Prepare for Potential Action
- Q+A



Andrew Mahler Speaker

Vice President, Consulting
Services, Privacy & Compliance
Clearwater



Iliana L. Peters
Speaker

Shareholder, **Polsinelli** & Former Acting Deputy Director **HHS Office for Civil Rights**



Steve Cagle
Speaker

Chief Executive Officer
Clearwater



Cyber & Regulatory Update

Steve Cagle



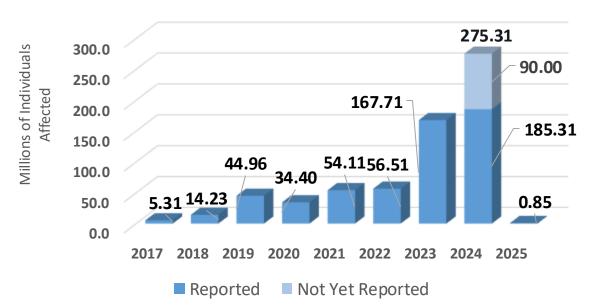


Breach Reports via OCR Breach Portal

OCR Breach Portal Data¹

- 2024 breach data updated to 185.31 individuals from 726 breaches
- 2025 850K individuals reported from 56 breaches, with 23 being related to each other

Healthcare Records Reported or Expected to be Reported to OCR as Beached By Year

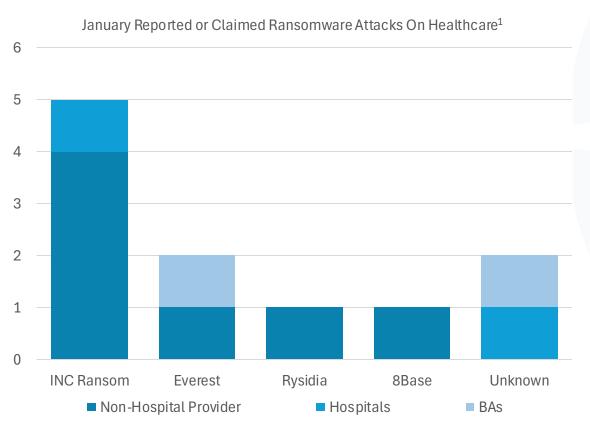


- Change Healthcare Breach Update
 - 2024 includes 100m records reported as breached by Change Healthcare
 - Change Healthcare announced recently they believe an additional 90m individuals were affected
 - Over \$3.1B in costs, exceeding updated estimates²
- Largest breach reported in January was Asheville
 Eye Associates resulting from ransomware attack
 claimed by DragonForce³
- Connecticut Community Health Center disclosed a data breach of 1M records to Maine SAG⁴



Ransomware Attacks – January 2025

In January ransomware gangs successfully executed many attacks in U.S. Healthcare with strong targeting of ambulatory/specialty providers. INC Ransom continuing to be very active.



- At least 11 ransomware attacks on the healthcare space identified¹
- Frederick Health Hospital of Maryland attacked 1/27; treating patients but diverting emergency cases² – Spillover causing strains on other hospitals³
- NY Blood Center attack week of 1/27 compounding impact from existing blood shortage emergency⁴
- New data: Of 402 surveyed healthcare organizations, 67% said they had experienced a ransomware attack in the past 12 months, up from 60% the previous year and 37% took more than a month to recover⁴



¹ Data complied from multiple sources, including Halycon Ransomware Research and Published Media Reports

² Notice | Frederick Health

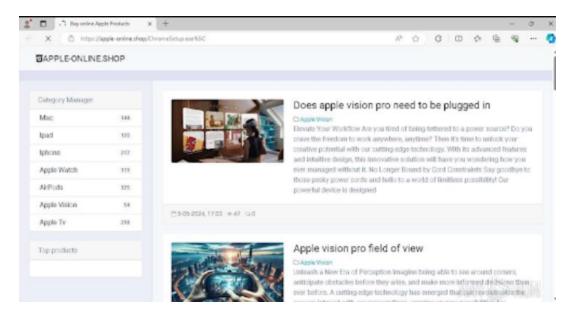
³ Meritus Medical Center dealing with increased patient load

⁴ New York Blood Center Enterprises Cybers ecurity Incident Update - New York Blood Center Enterprises

⁵ Two-Thirds of Healthcare Organizations Hit by Ransomware – A Four-Year High, Sophos Survey Finds | Sophos

Rising Threat Actor: Interlock Ransomware

Interlock Ransomware is a relatively new threat actor targeting healthcare, using double extortion techniques, potentially linked to the Rhysida gang. TTPs noted to be evolving since November.



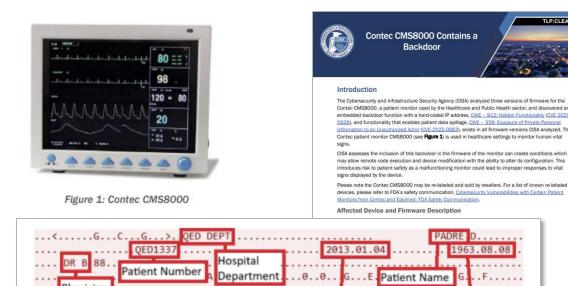
The malicious website used by Interlock

- Tricks victims by luring them to a fake website, which executes download scripts
- Fake updater installs a remote access tool disguised as a legitimate update
- This RAT establishes a secure C2 connection and installs a credential-stealing component
- Evades detection by disabling Endpoint Detection and Response and clearing event logs
- Moves laterally using legitimate tools, e.g., Anydesk, RDP
- Exfiltrates data using cloud storage services



CISA & FDA Alert Backdoor on Contec CMS8000 (also rebranded to Epsimed MN-120) Monitors

Functionality that enables patient data spillage for Contec CMS8000, which can create conditions which may allow remote code execution and device modification with the ability to alter its configuration



- The reverse backdoor provides automated connectivity to a hard-coded IP address from the Contec CMS8000 devices, allowing the device to download and execute unverified remote files
- The IP Address is owned by a University in China
- Once started up, the device will automatically beacon to this IP address and once a connection is established, patient information is then transmitted via port 515 to the IP address
- Researchers were able to perform a simulation, which demonstrated patient information was sent to the IP address immediately upon connection

HIPAA Regulatory Update

HIPAA Security Rule NPRM Resources

HIPAA Security Rule NPRM

Federal Register: HIPAA Security Rule To Strengthen the Cybersecurity of Electronic Protected Health Information

Clearwater Blog:

Proposed HIPAA Security Rule Changes

Polsinelli Blog:

OCR Proposes Regulatory Facelift to the HIPAA Security Rule

Clearwater Webinar

HIPAA Security Rule NPRM: What to Know and What to Do - Clearwater

HIPAA Security Rule Enforcement Actions

5 Resolution Agreements with OCR in January

Each of these settlements found that the regulated entity failed to conduct a compliant risk analysis as required by the Rule

- Elgon Information Systems 1/7/25 \$80,000
- Virtual Private Networks 1/7/25 \$90,000
- UCR Holdings 1/8/25 \$337,750
- Solara Medical Supplies 1/15/25 \$3,000,000
- Northeast Surgical 1/15/25 \$10,000



Recommendations

Recommendations related to topics discussed in this briefing:

Related to Contec CMS8000

- Identify devices on your network using medical device inventory tool (e.g., Ordr, Asimily, Medigate/Xdome)
- If your patient monitor relies on remote monitoring features, unplug the device and stop using it
- If your device does not rely on remote monitoring features, unplug the device's ethernet cable and disable wireless (that is, WiFi or cellular) capabilities

Other recommendations

- Segment networks and ensure that remotely accessible devices are behind firewalls
- Ensure active monitoring is in place that is current with the latest threat intelligence and IoCs
- Continue to educate your users on the latest tactics and techniques as they evolve
- Maintain an accurate inventory of your information systems and your medical devices
- Perform a risk analysis <u>at the information system and component level</u> to identify risks to specific technologies.
 Risk analysis should be well documented and updated as changes to your environment occur
- Assess your critical vendors for risk, and create contingency plans (e.g., blood supply, lab services, SaaS)



The Return of OCR Audits?
What It Means and How to Prepare for Potential Action

Andrew Mahler, Clearwater Iliana L. Peters, Polsinelli



OCR Audits: Background

- Section 13411 of HITECH requires HHS to audit covered entity and business associate compliance with the HIPAA Rules: "The Secretary shall provide for periodic audits to ensure that covered entities and business associates that are subject to the requirements of this subtitle and subparts C and E of part 164 of title 45, Code of Federal Regulations, as such provisions are in effect as of the date of enactment of this Act, comply with such requirements."
- Audits initiated in 2012, 2016, 2024
- November 2024 OIG Report: OCR's audit implementation too narrowly scoped to effectively assess ePHI protections and demonstrate a reduction of risks within the health care sector and oversight was not effective at improving cybersecurity protections at covered entities and business associates



2016-2017 OCR Phase 2 Audits: Findings



Notice of Privacy Practices: 2% of covered entities fully met the content requirements



Right of Access 89% failed to show they were correctly implementing the individual right of access



Breach Notification: 67% submitted notification letters to individuals that were missing one or more pieces of required content.



Risk Analysis: both covered entities and business associates failed to implement effective risk analysis and risk management activities to safeguard ePHI



2016-2017 OCR Phase 2 Audits: Ratings

with the Rules.



Audit Compliance Effort Ratings—Legend	
Rating	Description
1	The audit results indicate the entity is in compliance with both goals and objectives of the selected standards and implementation specifications.
2	The audit results indicate that the entity substantially meets criteria; it maintains appropriate policies and procedures, and documentation and other evidence of implementation meet requirements.
3	The audit results indicate the entity's efforts minimally address audited requirements; analysis indicates that entity has made attempts to comply, but implementation is inadequate, or some efforts indicate misunderstanding of requirements.
4	Audit results indicate the entity made negligible efforts to comply with the audited requirements - <i>e.g.</i> , policies and procedures submitted for review are copied directly from an association template; evidence of training is poorly documented and generic.
	The entity did not provide OCP with evidence of a serious attempt to comply



2024-2025 OCR Audits: The Process

- Notification via email introducing the process
- Will include:
 - Request to schedule 45-minute virtual meeting
 - Request for information about the organization
 - Request for information/documentation related to audited provisions
- Response within 30 calendar days
- Voluntary?



2024-2025 OCR Audits: Provisions subject to the Audit

Risk Analysis

Information
System Activity
Review

Security
Awareness and
Training

Security Incident Response Procedures

Response and Reporting

Data Backup Plan Disaster Recovery Plan Testing and Revision Procedures

Audit Controls

Person or Entity
Authentication





OCR Audits: How to Prepare

OCR Audits: How to Prepare

- Conduct a comprehensive (and documented) Risk Analysis
- Develop and maintain detailed policies and procedures that cover all aspects of HIPAA compliance
- Regularly train staff on HIPAA privacy and security policies; training should be specific to your organization's practices and roles
- Ensure BAAs are in place wherever appropriate/required
- Review/Revise Incident and Recovery Response Plans
- Stay updated with regulatory changes
- Mock Audits and tabletop exercises
- Keep accurate records of all compliance efforts, including training records, risk assessments, and incident handling





Upcoming Events



ViVE | February 16-19, 2025 Nashville, TN

- Clearwater is excited to again serve as title sponsor of the Cybersecurity Pavilion as the ViVE conference returns to Nashville in early 2025.
- Click here for more information and to register



HIMSS Global Conference | March 3-6, 2025 | Las Vegas, NV

- Session Time: Tuesday, March 4 at 10:15am PT Session Title:
 "Mastering Cyber Threat Intelligence to Protect Patient Safety".
- Speakers: Jon Moore, Clearwater Chief Risk Officer and Head of Consulting Services & Client Success & Michal Gross, Manager of Cybersecurity Intelligence for the Cleveland Clinic
- Click here for more information and to book a meeting with us



HPE Miami 2025 | March 5-6, 2025 | Miami, FL

- Stop by Clearwater's dedicated meeting table in the networking lounge to connect with our team of experts—Baxter Lee, CFO, David Kolb, Sales VP, and Richmond Donnelly, Sr. Account Executive.
- Click here for more information and to book a meeting with us



ADSO Summit 2025 | March 16-19, 2025 | San Diego, CA

- Be sure to stop by the Clearwater Kiosk to meet our team, including John Howlett, CMO & SVP and David Anderson, Sr. Account Executive.
- Click here for more information and to book a meeting with us

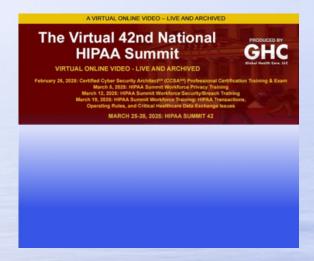


Upcoming Webinars and Virtual Events



Early 2025 Vulnerability Trends and the Future of Data Encryption Risk Hackers are Betting On Now | March 6, 2025 @ 12:00 CST

- Clearwater's March Cyber Briefing
- Steve Cagle, CEO, Clearwater
- Dave Bailey, VP, Consulting Services, Security, Clearwater
- Steve Akers, CTO & CISO, Clearwater



Forty-Second National HIPAA Summit | March 25-28, 2025 - Virtual

- Clearwater is thrilled to participate in the Virtual HIPAA Summit happening March 25-28, 2025! This event brings together top professionals and thought leaders in healthcare compliance, cybersecurity, and privacy to tackle the most pressing issues in healthcare today.
- Click here for our speaking sessions and to register





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