

### Data Privacy and Security Update

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# Agenda

- Basics of a Breach
- Recent Settlements/Enforcement Actions
- State Actions On the Rise
- Need for Cyber Liability Insurance
- Status of the HIPAA Audit Program
- Key Takeaways/ Recommendations



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## Definition of a Breach under HIPAA



Impermissible acquisition, access, use, or disclosure of PHI that compromises the security or privacy of the PHI

#### Three exceptions:

- Unintentional acquisition, access or use of protected health information ("PHI") by an individual under Covered Entity ("CE") or Business Associate ("BA") authority that is made in good faith and within the scope of the individual's authority, and does not result in further unauthorized use or disclosure
- 2. Inadvertent disclosure by authorized individual to another authorized individual at the same CE or BA that *does not result in further unauthorized use or disclosure*
- 3. Disclosure of PHI where CE or BA has *good faith belief* that the unauthorized recipient *would not reasonably have been able to retain the PHI*

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## Presumption of Breach / Risk Assessment

- If the impermissible acquisition, access, use, or disclosure does not meet one of the exceptions to the definition, it is *presumed* to be a breach.
- May overcome the presumption by showing <u>a low probability that</u> <u>the PHI was compromised</u>.
- To assess probability, perform *written* risk assessment of the following factors:
  - 1. The nature and extent of the PHI involved, including the types of identifiers and the likelihood of re-identification;
  - 2. The unauthorized person who used the PHI or to whom the disclosure was made;
  - 3. Whether the PHI was actually acquired or viewed; and
  - 4. The extent to which the risk of PHI has been mitigated.

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Breach Notification Requirements
<ul> <li>CE must notify individuals and Office for Civil Rights ("OCR")</li> <li>BA must notify CE</li> </ul>
<ul> <li>Notice must contain: <ul> <li>Description of Breach</li> <li>Types of PHI involved</li> <li>Steps the individual should take to protect him/herself</li> <li>Steps the CE took to investigate, mitigate and protect from future breaches</li> <li>Contact information/procedure</li> </ul> </li> </ul>
<ul> <li>Timing and method of notification depends on number of individuals involved</li> <li>FOLSINELLI real challenges. real answers. ***</li> </ul>

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