

COMMUNITY HEALTH CARE ASSOCIATION

of New York State

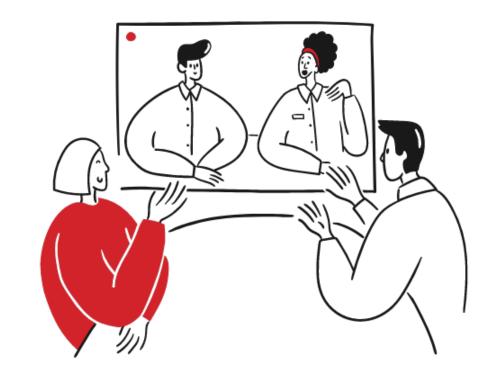
CHCANYS NYS-HCCN presents a three-part learning series with Online Business Systems

# Third Party Vendor Security Best Practices 2024

Session 2 February 13, 2024

### **Zoom Guidelines**

- You have been muted upon entry. Please respect our presenters and stay on mute if you are not speaking.
- Please share your questions in the chat. CHCANYS staff will raise your questions to our speakers and follow up as needed if there are unanswered questions.
- The workshop is being recorded and slides will be shared after the session.



## New York State HCCN Objectives



Project Period 2022-2025







#### 2022-2025 Project Period

- Patient Engagement
- Patient Privacy & Cybersecurity
- Social Risk Factor Intervention
- Disaggregated Patient-level Data (UDS+)
- Interoperable Data Exchange & Integration
- Data Utilization
- Leveraging Digital Health Tools
- Health IT Usability & Adoption
- ✓ Health Equity and REaL Data Collection\*
- Improving Digital Health Tools- Closed Loop
  Referrals\*

\* - Applicant Choice Objective Bold- Objective Carried over into 2022-2025



### **Third Party Vendor Security Best Practices 2024**





Jordan Wiseman, MLS, CISSP, QSA Fellow; Risk, Security & Privacy Team Online Business Systems



2024 Session 2: Third Party Risk

Revisiting requirements, recent developments, and best practices

## Agenda

- ❖ 3<sup>rd</sup> Parties and HIPAA, 405(d), PCI DSS, etc.
- ❖ 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup> ... *n*th Party Risk and Shadow HIT
- Recent developments
- Managing 3rd Party Risks



### **Security Goals**

What are your goals?

- Protect Patient Information
- 2. Comply with HIPAA (et al)
- 3. Avoid regulatory fines and corrective action plans
- 4. Meet requirements of cyber insurance
- 5. Reduce financial <u>risk</u> to the organization



### **Business Goals**

What are your *specific* 3<sup>rd</sup> party security goals?

- 1. Provide patient care,
  - 2. using third party services,
    - 3. without them becoming a problem.

Results. Guaranteed.

## BAAs, DPAs, RACIs, etc.

...but not *necessarily* in that order



In the beginning...

the HIPAA Privacy Rule [applied] only to covered entities...

however, most...use the services of a variety of other

persons or businesses.

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Wait, did you say the *Privacy* Rule?!



# Yes, but it's not comparing, you know...

- The Privacy Rule requires safeguarding ePHI
- The Security Rule is how that's done, more or less



### **The Security Rule and Third Parties**

### **Administrative Controls**

45 CFR §164.308(b)

Business Associates and contractors can handle a Covered Entity's ePHI:

- IF they promise to appropriately safeguard that ePHI, ess associate that is a sub-
- AND those assurances are in a written contract or other arrangement.

### **Organizational Controls**

45 CFR §164.314(a)

Those contracts or other arrangements must contain agreements to:

- requirements, with 5 164.308(b)(2), ensure that a
- EMPLOY the Security Rule safeguards,
- HOLD subcontractors to the same,
- REPORT any security incidents and data breaches of unsecured ePHI.



### **Privacy Rule BAA Requirements**

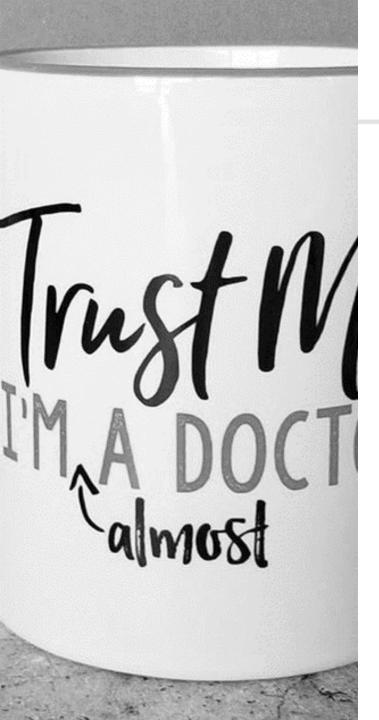
- Define WHAT data may be used
- Define **HOW** those data may be used
- Require **TERMINATING** for non-compliance

And the Business Associate must also promise to:

- ONLY use the CE's ePHI as agreed
- PROTECT the CE's ePHI
- REPORT breaches of the CE's ePHI
- ENABLE access to and corrections to the ePHI
- SUPPORT the CE's HIPAA compliance
- RETURN or delete CE's data after contract



So, BAAs for all the third partible? not quite.



# **Business Associates**

Perform actions:

- That involve using or disclosing ePHI, and
- On behalf of a CE, or
- To provide services to a CE

# Other Third Parties

Perform actions:

- Only as conduit for ePHI, or
- To provide software or support to a CE, etc., and
- That don't normally involve using or disclosing ePHI

Business Associates are directly liable under HIPAA, but BAAs are still necessary.

Other Third Parties do not need BAAs, but they may need DPAs.

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So, what is a DPA?



## **Data Protection Agreement**

- Kind of like a BAA, it details:
  - What data
  - What uses
  - What safeguards
- May include more specific provisions, e.g.:
  - Minimum encryption strength
  - Locale for storage and processing
  - Specific security controls
- Can complement a BAA





### **Due Diligence**

Now that we've reviewed some of the relationships...

...we have some important questions before we enter one.

Do they need to access our ePHI?

Will they receive our data?

Would they affect our security?



### Due Diligence (cont.)

If they need our ePHI...

If they receive our data...

If they'll affect our security...

They need to sign a BAA

Remember:
BAAs are not optional for BAs

- If they're likely to get ePHI, they may need to sign a BAA
- They should sign a DPA

They should sign a DPA



Is that it? Is it all only about HIPAA?



### No, it's not that simple

...it's a big twinkie.

#### In addition to HIPAA:

- ✓ Enhanced health data privacy laws: SAMHSA, STDs, IRB rules, etc.
- GLBA, PCI, state PII privacy laws, etc.



### Other Security Standards...

address third party risk management too!

### HHS 405(d)

#### **Tech Volume 1-10.S.A**

Become familiar with which data, applications, systems, and devices your contractors and vendors are authorized to access.

#### ISO 27001:2022

#### **Annex A.15.1**

Information security in supplier relationships

#### **Annex A.15.2**

Supplier service delivery management

#### **NIST CSF v1.1**

## Supply Chain Risk Management (ID.SC)

The organization's priorities, constraints, risk tolerances, and assumptions are established and used to support risk decisions associated with managing supply chain risk.



### A moment on 405(d)

The HIPAA Safe Harbor Bill was signed into law on January 5, 2021.

It calls for the HHS Secretary to consider whether an entity has

- adequately demonstrated recognized security practices
- that have been in place for at least 12 months, and
- to reduce the potential penalties

which might have otherwise been implemented as a result of potential HIPAA Security Rule violations.



### A moment more on 405(d)

Five prevailing cybersecurity threats to healthcare organizations

- Social Engineering
- Ransomware
- Loss or theft
- Insider threats
- Medical IoT attacks



### A moment more on 405(d)

Cybersecurity practices to address the prevailing cybersecurity threats to healthcare organizations

- Email Protection
- Endpoint Protection
- Access Management
- Data Protection and LP
- Asset Management

- Network Management
- ✓ Vuln. Management
- Incident Response
- Medial Device Security
- Cybersecurity Governance

Results. Guaranteed.

# The advent of $n^{th}$ party risk

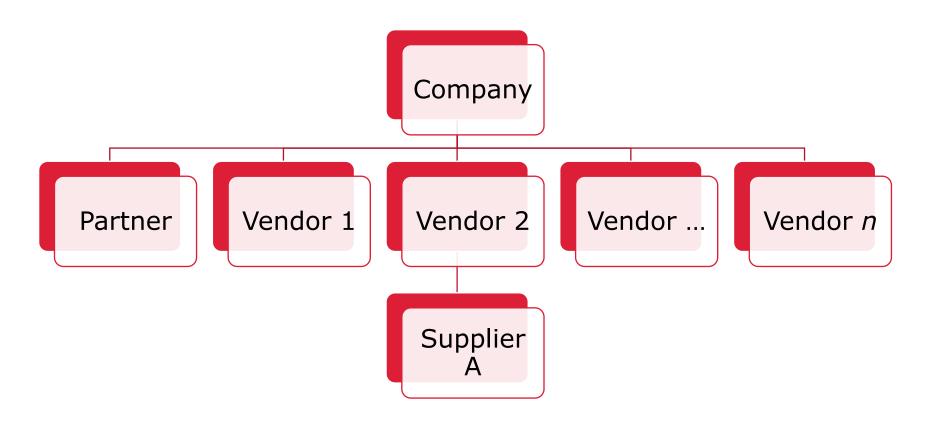
Supply chains, partner chains, and managing the unknowns



Modern products and services depend on a worldwide network of...components...
that [might] contain malicious software or be susceptible to cyberattack"

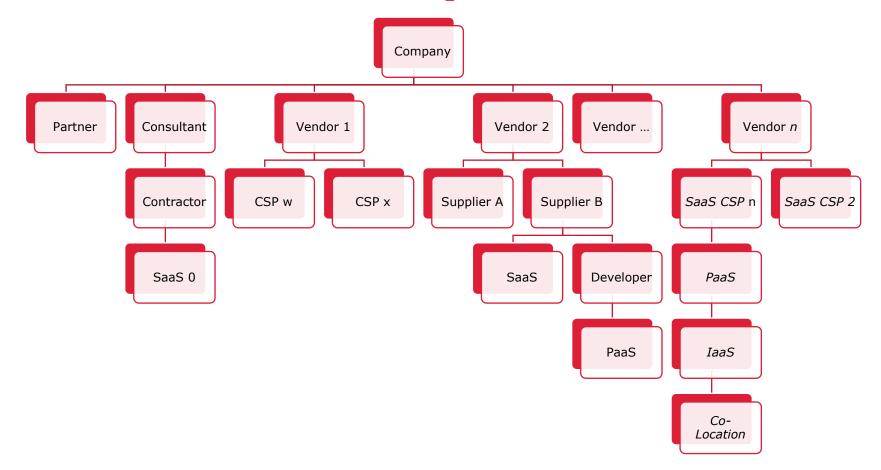


### It used to be (mostly) just 3<sup>rd</sup> Party





## But now...it's complicated.







Complexity leads to interesting and scary scenarios...

HHS 405(d) SBAR Brief: Kaseya VSA Supply Chain Ransomware Attack.pdf



#### Kaseya VSA Supply Chain Ransomware Attack HHS 405(d) Program SBAR Brief July 28, 2021

The 405(d) Situation, Background, Assessment, Recommendation (SBAR) is an HPH focused review of active cyber intelligence and alerts from across federal agencies. Mandated by the <u>Cybersecurity Act of 2015</u> with the goal of aligning industry security approaches, the 405(d) SBARs, backed with the knowledge and expertise of HHS and the 405(d) Task Group, provide the HPH sector with a clear HPH focused understanding, assessment, and recommended mitigations that HPH organizations can apply against these active cyber incidents.

A concise statement of the problem ITUATION: Kaseya, an IT software company suffered a supply chain ransomware attack on July 2, 2021. Many small to medium sized businesses were affected due to ransomware deployed onto Managed Service Provider's (MSP's) customers' computers. Managed Service Provider's (MSP) provide active administrative support for application, infrastructure and network security. On-going hosting support is provided to customers on -site or in a third-party data center. Customers' data were encrypted and held for ransom due to the supply chain attack. It is not known at this time how many organizations have been affected. However, it is estimated that this attack will affect hundreds of companies that utilize the Kaseya Virtual System/Server Administrator (VSA) product. Kaseya's CEO stated in an interview that "between 50-60 of the company's 37,000 customers were compromised. But 70% were managed service providers who use the company's hacked VSA software to manage multiple customers."

Pertinent and brief information related to the situation

ACKGROUND: The MSP's used the Kaseya Virtual System/Server Administrator (VSA) product to assist them with managing their small to medium sized customer's IT infrastructure. In most situation's small to medium healthcare offices do not have an internal dedicated IT department. Therefore organizations can leverage the expertise of MSPs to assist with IT issues such as patching, backups, and maintaining multiple servers. Although MSP's provide useful infrastructure solutions; their software can be compromised which creates many vulnerabilities for small medical organizations. Vulnerabilities such as supply chain ransomware attacks can leave facilities without access to patient data or access to medical devices for days or even months.

Analysis and considerations of options—what we

SSESSMENT: A supply chain attack is an attack where a cyber threat actor infiltrates a software vendor's network and employs malicious code to compromise the software





### The Shadow knows...

...and does good works.

**However**, working outside the rules increases risks from:

- Shadow IT
- Shadow HIT
- Shadow BPO



### Let's SWOT Shadow IT/HIT/BPO

#### **STRENGTHS**

- Enabling health operations
- Supplements capabilities

#### **WEAKNESNES**

- Lack of oversight
- Reinforces silos

#### **OPPORTUNITES**

- Chance to optimize
- Cost savings

#### **THREATS**

- Failure to obtain a BAA
- Inadequate safeguards

Results. Guaranteed.

## Recent developments

Highlighting significant concerns related to third-party risks







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## SecurityScorecard Research Shows 98% of Organizations Globally Have Relationships With At Least One Breached ThirdParty

Information Services Sector Has 2.5 Times the Number of Third-Party Relationships than the Overall Average; Finance Sector Claims the Fewest Third-Party Relationships

February 01, 2023 09:00 AM Eastern Standard Time

NEW YORK—(BUSINESS WIRE)—SecurityScorecard, the global leader in cybersecurity ratings, and The Cyentia Institute, an independent cybersecurity research firm, today published research that found 98 percent of organizations have vendor relationships with at least one third-party that has experienced a breach in the last two years. The study, Close Encounters of the Third (and Fourth) Party Kind, also found that 50 percent of organizations have indirect relationships with at least 200 breached fourth-party vendors in the last two years.

"By having full visibility into the security posture of their third and fourth parties, organizations can work with their vendors to address any cybersecurity gaps they may have in their infrastructure and, in turn, reduce their own level of cyber risk."

"An organizations' attack surface spans beyond just the technology that they own or control, " said Aleksandr Yampolskiy, co-founder and CEO of SecurityScorecard. "Organizations need visibility into the security ratings of their entire third and fourth party ecosystem so that they can know in an instant whether an organization deserves their trust and can take proactive steps to mitigate risk."

The study, which analyzed data from over 235,000 (primary) organizations across the globe and more than 73,000 vendors and products used by them directly (third-parties) or used by their vendors (fourth-parties), offers an in-depth examination of how the

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SECU

#### Social Med



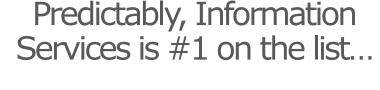




#### Release \



.. ..



BUT

# HEALTHCARE is #3

https://www.businesswire.com/news/home/2023020100 5038/en/SecurityScorecard-Research-Shows-98-of-Organizations-Globally-Have-Relationships-With-At-Least-One-Breached-Third-Party





 $\frac{https://www.businesswire.com/news/home/20230201005038/en/SecurityScorecard-Research-Shows-98-of-Organizations-Globally-Have-Relationships-With-At-Least-One-Breached-Third-Party}{}$ 



June 16, 2022 06:00 ET Updated July 19, 2023 09:29 ET Medical Information from Hospital Websites

Experts say some hospitals' use of an ad tracking tool may violate a federal law protecting health information

By Todd Feathers, Simon Fondrie-Teitler, Angie Waller, and Surya Mattu

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STAT

A tracking tool installed on many hospitals' websites has been collecting patients' sensitive health information—including details about their medical conditions, prescriptions, and doctor's appointments—and sending it to Facebook.

The Markup tested the websites of Newsweek's top 100 hospitals in America. On 33 of them we found the tracker, called the Meta Pixel, sending Facebook a packet of data whenever a person clicked a button to schedule a doctor's

("classList": "\_Link+\_actionable+\_link+\_readOnlyText+\_InternalLink+m ain", "destination": "https://mychart.piedmont.org/PRD/app/communication-center/conversation?id=ID REDACTED BY THE group associated with a particular disease—but the data collected by pixels on hospitals' websites is more direct. And in sharing it with Facebook, experts said, health care providers risk damaging patients' trust in an increasingly digitized health system.

The Meta Pixel collects sensitive health information and

The Meta Pixel installed on Piedmont Healthcare's MyChart portal sent Facebook details about a real patient's upcoming doctor's appointment, including date, time

shares it with Facebook

the patient's name, and the name of their docto

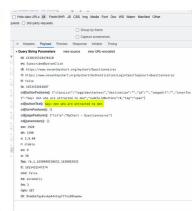
Patient name

Date and time of appointment



See our data here.

GitHub



The Markup found that filling out a survey through Novant Health shared sensitive information like sexual orientation with Facebook via the Meta Pixel. Source: www.novantmychart.org www.novantmychart.org, www.novanthealth.org

"Almost any patient would be shocked to find out that Facebook is being provided an easy way to associate their prescriptions with their name," said Glenn Cohen, faculty director of Harvard Law School's Petrie-Flom Center for Health Law Policy, Biotechnology, and Bioethics. "Even if perhaps there's





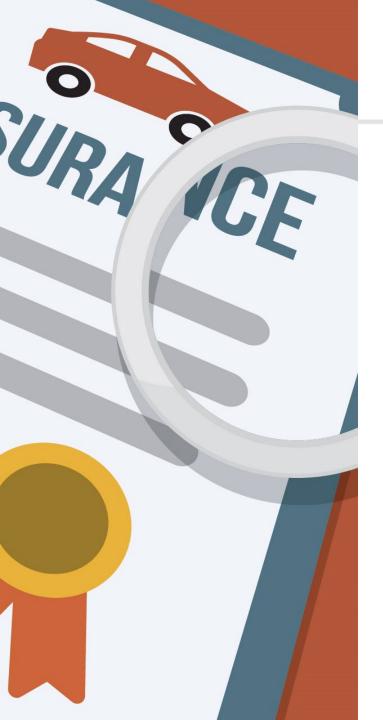


#### Existing Law:

- FTC Act
- Washington state's My Health My Data Act

#### Proposed:

- New York: Amendments to Privacy
  Standards for Electronic Health Products
- Massachusetts: Consumer Health Data Act
- Illinois: Health Data Privacy Bill



# **Insurance Requirements**

You may be asked:

- If you have a vendor management program
- For existing contracts or templates
- About supplier incidents and breaches

Breach Insurance is becoming expensive and harder to get!

# **Insurance Savings**

Vendor management may:

- Help reduce insurance premiums
- Help you obtain or retain coverage
- Cover third-party breaches, or part of your response

Don't forget to ask your vendors if *they* have breach insurance!

Results. Guaranteed.

## Managing 3<sup>rd</sup> party risks

Praxis, praxis, praxis your vendor risk management process.



## **Establish a vendor security policy**



- Require appropriate agreements (e.g., BAAs, DPAs, etc.)
- Require initial and regular vendor risk assessments
- Include the right to audit in contracts; periodically execute
- Consider mandating industry accepted control frameworks



## Define minimum security for sharing



- Acceptable protocols for data transmission (SFTP, SCP, HTTPS,etc.)
- Encryption requirements, including algorithms and strengths
- Are faxes allowed?
- Is secure email an option?



## **Define minimum access requirements**



- IAM and SSO requirements (SAMLv2, OIDC, UI-automation, etc.)
- Multi-factor, attribute, and "frictionless" authentication
- Machine-to-machine and non-interactive access
- How long can access to the data be retained?



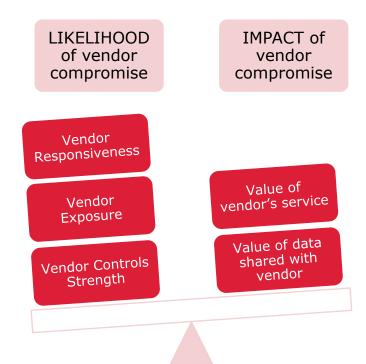
#### **Assess vendor risks**



- Assess the risk from a vendor before engaging them
- Document the results and keep an inventory
- Regularly re-assess, as often as appropriate (based on the risk)
- Implement compensating controls, if needed



## An example vendor risk assessment



	IMPACT		
LIKELIHOOD	LOW	MODERATE	HIGH
LOW	LOW	LOW	MODERATE
MODERATE	LOW	MODERATE	HIGH
HIGH	MODERATE	HIGH	HIGH



### Monitor vendor compliance



- Periodically review any independent assessments, e.g., SOC 2 Type II, ISO 27001, PCI AOCs, etc.
- Track and review reports of incidents, breaches, activity reports and AODs
- Consider other relevant metrics (even non-security)
- Regularly meet with your contact; make sure issues are corrected.



## Manage relevant changes



- Contract refreshes
- Have our processes, technology, or patterns changed?
- Does this vendor represent technical debt?
- Are there new services or changes on the vendor side?



### Dress rehearse your IR/DR/BC plans



- Involve everyone possible
- Practice insider threats, e.g., data-theft on the Orient Express?
- Ransomware, public disclosures, and even malicious reporting are real
- Know how long it takes to investigate, contain, and restore

## Thank You

## Questions?



#### **Next Cybersecurity Session:**

**Privacy and Security Aspects of Artificial Intelligence** 

Tuesday, March 19, 12-130PM

**Register for Session 3 Here** 

**Incident Response Tabletop Workshop** 

New York, NY In-Person Event

Tuesday, April 16, 10:30AM-3:30PM

**Register Here** 

Limited availability!



### **Workshop Evaluation Survey**

Please share your feedback on this session. This should take less than 3 minutes to complete.

#### **Survey Link:**

https://forms.office.com/Pages/ResponsePage.aspx? id=YSZI7iDhjEqs\_ICzVbYzooHiZ0zMAXIKutjkObJvztFU NTZaVFdGQUpaVzNXQIITNIA2TlowWINNMC4u





