

Good afternoon, HCCs–

In just over 5 days, the Office for Civil Rights has announced HIPAA settlements for two academic medical centers totaling more than \$5 million. The violations included the following:

- Storing PHI on unencrypted laptops/portable devices
- Storing PHI in the cloud without having a Business Associate Agreement in place with the cloud vendor
- Sharing passwords on systems that contained PHI
- Failing to implement physical security for devices that contained PHI

The two institutions, Oregon Health & Science University and the University of Mississippi Medical Center, paid \$2.5M and \$2.7M, respectively, to settle the allegations. Let's learn from their mistakes.

**Please ensure all workforce members (employees, students, trainees, volunteers) in your HCC are reminded to do the following IMMEDIATELY, if they have not already done so:**

- Ask their Tier 1 or IT representative to encrypt ALL portable devices used for University business (including simply checking email)
- Remove all PHI from cloud-based storage systems unless the user knows the cloud system (1) is managed by a storage vendor that the user KNOWS has a Business Associate Agreement in place with OU (ask Purchasing) or (2) is a storage system provided by OU/OU IT specifically for

storing PHI and other confidential information (ask Tier 1s/IT reps or IT Security).

-Stop sharing passwords/log-in credentials on devices or systems that contain PHI. Ask for a separate password if one is needed.

-Secure equipment that stores PHI, such as portable ultrasound and x-ray machines. Ensure the HCC's Facility Access Control policy is being followed so that only authorized individuals have access to areas where this equipment is stored. (HCC managers have a copy of the Facility Access Control policy.)

Thank you for your help in protecting our patients', research participants', and health plan enrollees' PHI. If you have questions about the above or any other HIPAA issue, please contact me.

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