From: Raines, Jill (HSC)
To:

Subject: OCR Settlement
Date: Wednesday, January 25, 2017 1:32:49 PM

Good afternoon, Tier 1s and IT Representatives –

Last week, the Office for Civil Rights announced a $2 2M penalty against a covered entity for, among other offenses, maintaining PHI on an unencrypted pen drive. The fine was also based on the fact that the covered entity had told OCR previously that it would take certain corrective actions, but it did not do so.

As you are probably aware, following the theft of an unencrypted laptop in 2016, the University represented to OCR that the Health Sciences Center would implement certain corrective actions, including completing the encryption of all portable devices and implementing the device registration process that you have all been involved in. The $2.2M penalty described below makes clear that OCR expects us to have fully implemented the device registration process in a timely manner and confirms that we are subject to fines if we do not.

You have been and will continue to be a critical part of the encryption and device registration process. Please make sure that you have complied with the procedures from IT on how to register the portable devices in your area – that you have completed **each** of the required installations, including Pulse Secure, on current devices and that you continue this process for all new devices entering the areas you support. If you have any issues with completing the steps provided by IT, please see the Wireless Access Standard requirements at http://it.ouhsc.edu/policies/documents/WirelessAccessSecurityStandard.pdf or contact IT immediately for assistance. If you are having any issues with getting cooperation from the individuals you support, please contact your Business Manager (copied here) or my office and we will assist you.

We all have a role in the effectiveness of the University's HIPAA compliance program, but your role is especially key to that effort. Thank you for your help!

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HIPAA settlement demonstrates importance of implementing safeguards for ePHI

The U S Department of Health and Human Services, Office for Civil Rights (OCR), has announced a Health Insurance Portability and Accountability Act of 1996 (HIPAA) settlement based on the **impermissible disclosure of unsecured electronic protected health information (ePHI). M**APFRE Life Insurance Company of Puerto Rico has agreed to settle potential noncompliance with the Privacy and Security Rules by paying **$2.2 million** and implement a corrective action plan With this resolution amount, OCR balanced potential violations of the HIPAA rules with evidence provided by MAPFRE with regard to its present financial standing MAPFRE is a subsidiary company of MAPFRE S A , a global multinational insurance company headquartered in Spain MAPFRE underwrites and administers a variety of insurance products and services in Puerto Rico, including personal and group health insurance plans

On September 29, 2011, MAPFRE filed a breach report with OCR indicating that a **USB data storage device (described as a "pen drive")** containing ePHI was stolen from its IT department where it was left overnight According to the report, the USB data storage device included complete names, dates of birth and Social Security numbers The report noted that the breach affected 2,209 individuals MAPFRE informed OCR that it was able to identify the breached ePHI by reconstituting the data on the computer on which the USB data storage device was attached OCR's investigation revealed MAPFRE's noncompliance with the HIPAA Rules, specifically, a **failure to conduct its risk analysis and implement risk management plans, contrary to its prior representations, and a failure to deploy encryption or an equivalent alternative measure on its laptops and removable storage media** until September 1, 2014 MAPFRE **also failed to implement or delayed implementing other corrective measures it informed OCR it would undertake.**

The Resolution Agreement and Corrective Action Plan may be found on the OCR website at https://urldefense proofpoint com/v2/url?u=http-3A__www hhs gov_hipaa_for-2Dprofessionals_compliance-2Denforcement_agreements_MAPFRE&d=CwIFaQ&c=qRnFByZajCb3ogDwk-HidsbrxD-31vTsTBEIa6TCCEk&r=Uwzi50RQ7KVJAWE2DA3HmxgYBLC3wV3nwXD68IY8jsU&m=V5u6KDAOfN9XqvPLR0CBaXEFdVliyw_yAaNPBplA-ew&s=p4-DbUpOkTbbv5pUAQ5mBLKR3nFMyUOadxGNE13Myck&e=/v2/url?u=http-