AUDITING TECHNIQUES TO ASSESS FRAUD RISKS IN ELECTRONIC HEALTH RECORDS

OBJECTIVE

Increase your IT vocab so that you can assess the risks related to your audits of EHRs and/or EHR related data

AGENDA

What is an EHR?

challenges facing ALL auditors and assessing risks

copy&paste / cloning

electronic signatures

versioning

access (password) controls

logging

BACKGROUND

2009 American Recovery & Reinvestment Act

HITECH ACT

electronic health records

meaningful use

incentive payments \$\$\$

IT'S AN EHR! DUH!

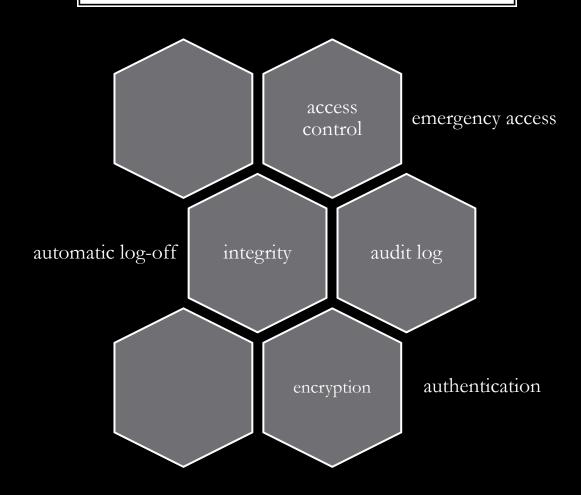
HITECH ACT

electronic health record

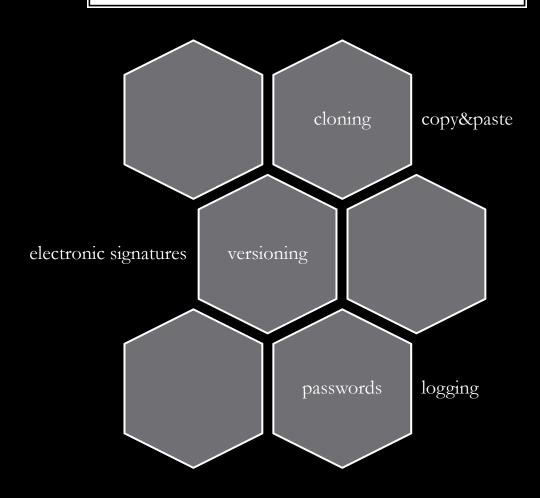
meaningful use/incentive payments

improve health care

SECURITY REQUIREMENTS



CHALLENGES

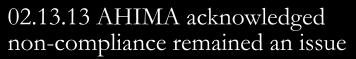


POTENTIAL IMPACT DEFINITIONS FOR SECURITY OBJECTIVES

Security Objective	LOW	MODERATE	HIGH
Confidentiality	The unauthorized disclosure	The unauthorized	The unauthorized disclosure of
	of information could be	disclosure of information	information could be expected to
Preserving authorized restrictions on information access and disclosure, including means for protecting personal privacy and proprietary information.	expected to have a limited	could be expected to have a	have a severe or catastrophic adverse
	adverse effect on organizational	serious adverse effect on	effect on organizational operations,
	operations, organizational	organizational operations,	organizational assets, or individuals.
	assets, or individuals.	organizational assets, or	
		individuals.	
Integrity	The unauthorized	The unauthorized	The unauthorized modification or
	modification or destruction of	modification or destruction	destruction of information could be
Guarding against improper information modification or destruction, and includes ensuring information non-repudiation and authenticity.	information could be expected	of information could be	expected to have a severe or
	to have a limited adverse effect on	expected to have a serious	catastrophic adverse effect on
	organizational operations,	adverse effect on	organizational operations,
	organizational assets, or	organizational operations,	organizational assets, or individuals.
	individuals.	organizational assets, or	
		individuals.	
Availability	The disruption of access to or	The disruption of access to	The disruption of access to or use
	use of information or an	or use of information or an	of information or an information
Ensuring timely and reliable access to and use of information.	information system could be	information system could	system could be expected to have a
	expected to have a limited	be expected to have a serious	severe or catastrophic adverse effect on
	adverse effect on organizational	adverse effect on	organizational operations,
	operations, organizational	organizational operations,	organizational assets, or individuals.
	assets, or individuals.	organizational assets, or	
		individuals.	

CLONING

09.24.2012 President's Warning Letter



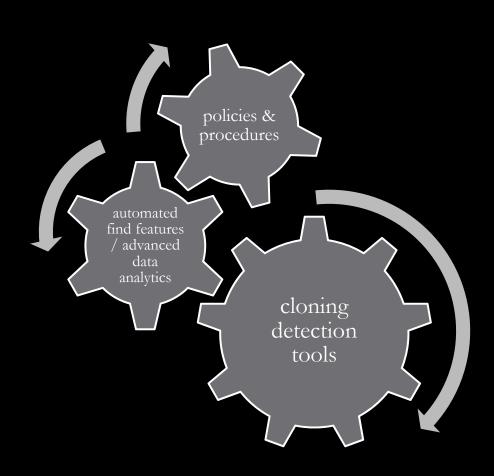
- make me the author
- copying vital signs
- templates

AUDIT CHALLENGES: CLONING

Document Review Legitimate Rate of Frequency



RISK ASSESSMENT: **CLONING**



PASSWORDS



What type of lock do you have?

PASSWORDS

minimum 8 characters, complex

unable to reuse passwords

prohibit group/shared passwords

RISK ASSESSMENT: PASSWORDS

start with p&ps

crack the sam file

test: ask someone to reset his/her password

EHR SIGNATURES

digitized signatures

button, PIN, Biometric

digital signature

DIGITAL SIGNATURE



RISK ASSESSMENT: EHR SIGNATURES

Multiple, dual, co-signatures

On behalf of another

Auto-attestation

Batch signing

Scribes/Assistants

Amendments, corrections, retractions, deletions

9 REASONS WHY LOGGING IS AN AUDITOR'S BFF

Detecting unauthorized access to patient information

Detecting new threats and intrusion attempts

Addressing compliance with regulatory and accreditation requirements

Reducing the risk associated with inappropriate accesses

Responding to patient privacy concerns

Evaluating the overall effectiveness of policy and user education

Providing forensic evidence

Tracking disclosures of PHI

Establishing a culture of responsibility and accountability

AUDIT LOGGING CONTEXT

name

application

workstation id

event (e.g. modification, deletion, etc.)

HIPAA SECURITY RULE

Section 164.308(a)(1)(ii)(c), Information system activity review (required), which states organizations must "implement procedures to regularly review records of information system activity, such as audit logs, access reports, and security incident tracking reports."

Section 164.312(1)(b), Audit controls (required), which states organizations must "implement hardware, software, and procedural mechanisms that record and examine activity in information systems that contain or use electronic protected health information."

EHR VERSIONING

What's the latest version? How many?

When was it installed?

Are there similar features for a Mac vs. Windows? Tablets? Desktops? iPhones?

HITECH PENALTIES

Tier A -offender didn't realize he or she violated the Act and would have handled the matter differently if he or she had. **\$100 fine** for each violation, cannot exceed \$25,000 for the calendar year.

Tier B -violations due to reasonable cause, but not "willful neglect." The result is a \$1,000 fine for each violation, and the fines cannot exceed \$100,000 for the calendar year.

Tier C - violations due to willful neglect that the organization ultimately corrected. The result is a \$10,000 fine for each violation, and the fines cannot exceed \$250,000 for the calendar year.

Tier D -violations of willful neglect that the organization did not correct. The result is a \$50,000 fine for each violation, and the fines cannot exceed \$1,500,000 for the calendar year.

