RSA*Conference2016

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SESSION ID: STR-R03

Separating Fact From Fiction: The Real Risks Within Medical Device Security



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Agenda

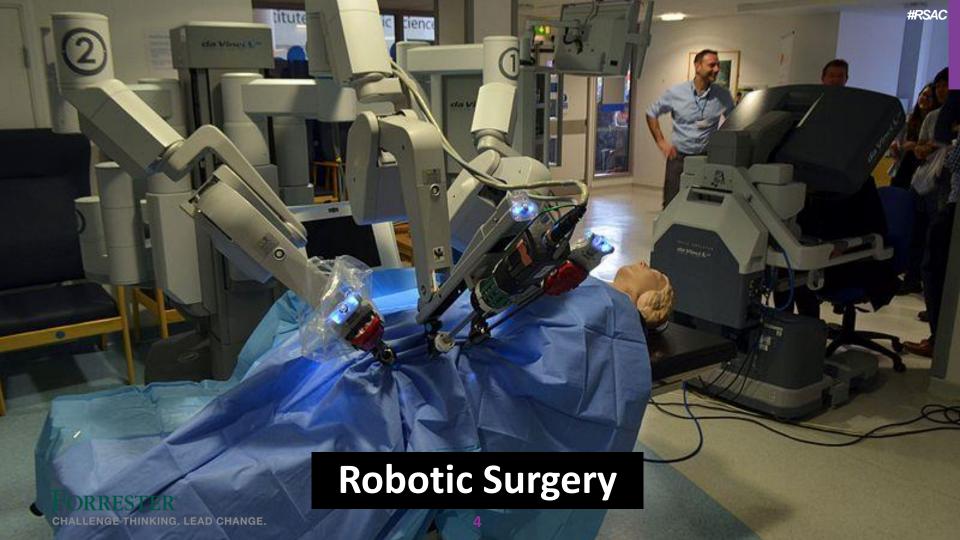


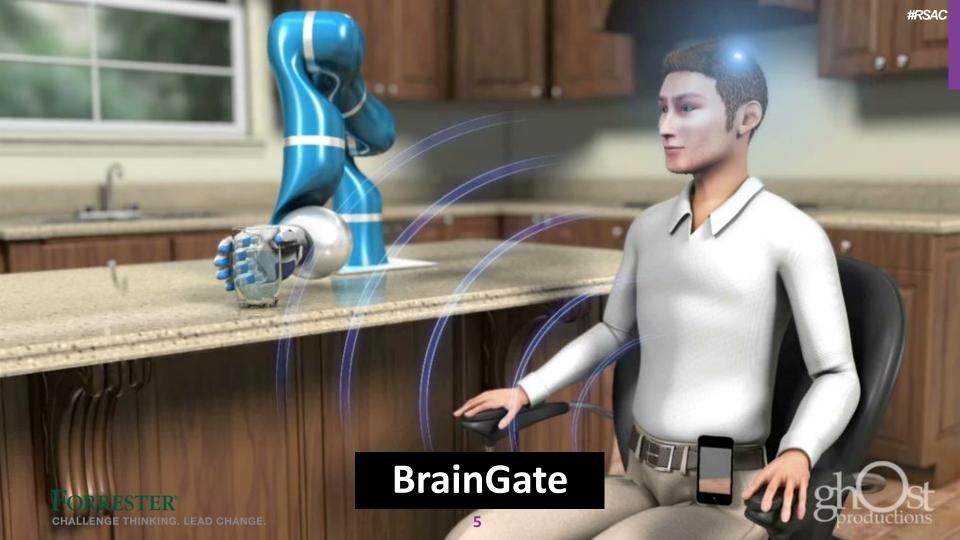
- Balancing Innovation With Security In Healthcare
- The Medical Device Threat Landscape
- Attack Scenarios
- The Path Forward

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Balancing Innovation With Security In Healthcare









With Innovation Comes Risk



Security



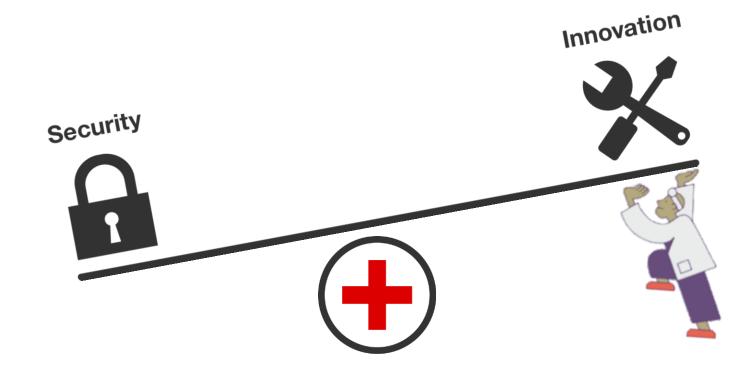
Innovation





With Innovation Comes Risk





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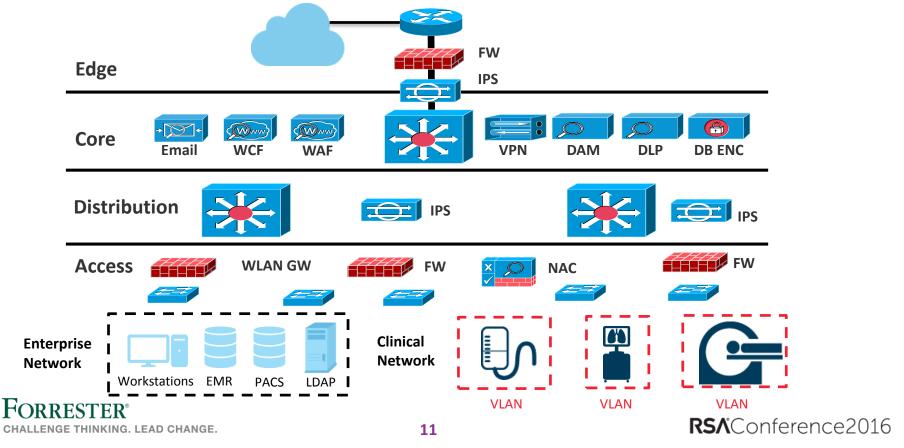


The Medical Device Risk Landscape



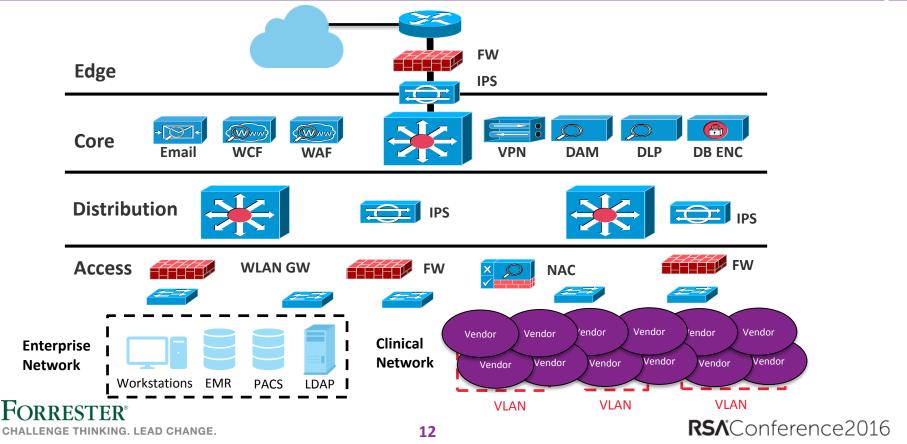
A Typical Hospital Network is Flat





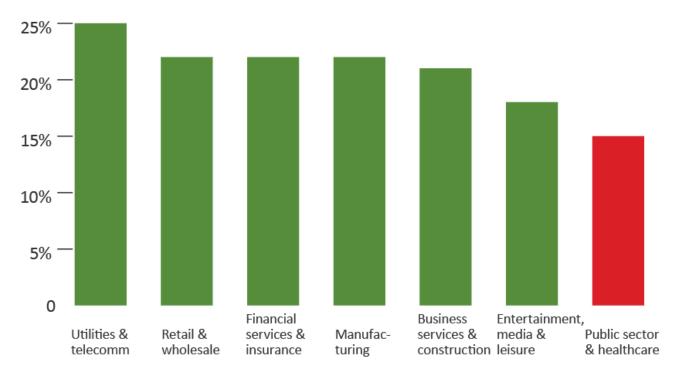
Complexity Is The Primary Enemy





Healthcare Security Spending Lags

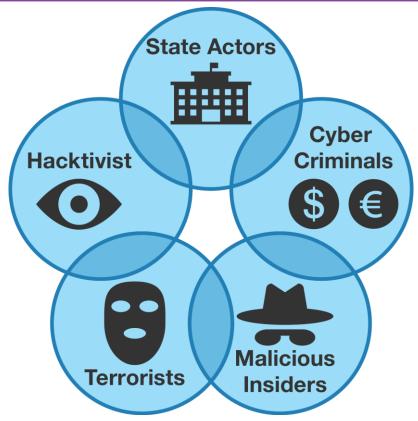




Base: 315 Global security decision-makers (20+ employees) in public sector and healthcare Source: Forrester's Global Business Technographics® Security Survey, 2015 CHANGE.

Threat Actor Motivations





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Collection of Evidence



- Conducted 70+ medical device security stakeholder interviews
- Surveyed 400+ US-based hospital security decision makers in Q2 2015; 1,900 hospital information workers in Q3
- Identified public and non-public sources of incident data with the help of Cyberfactors, the FDA, MDISS, HIMSS, and various industry experts

Collection of Evidence (Cont.)

















Medical Device Security - Risk Categories





Therapy Manipulation

Asset Damage

Denial-Of-Service: Scenario



Causes

- > NETWORK ATTACK
- > MALWARE
- > HARDWARE/SOFTWARE EXPLOITATION
- > RADIO FREQUENCY (RF) EXPLOITATION

Impacts

- > CLINICAL WORKFLOW DISRUPTION
- > IT/CLINICAL ENGINEERING STAFF DISRUPTION

Outcomes

- > PATIENT HARM
- > REPUTATIONAL DAMAGE
- > REGULATORY FINES/LAWSUITS
- > REQUEST FOR RANSOM





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Denial-Of-Service: Evidence

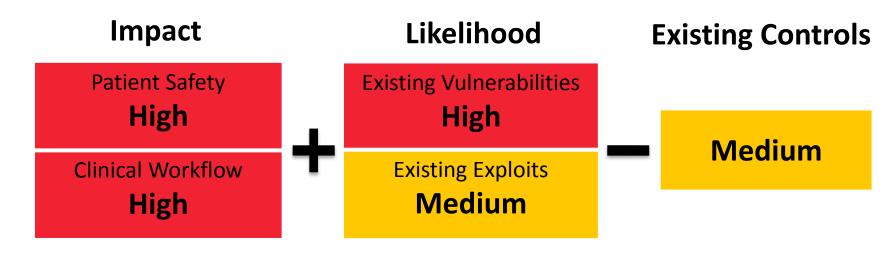


- Case #1: Catheter lab incident
- Case #2: 20 patient monitoring systems taken down in a California-based hospital (unreported)
- Case #3: MA-based hospital ward shut down due to malware infecting medical devices (unreported)
- Case #4: CA-based hospital shutdown due to ransomware infecting medical devices



Denial-Of-Service: Outlook







High Severity Risk





Therapy Manipulation: Scenario



Causes

- > MALWARE
- > HARDWARE/SOFTWARE EXPLOITATION
- > POOR ACCESS CONTROLS
- > PHYSICAL TAMPERING

Impacts

- > CHANGES IN DEVICE FUNCTION/PARAMETERS
- > CHANGES TO PATIENT DATA

Outcomes

- > PATIENT HARM
- > REPUTATIONAL DAMAGE
- > REGULATORY FINES/LAWSUITS
- > REQUEST FOR RANSOM
- > CHANGES IN FUTURE TREATMENT DECISIONS





Therapy Manipulation: Evidence



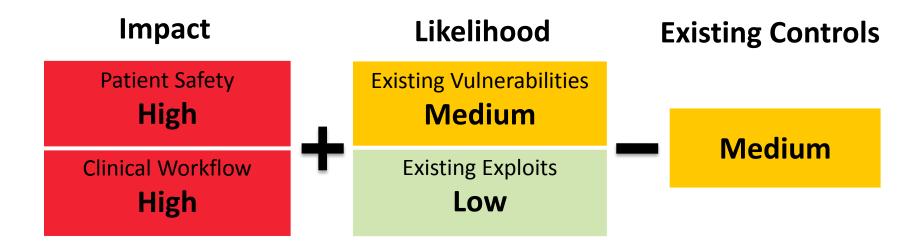
- Case #1: PCA Pump exploited by Austrian patient
- Case #2: PCA Pump exploited by researcher
- Case #3: Insulin Pump exploited by researcher
- Case #4: Implantable Defibrillator exploited by researcher





Therapy Manipulation: Outlook







Medium Severity Risk





Patient Data Theft: Scenario



Causes

- > MALWARE
- > HARDWARE/SOFTWARE EXPLOITATION
- > Poor access controls/device theft
- > DEVICE USED AS ENTRY
 POINT INTO DATA NETWORK

Impacts

- > DIRECT THEFT OF DATA FROM DEVICE
- > EMR DATABASE COMPROMISE

Outcomes

- > PATIENT HARM DUE TO FRAUD
- > PATIENT PRIVACY LOSS
- > REQUEST FOR RANSOM
- > REPUTATIONAL DAMAGE
- > REGULATORY FINES/ LAWSUITS





Patient Data Theft: Evidence

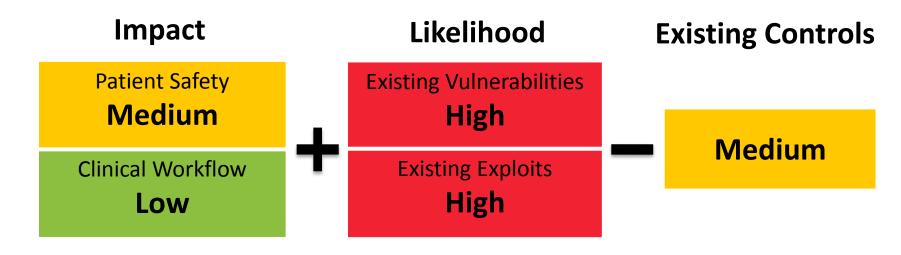


- Case #1: HIPAA fines due to CT Scanner breach
- Case #2: Russian gang used medical devices as entry point into hospital network; stole patient data from EMR



Patient Data Theft: Outlook







Medium Severity Risk





Asset Damage: Scenario



Causes

- > NETWORK ATTACK
- > MALWARE
- > HARDWARE/SOFTWARE EXPLOIT

Impacts

- > CLINICAL WORKFLOW DISRUPTION
- > IT/CLINICAL ENGINEERING STAFF DISRUPTION

Outcomes

- > PATIENT HARM
- > HIGH REPLACEMENT COSTS
- > REPUTATIONAL DAMAGE
- > REGULATORY FINES/ LAWSUITS
- > REQUEST FOR RANSOM





Asset Destruction: Evidence

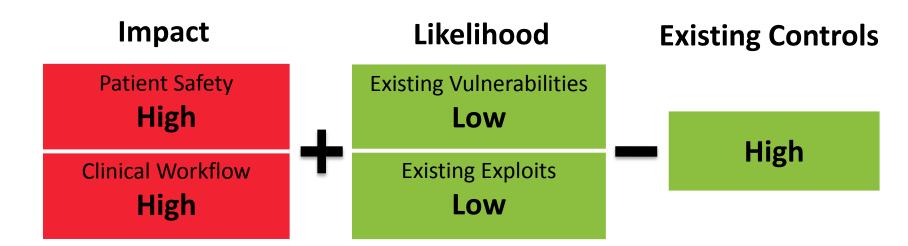


- No examples found
- Difficult to track due to lack of consideration over security event causation in MDRs



Asset Destruction: Outlook







Low Severity Risk

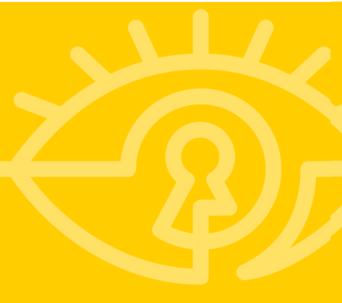




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5 Steps Forward: Apply At Your Organization



- 1. Categorize Existing Devices Based On Risk
- 2. Implement A Clinical Risk Management Framework
- 3. Follow Basic Security Hygiene
- 4. Include Security Requirements In New Device RFPs
- 5. Move Toward A "Zero-Trust" Networking Architecture



Step 1: Categorize Existing Devices Based On Risk

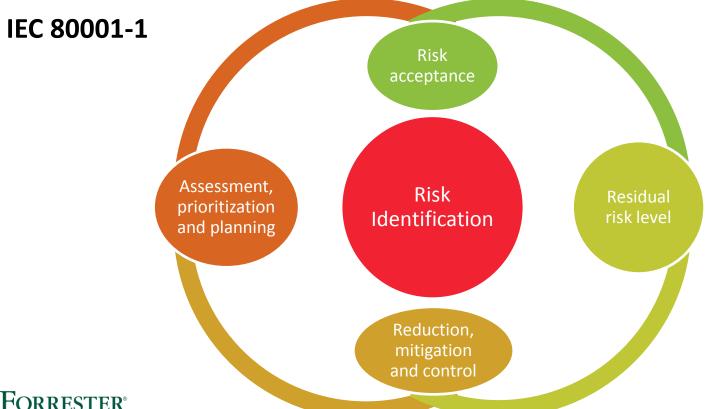


- Base your risk categories on:
 - Potential impact to patient safety
 - Network Connectivity
 - Data Sensitivity
 - Attack likelihood
 - Upgradability



Step 2: Implement A Clinical Risk Mgmt Framework





CHALLENGE THINKING. LEAD CHANGE.

Step 3: Follow Basic Security Hygiene



- Foster a culture of security awareness within clinical engineering and clinical departments
 - Blogs, security champions, rotationships
- Eliminate default passwords





Step 4: Include Security Requirements In RFPs



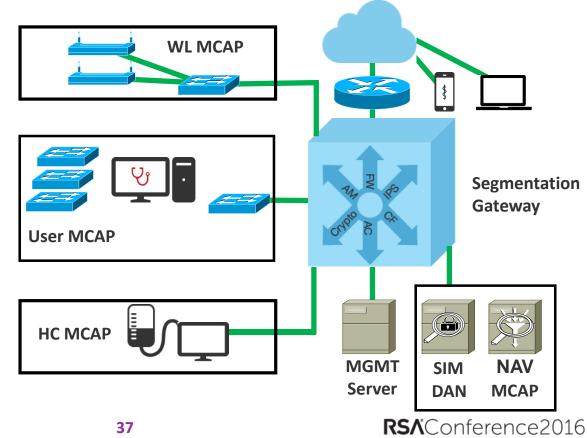
- Request that device manufacturers:
 - Follow current application security security best-practices
 - Conduct threat modeling/pen testing
 - Have roadmap to build security logging into software
 - Present a completed MDS² form



Step 5: Move Toward A "Zero-Trust" Architecture



- Segment devices based on risk
- Inspect network data as it flows between segments
- Require secure authentication into network



Need to Know



- IEC 80001-1
- MDS²
- NH-ISAC
- ICS-CERT
- FDA Pre-Market and Post-Market (Draft) Cybersecurity Guidance



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Thank you

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