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Berkman Center 27 Apr 2017 Healthcare Ransomware

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- your medical record is worth more to hackers than your CC
- huge increase in # of medical records breached
- 2010 less than 10M
- 2015 80m
- however, the price per record on black market is dropping significantly
- why is it more difficult to secure health care data than CC's?
- ransomware more significant threat now
- issues on understanding the risk
- not obligated to report
- hospitals not incentivized to talk about it
- strains of ransomware specifically designed for hospitals
- often tied to ransom requests in bitcoin.
- newer strains are even more targeted and increasing price of ransom (like Lockie)
- market is balancing out around \$25k payouts
- ▼ infection chain
- often email and attached documents
- training is pretty robust at hospitals, but volume of legit and illegit attachments skews awareness
- often a hook to enable macros to do the encrypt
- often detailed instructions (even w/ call centers!) on how to free up your encrypted files
- bitcoin was an enabler for more anonymous payments
- note: lockie is even goes after the auto created shadow copies
- why hospitals?
- legacy systems

- heavy relaince on 3rd party systems and consultants for iT
- urgent need for access to info and continuity of service
- complete lack of criminal ethics
- note: there are ethics debates w/in ransomware community on a few points:
- whether hospitals are a legitimate target
- whether to actually decrypt upon payment (honor amongst thieves)
- what guidance is emerging in the policy space re: how to respond?
- Dept HHS guidance in July 2016 was pretty vague but ...
- default presumption that a ransomware infection does represent a HIPAA breach and, therefore, subject to breach reporting provisions as outlined by HIPAA
- if you pay, considered a breach
- if you can fully restore the entire data set and prove no modification and no exfiltration, then no need to report the breach
- Note: the Eirie County Medical Center breach WAS ransomware
- they decided not to pay, shutdown all systems
- still recovering 3 weeks later
- this week: getting bed coordinating back online
- new email hospital system
- give doctors ability to view outpatient electronic medical records (EMR)
- ▼ next week
- electronic transmisison of radiological images
- restoration of desktop computers
- restoration of inpatient EMR
- physician documentation
- almost everything has been handled on paper and manually
- recovery cost to victim per stolen record
- healthcare is most costly at \$355 per record
- education is 2nd highest at \$246
- financial is 3rd at \$221

- some sentiment that:
- wake-up call that security training and heavy infosec was worthless
- almost refreshing that doctors could revert back to paper and focus on quality care

#learning/conferences