



OCR Reinforces Need to Protect PHI **Three Major Breach Settlements Announced This Month**

All HIPAA covered entities should take note of three recent settlements for potential Privacy and Security Rule violations identified by the U.S. Department of Health and Human Services' Office for Civil Rights ([OCR](#)).

A health care provider in the Denver area paid \$400,000 to [settle](#) potential violations stemming from a 2012 breach in which a hacker obtained 3,200 patients' ePHI by accessing employees' email accounts. OCR's investigation found that the provider did not conduct any risk analyses for potential threats to its patients' ePHI until after the incident, and thus did not have any procedures in place to guard against the threats such an analysis might have identified. The provider's subsequent risk analyses were also deemed insufficient to comply with the Security Rule.

A health care provider in Illinois paid \$31,000 to [settle](#) potential violations because OCR found that while the provider had been disclosing PHI to a business associate in 2003, neither the provider nor the business associate could produce a signed business associate agreement prior to October 12, 2015.

A wireless health services provider in Pennsylvania paid \$2.5 million to [settle](#) potential violations stemming from the January 2012 theft of an employee's laptop from a parked vehicle outside the employee's home. OCR said that the laptop contained ePHI for 1,391 individuals, and that the provider had not implemented policies and procedures to comply with the Security Rule, or to protect ePHI, including on mobile devices.

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