



# Cyber Threat Risk Landscape

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AMDIS Annual Meeting June, 2018

## Panel

### **Eric Liederman, MD, MPH**

National Leader, Privacy, Security & IT Infrastructure, The Permanente Federation

### **Alistair Erskine, MD, MBA**

Chief Digital Officer, Partners Healthcare

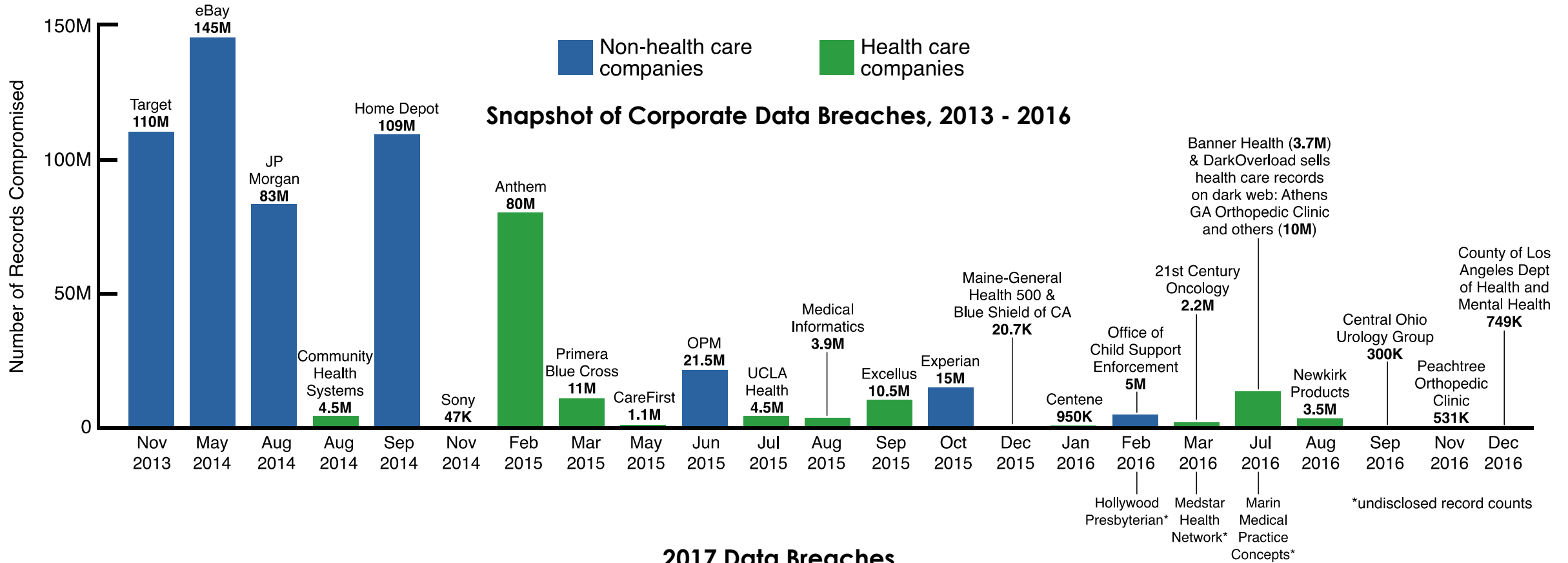
### **Jen Vasquez**

Director of Cyber Risk Defense, Kaiser Permanente

### **Joseph Schneider, MD**

Clinical Assistant Professor of Pediatrics, UT Southwestern

# Health Care: Now Top Target For Attackers



## 2017 Data Breaches

<p>March 2017 <b>Urology Austin</b></p> <p>Ransomware attack; <b>279,663 patients records breached</b></p>	<p>May 2017 <b>WannaCry</b></p> <p>Ransomware attack; <b>230,000+ computers infected in over 150 countries</b></p>	<p>August 2017 <b>Pacific Alliance</b></p> <p>Ransomware attack; <b>266,123 patient records breached</b></p>	<p>September 2017 <b>Equifax</b></p> <p>Security breach; <b>143,000,000 customer records breached</b></p>
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# Attackers and Methods



## HACK AS A SERVICE

**Financially motivated,**  
paid % of profit

- **Allows others to rent infrastructure** for attacks: botnets, phishing tools, and vulnerability scanning of targets



## ORGANIZED CRIME

**Financially motivated**

- Aim to **collect ransom, personal data, including medical records, credit cards and SSNs**
- Efficient and **profit focused**



## STATE-SPONSORED

**Research, Espionage**

- **Highly skilled and persistent with unlimited resources**
- Employ **sophisticated and previously unknown methods**
- Can remain in the network for months to years



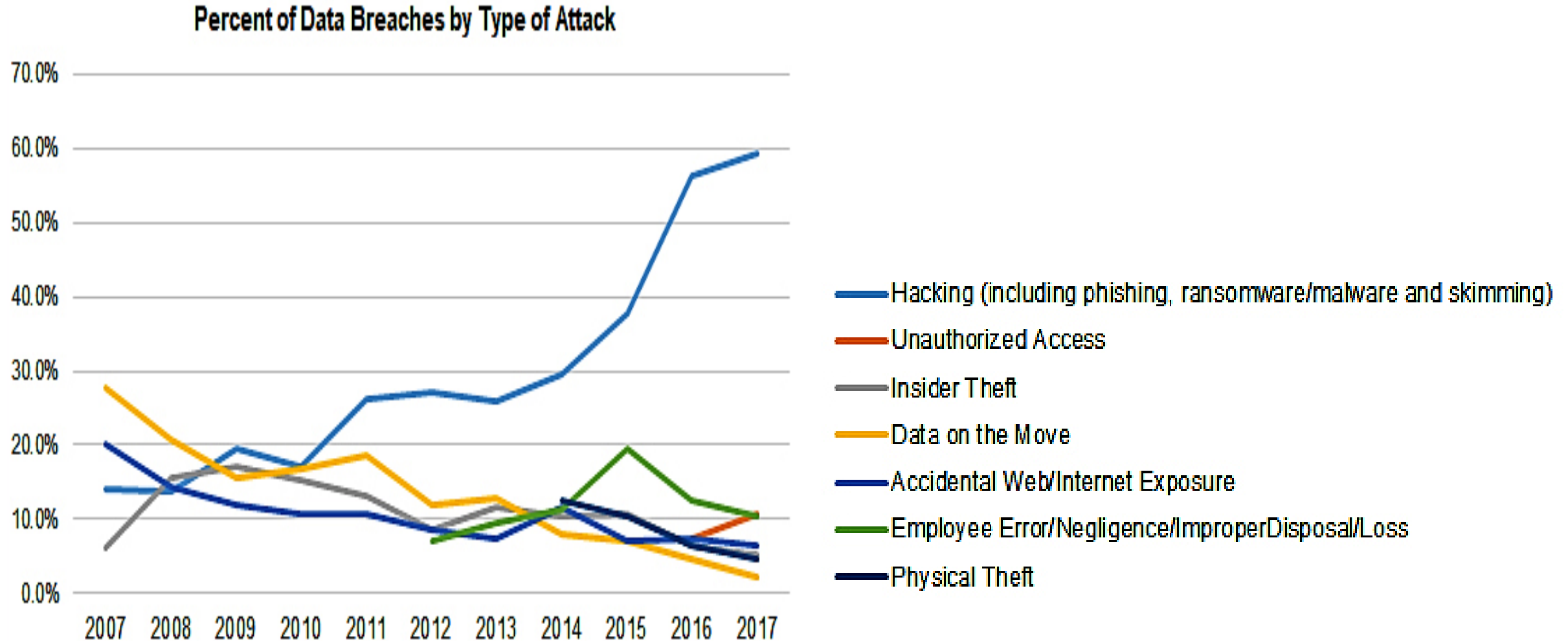
## HACKTIVISTS

**Motivated by social justice causes**

- **Unstructured** coalitions that come together based on **common cause**
- Rely on **social engineering** techniques
- Employ **less sophisticated** attack methods
- Engage **armies of infected computers**

Risk  
Motive  
Characteristics

# Attack Vectors



Source: Identity Theft Resource Center, 2017 Annual Data Breach Year End Review

## Medical Device Cybersecurity: Worse Than Herding Cats

Limited incentives for device makers to make incidents public

Clinicians generally don't appreciate risks

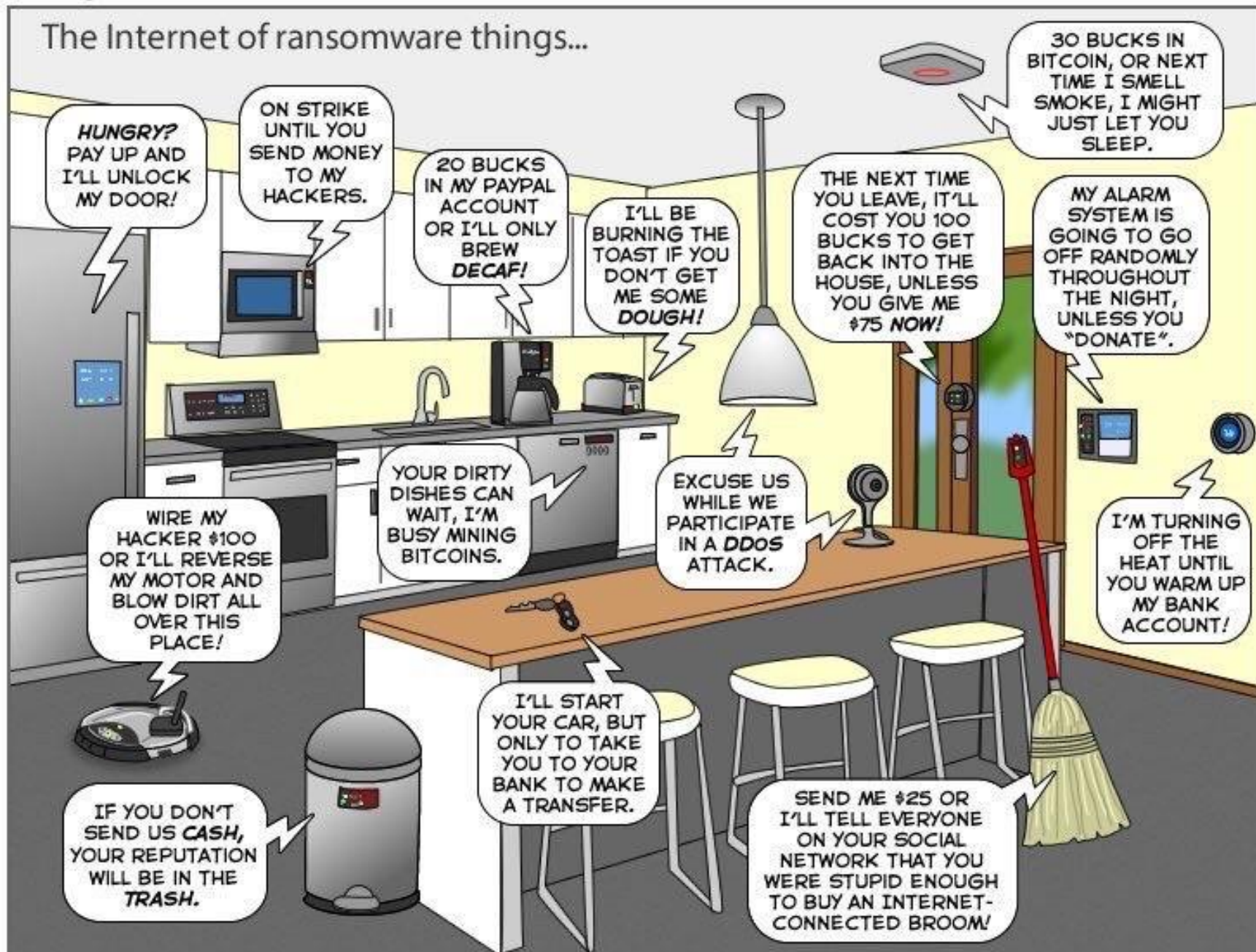
Healthcare CIOs can't keep up with patching



No central repository for vulnerabilities and incident reporting

Limited awareness of security impact on safety and efficiency

Executives, lawyers & compliance poorly understand cyber-risks



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