



Analysis of Insider Threats in the Healthcare Industry: A Text Mining Approach

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Article

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Abstract: To address rapidly growing data breach incidents effectively, healthcare providers need to identify various insider and outsider threats, analyze the vulnerabilities of their internal security systems, and develop more appropriate data security measures against the threats. While there have been studies on trends of data breach incidents, there is a lack of research on the analysis of descriptive contents posted on the data breach reporting website of the U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR). Hence, this study develops a novel approach to the analysis of descriptive data breach information with the use of text mining and visualization. Insider threats, vulnerabilities, breach incidents, impacts, and responses to the breaches are analyzed for three data breach types.

Keywords: insider threats; PHI; protected health information; data breach; healthcare provider; text mining; visualization; vulnerabilities; cybersecurity

1. Introduction

As the healthcare industry grows, the protection of private patient data has become a significant challenge [1]. Under HIPAA, any patient-identifying and personal medical information, such as demographic data, medical histories, and insurance information, is considered protected health information (PHI) [2]. As digital technologies advance, the healthcare service industry has been converting paper-based protected health information to computer-based electronic protected health information (ePHI). A host of healthcare information systems are currently using ePHI to store patients' data, treat patients, file insurance claims, and conduct many other operational functions. However, along with the use of the Internet for healthcare information systems, there has been an increase in high-profile data breach incidents, and the development of evidence-based data security practices became a research priority [3].

Data breaches emanate from insider and outsider threats. Although many breach incidents are caused by outsiders, the most damaging incidents are often caused by insiders [4]. A recent report suggests that over half of healthcare breaches come from insiders of the organization [5]. Data breaches by insiders are often difficult to detect. However, negligent and malicious employees are of great risk as witnessed in the case of the Capital One—Amazon cloud data breach [6]. According to a study conducted by Shred-it [7], more than 85% of senior executives and 515 small business owners admit employee negligence is one of their most serious information security threats.

Previous studies on the data breaches in the healthcare industry mainly focused on analyzing well-structured breach data such as hospital types, breach types, and breach locations [8–12]. Recently, text mining approaches have been used in the healthcare domain to automate the process of gleaning insights from unstructured textual data [13]. The Latent Dirichlet Allocation (LDA) has been used for topic modeling in the healthcare domain [14,15]. Long Short-Term Memory (LSTM) and various classification techniques such as random forest, support vector machine, and logistic regression have been used to

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Copyright: © 2022 by the author. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (https://creativecommons.org/licenses/by/4.0/). analyze the sentiment using a Twitter dataset associated with coronavirus [15–17]. While the multi-year data breach report publicly available from the U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR) includes summary descriptions of the data breach incidents and responses to the incidents, there has been no attempt to systematically analyze the descriptions and the evolution of the insider threats in the healthcare industry. Analyzing thousands of data breach descriptions would be time-consuming and costly, but may provide healthcare providers with useful information for the enhancement of data security.

To overcome the challenges of analyzing the descriptions and the insider threats manually, this study adopts a text mining approach. This study demonstrates that the text mining approach facilitates analysis of the textual description of the data breaches and the results shed valuable insights into the insider threats, data breaches, and organizational responses. Specifically, this study attempts to address the following research questions:

RQ1: What are the characteristics of insider threats in data breach incidents?

RQ2: How have insider threats, vulnerabilities, data breach incidents, impacts/losses, and responses to the data breaches evolved?

To answer these questions, this study utilizes the data breach incidents reported at the U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR) website (https://ocrportal.hhs.gov/ocr/breach/breach_report.jsf, accessed on 5 January 2022)

From a methodological standpoint, this study is the first of its kind to analyze the unstructured textual descriptions contained in the breach incident report in the healthcare industry. In Section 2, past studies are reviewed and research gaps are identified. In Section 3, the research methods of this study are discussed. In Section 4, insider threats in data breach incidents of three data breach types are analyzed. In Section 5, a summary of the findings, practical implications, and future research directions are discussed.

2. Related Works

According to the CERT Guide to Insider Threats [18], insider threats is defined as "A malicious insider threat is a current or former employee, contractor, or business partner who has or had authorized access to an organization's network, system, or data and intentionally exceeded or misused that access in a manner that negatively affected the confidentiality, integrity, or availability of the organization's information or information systems." In addition to the malicious insider threats, Unintentional Insider Threats: A Foundational Study [18] defines unintentional insider threat as "An unintentional insider threat is a current or former employee, contractor, or business partner who has or had authorized access to an organization's network, system, or data and who, through action or inaction without malicious intent, causes harm or substantially increases the probability of future serious harm to the confidentiality, integrity, or availability of the organization's information or information systems."

The origin of the data breach threats can be classified into an outsider [19–21], an insider [22–25], and a mix of an insider and an outsider [26–28]. The mix of insiders and outsiders takes place when the threats come from the outside, but the data breaches are realized by the actions of insiders (e.g., phishing email). Insider threats are further classified into accidental errors, ignorance, unintentional non-malicious (negligent) threats, and malicious threats [29]. The threats from outsiders and insiders have the potential to adversely impact operations, organizational assets, or individuals via unauthorized access, destruction, disclosure, modification of information, and/or denial of service (https://csrc.nist.gov/glossary/term/threat, accessed on 29 April 2022). However, insider threats have been easily overlooked or ignored due to various reasons such as ease of implementation, high chance of success, inaccurate solutions, and less chance to detect and prevent [30]. The insiders may have legitimate access to their organization data, but can misuse their credentials to conduct malicious attacks such as IT sabotages and theft of confidential information [30].

3 of 21

Detecting insider threats is challenging. Three categories of data sources are considered to detect insider attacks [31]: (1) host, (2) network, and (3) contextual. Host-based data sources are individual hosts (e.g., computers), and can reflect how a host behaves and the human user's interactive behavior with the host [31]. Network analytics are playing an increasingly important role in addressing cybersecurity threats. For example, [32] presents Beehive, which addresses the problem of automatically mining and extracting knowledge from the dirty log data produced by a wide variety of security products in a large enterprise [32]. Finally, contextual data sources provide contextual information such as human resources (HR) and psychological data for various intent analyses [31].

To minimize the threats from insiders and outsiders, organizations need to address vulnerabilities to data security [33]. Vulnerabilities are weaknesses in an information system, system security procedures, internal controls, or implementation that could be exploited or triggered by a threat source (https://csrc.nist.gov/glossary/term/vulnerability, accessed on 5 May 2022). Vulnerabilities can be manifested in the form of human, organizational, physical, and technical vulnerabilities [34,35].

In many organizations, the human aspect of cybersecurity is one of the weakest links [36]. An empirical study shows that one of the reasons that malicious attacks continue to occur at an alarming rate in IoT systems is the poor compliance with information security policies that are mainly caused by behavior issues and the severe lack of security awareness [37]. Another empirical study shows there is a low level of IoT cybersecurity awareness by working adults on the IoT and proposes a cybersecurity e-brochure playbook as a possible solution [38]. It is also necessary to develop people-centric workplaces where desirable security behaviors are disseminated among the employees [39].

Human factors contribute to the majority of security violations in healthcare [40]. Based on responses to an online questionnaire survey of 212 healthcare staff, [40] assess various factors that affect security and privacy behavior among healthcare workers. Their study revealed that work emergency and conscientiousness have a positive correlation with IS conscious care behavior risk. But agreeableness is negatively correlated with information security knowledge risk and information security attitude risk. The authors of [41] explore how human factors affect data locations via linear regression and rank data location vulnerability using collaborative filtering. They find that human factors play a major role in data location breaches.

The organization aspect of data security focuses on senior management support [42], security readiness [43], security policy [44], information security governance [45], and security culture [46,47]. These organizational factors are known to positively affect the attitudes and behaviors of internal users and employees as well as external users and customers. Organizational readiness to handle cyberattacks has become an integral part of enterprise risk management [48]. Sustained support from senior management is crucial to ensuring that action plans are in place to mitigate the risk of cyberattacks [36].

Technical vulnerabilities refer to security weaknesses in software, hardware, networks, or a system. Technical vulnerabilities arise due to flaws or the incorrect design of software and the limitations of the device or application [49]. Due to the evolving nature of the technical vulnerabilities, it is hard to provide an exhaustive list of vulnerabilities [50]. A vulnerability scanning is a process and technical measure implemented for the timely detection of vulnerabilities within the organization, infrastructure network, and system components [51]. Noting that disseminating medical data beyond the protected cloud of institutions poses severe risks to patients' privacy, [52] propose a blockchainbased data sharing framework that addresses the access control challenges and permits users to request sensitive patients' data stored in the cloud after their identities and cryptographic keys are verified.

3. Research Methodology

This study introduces a five-step methodology for data breach analysis. The uniqueness of our methodology is that the text mining is conducted in two steps using two widely used and validated text mining tools: VOSviewer(Developer: Centre for Science and Technology Studies (CWTS), Leiden University, EZ Leiden, Netherlands) and NVivo(Developer: QSR International, Doncaster, Australia). First, objective keyword identification is conducted with VOSviewer to increase the accuracy of the keyword selection and the selected keywords and clusters of the keywords are visualized to understand the keyword relationships. Second, the selected keywords are searched in the web descriptions using NVivo to analyze the context surrounding the keywords. By combining VOSviewer and NVivo, this methodology could achieve a complexity reduction in keyword identification and contextual analysis without losing the accuracy of the analysis. The research methodology consists of the following five main steps, starting from collecting the data to analyzing the descriptions of the data breach incidents.

3.1. Step1: Data Collection

Data collection is the first step of the methodology. To analyze the evolution of the breach incidents, this paper collected the breach incidents from the HHS website (Source: https://www.hhs.gov/hipaa/for-professionals/breach-notification/breach-reporting/index.html, accessed on 5 January 2022). The public report is in CSV file format and can be simply downloaded without web scraping. For this study, the area of inquiry is a web description of the data breaches in healthcare. The data from 21 October 2009 to 15 October 2010 were dropped from the analysis to take into account the lag time to the full effect of the 2009 HIPAA Breach Notification Rule [53]. The HHS website shares the data breaches collected according to the HIPAA Breach Notification Rule, since October 2009. HIPAA Breach Notification Rule requires that HIPAA-covered entities and their business associates in the US that store data on human health report any data breach that compromises the confidentiality of 500 or more patients/human subjects no later than 60 days following a data breach. Each data breach incident consists of the name of the covered entity, state, covered entity type, individuals affected, breach submission date, type of breach, location of breached information, business associate present, and web description. The data breach report consists of 2003 data breaches from the healthcare provider sector.

3.2. Step 2: Data Pre-Processing and Cleaning

The next phase of our methodology includes data cleaning and filtering out breach incidents that do not contain the breach description. The data breach report in the original CSV file format was converted into a Microsoft Excel file to sort the records based on the contents of the web description and remove records without description. This phase identified a total of 1136 data breach incidents that contain data breach descriptions.

3.3. Step 3: Segmentation of Data

The third phase of the research methodology involves the segmentation of data for detailed analysis. The data breach types include Hacking/IT Incident, Improper Disposal, Loss, Other, Theft, and Unauthorized Access/Disclosure. Among the six data breach types, this study focuses on Hacking/IT Incident, Theft, and Unauthorized Access/Disclosure. The other three types, Improper Disposal, Loss, and Other, were not included due to the limited number of data breach incidents. To further segment the data, temporal aggregations of the data breaches into three years were made. The three years were chosen to see the trends of the insider threats and the description of data breaches over time and the periodic comparison of data breaches. Period 1 is between 16 October 2010 and 15 October 2013, and contains 231 data breach incidents with descriptions. Period 2 is between 16 October 2013 and 15 October 2016, and contains 457 data breach incidents with descriptions. Period 3 is between 16 October 2016 and 15 October 2019, and contains 458 data breach incidents with descriptions.

3.4. Step 4: Measurement of Keyword Co-Occurrences and Clustering of the Keywords

This step starts with a visualization of the web descriptions related to data breach incidents. VOSviewer is used to provide a visualized overview of the keywords identified in the web descriptions. VOSviewer measures keyword co-occurrences and clustering of the keywords [54]. VOSviewer is used to measure the co-occurrence of keywords among the descriptions of the data breach incidents. The operationalization of VOSviewer for this study is as follows. The first step of VOSviewer is to choose the option "Create map based on text data." Then, "Read data from VOSviewer files" is chosen and the CSV file is loaded. Next, binary counting is chosen as the counting method to count each keyword only once in each data breach incident. The minimum threshold was set at three occurrences so that a large number of keywords would be considered for selection. Keywords with a high relevance score tend to represent specific topics covered by the data breach incidents. To focus on more relevant keywords, 60% of the keyword are included based on their relevance score. The minimum number of co-occurrences of keywords is set to obtain at least 20 keywords for analysis. The generated keywords are verified keyword by keyword for relevancy and accuracy. Finally, the network visualization is created along with clusters of keywords. Clustering is performed to group the keywords based on the keyword co-occurrences. The cluster size is set at a minimum of five keywords per cluster. Clustered groups are color-coded for clear visualization. Using the zooming and scrolling functions of VOSviewer, the clusters and links of keywords are examined to understand the keyword relationships. The keyword co-occurrences and clustering of the keywords provide the basis for the contextual analysis of the breach incidents in Step 5.

3.5. Step 5: Analysis of Descriptions of Data Breaches

This step utilizes NVivo for contextual analysis of the descriptions of the data breaches with the list of keywords and clusters created in Step 4. The web descriptions were imported into NVivo to conduct keyword searches of data breach incidents in the web descriptions. The list of keywords identified in VOSviewer is used as an initial coding template. The contextual analysis is conducted for the context in which the keywords occur, and new keywords are added for analysis. For example, assume that in the previous phase, "PHI" and "employee" were clustered as co-occurring keywords. Since these keywords alone do not provide insightful information about the insider threats, vulnerabilities, data breaches, and impacts of data breaches, and the healthcare providers' responses, the descriptions of the data breach incidents related to the co-occurring two keywords are identified and analyzed further. NVivo is used to search through all data breach incidents and identify data breach incidents whose descriptions match "PHI" and "employee". The descriptions of the identified data breach incidents are analyzed in terms of the insider threats, vulnerabilities, data breaches, impacts of data breach incidents, and the healthcare providers' responses.

A table for the insider threats, vulnerabilities, data breaches, impacts of data breach incidents, and the healthcare providers' responses was created. The new keywords of the data breaches are coded in terms of the insider threats, vulnerabilities, data breaches, impacts of data breaches, and responses to the incidents. The duplicates (or similar words) of keywords identified in this step are removed from the table to create a non-redundant list of the keywords.

4. Analysis of Data Breach Types

This section measures keyword co-occurrences and clustering of the keywords and analyzes the description of data breach types in terms of the insider threats, vulnerabilities, data breaches, impacts of data breaches, and responses to the incidents. VOSviewer was used to analyze co-occurring keywords and clusters of the keywords relevant to three data breach types—hacking/IT incident, theft, and unauthorized access/disclosure. Then, NVivo was used to identify data breach incidents and the insider threats related to the cooccurring keywords in each cluster.

4.1. Analysis of Hacking/IT Incident

Table 1 shows that 25 co-occurring keywords are grouped into three clusters in Period 1, 25 co-occurring keywords into three clusters in Period 2, and 27 co-occurring keywords into three clusters in Period 3. The grouping of the co-occurring keywords into specific clusters does not mean certain keywords co-occur only in a certain cluster but indicates that the keywords co-occur more frequently within that cluster than in other clusters. It is noted that insider threats are identified in seven clusters among nine clusters. For example, staff was identified as an insider threat of Cluster 1 of Period 1, and the employee was identified as an insider threat of Cluster 2 of Period 1. Business associates in Cluster 3 of Period 2 and Cluster 2 of Period 3 are considered an insider since they are contractors who have authorized access to the hospital's network, system, or data. In addition to identifying the insider threats in each cluster, other related characteristics of data breach incidents were identified in each cluster. For example, 'risk analysis' became an important cybersecurity activity in Period 2 and Period 3. In Period 1 and Period 2, 'malware' became a serious data breach and triggered an investigation by OCR, and in Period 3 'ransomware' and 'ransomware attack' became a serious data breach and co-occurred with 'computer server' and 'server.' 'Malware' was not a cybersecurity issue for 'computer server' and 'server', but a data breach issue for personal computing devices such as laptops and desktops. These keywords co-occur with specific insider threats, providing ample ground for further analysis.

Figure 1 shows the visualization of the keyword co-occurrence and clustering of the keywords in Hacking/IT Incident in Period 1. Each cluster is in a different color. The occurrences of a keyword refer to the number of data breach incidents in which the keyword occurs [49]. In Figure 1, keywords with higher occurrences are shown more prominently with larger labels and circles than keywords with lower occurrences. The stronger the link between two keywords, the thicker the line is in the visualization map. For example, In Figure 1, it is easy to see that 'name' occurs most frequently and its label is the largest in Period 1. Figure 2 shows that 'employee' of Cluster 2 in Period 1 has various link strengths with other keywords in its cluster and other clusters. It is noted that most of the links are with the keywords in its cluster and only a few links are with keywords in other clusters and the links are stronger in its cluster than in other clusters.

Period 1	Period 2	Period 3
25 items (3 clusters)	25 items (3 clusters)	27 items (3 clusters)
Cluster 1 (11 items)	Cluster 1 (10 items)	Cluster 1 (13 items)
access	address	access
breach notification	assurance	assurance
corrective action plan	birth	clinical information
ephi	breach notification	computer server
firewall	corrective action	corrective action
hacker	employee	ephi
health information	name	health information
office	phi	policy
policy	protected health information	ransomware
server	social security number	ransomware attack
staff	-	risk analysis
	Cluster 2 (9 items)	safeguard
Cluster 2 (7 items)	clinical information	server

Table 1. Clusters of Co-occurring Keywords in Hacking/IT Incident in Three Periods.

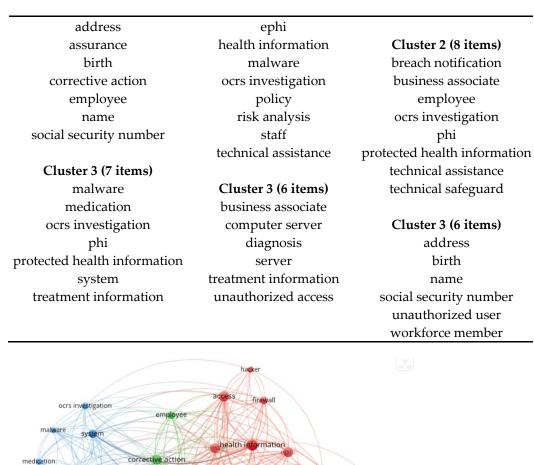




Figure 1. Keyword co-occurrences of Hacking/IT Incident in Period 1.

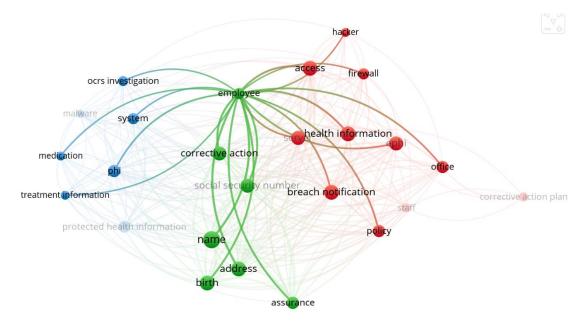


Figure 2. Various Link Strengths of 'Employee'.

To analyze the insider threats and characteristics of data breaches in detail, NVivo was used to identify descriptions related to keywords in each cluster and analyze the descriptions in terms of insider/outsider threats, vulnerabilities, data breaches, impacts of the breaches, and responses to the breaches.

In Table 2, the third column shows insider/outsider threats. Insider threats include staff, employees, workforce members, and business associates. Outsider threats include hackers, unknown outsiders, and ransomware attackers. Human vulnerabilities include a lack of social engineering awareness and a lack of security awareness of employees. Technical vulnerabilities include a lack of firewall, unencrypted software, weak security control, lack of technical security measures, weak safeguards for a system, and open firewall ports. Organizational vulnerabilities include a lack of a security management process and malicious partners. Specific data breaches include email hacking, phishing, malware, unauthorized access to the system, and ransomware. The sixth column shows the impacts of the data breaches. The impacts of the data breaches include the loss and stealing of health information, treatment information, medication information, and demographic information.

The last column shows the responses to the data breach incidents. Responses to insider threats are also categorized into the human, technical, and organizational responses. Human responses include training its workforce members on better practices to safeguard PHI. Technical responses include deployment of security software to detect, prevent, and mitigate malware on computers, software to scan Internet addresses in employees' emails, technical assistance by OCR, upgrade of antivirus software, the installation of a network traffic monitoring solution, upgrade of firewall, anti-malware software, and technical safeguard to PHI. Organizational responses include stricter password policies, a corrective action plan, a settlement with the OCR, risk analysis, identity recovery services, and revised policy and procedures.

In summary, it is noted email phishing has been a persistent and prominent problem for the insiders throughout the three periods and attacks occur through organizational and human vulnerabilities of the insiders such as a lack of a security management process and malicious vendors, a lack of social engineering awareness, and a lack of security awareness of employees. Email phishing leads to the loss or stealing of demographic information such as an address, date of birth, name, and social security number as well as other protected health information. Malware and unauthorized access to the system by the business associates and staff occur through technical vulnerabilities such as weak safeguards for a system and weak security control. It is also noted that while technical vulnerabilities require proper technical responses, human vulnerabilities require more comprehensive responses including technical, organizational, and human responses to effectively manage data security.

It is noted that the responses in the last column in Table 2 are supported by the previous validated results such as training to heighten awareness and reduce human error, the usability of software and tools to reduce human error, management practices to reduce the likelihood of human error, email safeguards (anti-phishing, anti-malware), firewalls, and antivirus/anti-malware protection equipment [55].

 Table 2. Insider/Outsider Threats, Vulnerabilities, Breach Incidents, Impacts, and Responses in Hacking/IT Incident.

Hacking/IT Incident	Cluster	Insider/Outsider Threats	Vulnerabilities	Breach Incidents	Impacts	Responses
Period 1	Cluster 1	hacker; staff	lack of firewall; weak security control	hacking	ePHI; health infor- mation	a settlement with the OCR; corrective action plan

	Cluster 2	employee	lack of a security management pro- cess	email phishing	date of birth; name; social security number	risk analysis; corrective action; a settlement with OCR
	Cluster 3	unknown outsider	unencrypted soft- ware; lack of technical security measures	malware		OCR's investigation security software to detect, prevent, and mitigate malware o computers
	Cluster 1	employee	lack of social en- gineering aware- ness	email phishing	address; date of birth; name; PHI; social secu- rity number	assurance of correct tive action; softwar to scan Internet ad dresses in employ- ees' emails
Period 2	Cluster 2	staff	weak safeguards for a system	malware	ePHI; health infor- mation	technical assistance by OCR; risk analy sis; OCR's investigation upgraded antivirus software
	Cluster 3	business associate	weak security control	unauthorized ac- cess to the sys- tem	diagnosis; treat- ment infor- mation	identity recovery services; stricter password policies; the installation of a active traffic-moni- toring solution for its network
Period 3	Cluster 1	ransomware at- tacker	weak firewall system; open firewall port	ransomware	clinical infor- mation; ePHI health infor- mation	risk analysis; replacement of fire wall; anti-malware soft ware; assurance of corrective action; revised policy and procedures
	Cluster 2	business associate; employee	malicious part- ners (e.g., ven- dors); lack of security awareness of em- ployee	email phishing, impermissible access to PHI	PHI	OCR's investigation technical assistance by OCR; technical safeguard to PHI
	Cluster 3	workforce member	lack of social en-	email phishing	address; date of birth; name; so- cial security number	improved safe- guards; updated policies and procedures; training of its work force members or better practices to safeguard PHI

4.2. Analysis of Theft

Table 3 shows that 26 co-occurring keywords are grouped into three clusters in Period 1, 25 keywords into two clusters in Period 2, and 24 keywords into three clusters in Period 3. It is noted that insiders ('employee,' and 'workforce member'), 'computer,' 'laptop,' and 'laptop computer' are frequently co-occurring keywords in all three periods. In comparison to the keywords of Hacking/IT Incident, 'computer,' 'laptop,' 'laptop computer,' 'encryption,' 'physical security,' and 'unencrypted laptop computer' are keywords uniquely occurring in Theft.

Table 4 shows the main insider/outsider threats, vulnerabilities, breach incidents, impacts of data breaches, and responses to the theft incidents. For theft, insider threats include staff, employees, and workforce members. Insider threats to Theft occur in all the clusters in the three periods. Human vulnerabilities include negligent employees and malicious former employees. The impacts of the data breaches include loss and stealth of demographical information and PHI. Technical vulnerabilities include an unencrypted laptop computer, unsecured disposal of PHI, unencrypted ePHI, unencrypted portable computer drive, unencrypted external hard drive, and unencrypted desktop computer. Organizational vulnerabilities include deficiencies in the HIPAA compliance program and weak physical security.

Period 1	Period 2	Period 3
26 items (3 clusters)	25 items (2 clusters)	24 items (3 clusters)
Cluster 1 (12 items) computer encryption ephi health information laptop laptop computer physical security police report policy risk analysis safeguard workforce member	Cluster 1 (13 items) address assurance birth breach notification corrective action employee laptop computer name phi protected health information social security number staff	Cluster 1 (12 items) assurance breach notification clinical information computer corrective action employee ocrs investigation phi physical security policy
Cluster 2 (8 items) assurance breach notification corrective action employee phi privacy protected health information staff	substitute notice Cluster 2 (12 items) computer diagnosis ephi health information lanton	Cluster 2 (9 items) address birth ephi health information laptop laptop computer name social security number workforce member
Cluster 3 (6 items) address birth diagnosis name	policy safeguard technical assistance unencrypted laptop work- force member	Cluster 3 (3 items) diagnosis medical record number staff

Table 3. Clusters of Co-occurring Keywords in Theft in Three Periods.

11 of 21

ocrs investigation		
social security number		

Human responses include ongoing security awareness training for all staff, retraining of all staff on privacy and security policies and procedures, and sanction of its workforce member. Technical responses include encryption of laptop computers, use of encryption-capable USB drives, encryption of electronic devices, enhanced network security, encrypting data on computers, installation of encryption software on all laptops and media storage devices, a cloud-based electronic health record system, and blocking laptops from accessing the internal computer network. Organizational responses include enhanced physical security, risk analysis, comprehensive compliance program, securely locked storage facilities for mobile devices, policies preventing the removal of devices from the office, assurance of corrective action, update of the policy on safeguarding ePHI, revision of HIPAA policies and procedures, physical safeguards such as surveillance cameras and locks to deter and prevent unauthorized access, and notifying local law enforcement of the breach.

In summary, it is noted that the insiders such as staff, employees, and workforce members are the predominant threats to theft. The majority of the insider threat comes from the negligence of the employees, followed by malicious employees. Thefts of medical files, laptops, computers, and devices occur through technical, organizational, and human vulnerabilities such as unencrypted PHI files, unencrypted laptop computers and devices, weak physical security, and negligence of employees. The various thefts lead to the loss or stealth of demographic information and other protected health information. While the frequency of thefts declined from Period 1 to Period 3, the theft of laptops and computers is a major concern in the three periods. Theft arising from the negligence of employees requires organizational and human responses such as retraining of all staff on privacy and security policies and procedures and development of remote access policy; rather than technical responses. For the Theft arising from malicious employees, organizational responses include securely locked storage facilities for mobile devices and the development of policies preventing the removal of devices from the office. While business associates are insider threats in Hacking/IT Incident, they are not a major part of insider threats in Theft.

Theft	Cluster	Insider/Outsider Threats	Vulnerabilities	Breach Incidents	Impacts	Responses
Period 1	Cluster 1	workforce mem- ber	deficiencies in HIPAA compli- ance program; unencrypted laptop com- puter; weak physical security; unencrypted ePHI; negligence of employees	theft of laptop and computer	health infor- mation; ePHI	The settlement with OCR; encryp- tion of laptop computers; ongo- ing security awareness train- ing for all staff; en- hanced physical security; risk anal- ysis; comprehensive compliance pro- gram
	Cluster 2	employees; staff	negligence of employees	theft of laptop and computer	PHI	retraining of all staff on privacy

Table 4. Insider/Outsider Threats, Vulnerabilities, Breach Incidents, Impacts, and Responses in Theft.

						and security poli- cies and proce- dures; remote ac- cess policy; elec- tronic data backup policy
	Cluster 3	employees	unencrypted portable com- puter drive; unencrypted desktop com- puter; malicious em- ployees; unse- cured disposal of PHI	theft of medical files	address; date of birth; name; social security number; diagnosis	encryption-capa- ble USB drives; se curely locked stor age facilities for mobile devices; policies prevent- ing the removal o devices from the office
	Cluster 1	employee; staff	unencrypted laptop; unencrypted ePHI	theft of laptop	address; date of birth; name; social security number; PHI	assurance of cor- rective action; en cryption of all un encrypted elec- tronic devices; up date of the policy on safeguarding ePHI
Period 2	Cluster 2	workforce mem- ber	unencrypted laptop; unen- crypted desktop computer; backup com- puter hard drive	theft of laptop and desktop	diagnosis; health information	technical assis- tance by OCR; procedures for safeguarding mo bile devices; re- training of the em ployee on the physical security of laptops; retrain ing of relevant IT personnel on standard encryp- tion configuration processes; update of password pol- icy; revision of HIPAA policies and procedures
Period 3	Cluster 1	employee	unencrypted desktop com- puter; external com- puter hard drives	theft of desktop and hard drive	clinical infor- mation; PHI	encrypted work stations and com puters; enhanced network security encrypting data a rest on computer physical safe- guards such as surveillance

					cameras and locks to deter and pre- vent unauthorized access; compli- mentary credit monitoring and identity theft pro- tection services
Cluster 2	workforce mem- ber	unencrypted hard drive of a laptop; unen- crypted external hard drive; negligence of workforce mem- ber	theft of hard drive	address; date of birth; name; social security number; ePHI; health infor- mation	storage devices;
Cluster 3	staff	negligence of employee; unencrypted laptop	theft of laptops	diagnosis; medical record number	notifying local law enforcement of the breach; retraining staff; blocking the laptop from ac- cessing the inter- nal computer net- work

4.3. Analysis of Unauthorized Access/Disclosure

Unauthorized Access/Disclosure is the third most frequently occurring data breach type.

Table 5 shows that 22 co-occurring keywords are grouped into three clusters in Period 1, 24 keywords into three clusters in Period 2, and 24 keywords into three clusters in Period 3. It is noted that 'staff,' 'employee,' and 'workforce member' are major co-occurring data breach incidents in all three periods. 'Business associate' started to co-occur in Period 2 and Period 3. "Email' and "Email address' started to co-occur in Period 2 and Period 3 and are a major source of unauthorized access/disclosure.

 Table 5. Clusters of Keyword co-occurrences of Unauthorized Access/Disclosure in Three Periods.

Period 1	Period 2	Period 3
22 items (3 clusters)	24 items (3 clusters)	24 items (3 clusters)
Cluster 1 (8 items)	Cluster 1 (9 items)	Cluster 1 (11 items)
corrective action plan	birth	assurance
ephi	clinical information	breach notification
health information	diagnosis	corrective action
ocrs investigation	employee	email
policy	ephi	email address

risk	health information	ocrs investigation
staff	social security number	policy
technical assistance	technical assistance	staff
	workforce member	substitute notice
Cluster 2 (7 items)		technical assistance
access	Cluster 2 (8 items)	workforce member
assurance	access	
breach notification	assurance	Cluster 2 (8 items)
corrective action	breach notification	address
employee	business associate	birth
phi	corrective action	business associate
protected health information	name	diagnosis
	phi	ephi
Cluster 3 (7 items)	protected health information	health information
address		name
birth	Cluster 3 (7 items)	social security number
credit monitoring	address	
diagnosis	email	Cluster 3 (5 items)
name	ocrs investigation	access
social security number	policy	clinical information
workforce member	safeguard	employee
	staff	phi
	substitute notice	protected health information

Table 6 shows the main insider/outsider threats, main vulnerabilities, breach incidents, impacts of data breaches, and responses to Unauthorized Access/Disclosure. Insider threats occur in All clusters in the three periods. No outsider threats are identified. Major insider threats include staff, employees, and workforce members. Minor insider threats are business associates. Human vulnerabilities include malicious employees, malicious former employees, errors of the staff, negligent employees, malicious business associates, disgruntled former business associates, and errors of business associates. Technical vulnerabilities include insecure websites and security holes in applications. Organizational vulnerabilities include weak access termination protocol and insecure records room. The impacts of the data breaches include unauthorized or suspicious access to ePHI, and accidental disclosure of medical files and email addresses.

Human responses include termination of the offending employee, retraining of the workforce, employee sanctions, and criminal charges. Technical responses include improvement of operation software, a program to track anomalies to detect inappropriate use or access, a new workflow in mailing processes to reduce the number of manual steps, password protection for electronic files, a secure online portal, two-factor email authentication, and encryption and tools to monitor Internet traffic and compliance. Organizational responses include assurance of corrective action, updated access termination protocol, improvement of HIPAA training materials, risk analysis procedure, revision of email policies, restricted workforce access to the patient folder, increased restrictions to access to PHI, and measures to improve internal security and limit employee access to records rooms.

In summary, it is noted that insiders such as employees, staff, and workforce members are the major threats in Unauthorized Access/Disclosure. The unauthorized accesses/disclosures lead to the disclosures of email addresses, paper PHI, ePHI, and other demographic and clinical information. While the frequency of unauthorized accesses/disclosures low in Period 1 and Period 2, it was increased rapidly in Period 3. While negligence of employees is a major insider threat in Theft, malicious employees and malicious business associates are major insider threats in Unauthorized Access/Disclosure. It is noted that due to the prevalence of malicious employees and malicious in Unauthorized Access/Disclosure, human and organizational responses to insider threats are stricter than those of Hacking an IT Incident and Theft, including termination of the offending employee, retraining of the workforce, employee sanctions, criminal charges, and updated access termination protocol.

Our findings in Table 6 are supported by the previously validated results such as access control vulnerabilities (e.g., coworkers' computers unattended while logged in and insufficient disabling of electronic and physical access at termination) [56]. The responses in Table 6 are also supported by the validated report such as effective security practices (e.g., two-way authentication for access), training continuously to maintain a proper level of knowledge, implementation of security best practices throughout the organization, use of anti-malware software, and training and awareness on risk perception and cognitive biases that affect a decision [55].

Table 6. Insider/Outsider Threats, Vulnerabilities, Breach Incidents, Impacts, and Responses in Unauthorized Access/Disclosure.

Unauthorized Access/Disclosure	Cluster	Insider/Outsider Threats	Vulnerabilities	Breach Incidents	Impacts	Responses
Period 1	Cluster 1	staff	insecure web- site; malicious staff	unauthorized access to PHI via the public website	ePHI	a settlement to OCR; a corrective action plan
	Cluster 2	employee	weak access termination protocol; malicious em- ployee	unauthorized access to an ap- pointment re- minder system after employ- ment ended; identity theft	PHI	updated access termination proto- col; termination of the offending em- ployee; retraining of the workforce on HIPAA poli- cies; improve- ment of HIPAA training materials, risk analysis pro- cedure, operation software, and au- diting methods
	Cluster 3	workforce mem- ber	malicious em- ployee	unauthorized access to pa- tient medical records	PHI	free credit moni- toring services for a year; a program to track anomalies to detect inappro- priate use or ac- cess; termination of the offending employee and criminal charges against him
Period 2	Cluster 1	employee; work- force member	malicious em- ployee; negligent phy- sician	suspicious ac- cess to ePHI; accidental dis- closure of	ePHI; medical rec- ords;	assurance of cor- rective action; ter- mination of the re- sponsible

				medical files via email	patients' names and clinical in- formation	individuals' em- ployment; em- ployee sanctions according to its policy and proce- dure
	Cluster 2	business associ- ate	a malicious business associ- ate (BA); errors of BA	unauthorized access to PHI; erroneous dis- closure of an- other patient's name in letters to patients		employee sanc- tions; HIPAA refresher training; a new workflow in mailing processes to reduce the number of manual steps
	Cluster 3	staff	errors of a staff member; negligent em- ployee	emailing;	PHI; email addresses	retraining staff on its encryption pol- icy; a revised pol- icy regarding elec- tronic transmis- sion of patient in- formation; pass- word protection for electronic files; sanction of the staff member, re- training the entire department; revi- sion of email poli- cies
Period 3	Cluster 1	staff	errors of em- ployees		email addresses of patients; PHI;	a secure online portal; training staff; two-factor email authentication; technical assis- tance by OCR; re- stricted workforce access to the pa- tient folder; em- ployee sanctions
	Cluster 2	business associ- ate		illegal access to ePHI; mailing error; hacking	ePHI	identity theft pro- tection services to affected individu- als; encryption and tools to moni- tor Internet traffic and compliance
	Cluster 3	workforce mem- ber	malicious em- ployee;	impermissibly accessed ePHI	demographic and clinical in- formation;	employee sanc- tions; revised pol- icy to detect

negligent em- ployee; mali- cious former employees; insecure rec- ords room	as well as paper PHI; access to the records room	ePHI; paper PHI	inappropriate ac- cess; increased re- strictions to access to PHI based on workforce mem- ber role and work location; training to all its employ- ees regarding role- based access; measures to im- prove internal se-
			measures to im-
			curity and limit employee access to
			records rooms.

5. Conclusions

The number of data breaches in the healthcare industry is increasing. A total of 712 healthcare data breaches were reported in 2021, exceeding the previous year's total by 10.9%, and 45,706,882 healthcare records were exposed or impermissibly disclosed [57]. Among industries that faced huge operational changes during the pandemic, the healthcare industry experienced the most substantial increase in data breach costs with \$9.23 million per incident—a \$2 million increase over the previous year [58].

In light of the rising data breaches in the healthcare industry, this study presented a novel approach to the analysis of the descriptive information posted on the website for the HHS OCR data breach reports. Most previous studies have focused on the aggregated statistics of data breach types and locations in the healthcare industry. While those studies were valuable in understanding the data breaches and establishing high-level cybersecurity measures, they could not provide an in-depth analysis of the insider/outsider threats, vulnerabilities, incidents, impacts, and responses to the data breaches. However, despite the insightful information on breach incidents on the HHS OCR data breach reports, it was difficult to analyze due to the unstructured textual contents. Given the current research gap, this study utilizes text mining and data visualization to analyze unstructured text to address two research questions: RQ1: What are the characteristics of insider threats in data breach incidents? RQ2: How have insider threats, vulnerabilities, data breach incidents, impacts/losses, and responses to the data breaches evolved? VOSviewer was used to analyze co-occurrences of keywords in all breach incidents and visualize the clusters of keywords, and NVivo was used to identify the incidents with keywords and analyze the descriptive contents and the insider threats.

The analysis of data breaches in Hacking/IT Incident shows that the major threats are from insiders such as staff, employees, and workforce members. Email phishing has been a persistent and prominent insider threat throughout the three periods. Human vulnerabilities of insider threats include the lack of social engineering awareness, malicious partners (e.g., vendors), and a lack of security awareness of employees. Malware and unauthorized access to the system by the business associates and staff occur through technical vulnerabilities such as weak safeguards for a system and weak security control. Organizational vulnerabilities of insider threats include a lack of a security management process and weak security control.

The analyses of data breaches in Theft also show that the insiders such as staff, employees, and workforce members are the predominant threats to theft. The majority of the insider threat comes from the negligence of the employees, followed by malicious employees. Thefts of medical files, laptops, computers, and devices occur through technical, organizational, and human vulnerabilities such as unencrypted PHI files, unencrypted laptop computers and devices, weak physical security, and negligence of employees. Theft arising from the negligence of employees requires organizational and human responses such as retraining of all staff on privacy and security policies and procedures and development of remote access policy; rather than technical responses. For Theft arising from malicious employees, organizational responses include securely locked storage facilities for mobile devices and the development of policies preventing the removal of devices from the office. While business associates are insider threats in Hacking/IT Incident, they are not a major part of insider threats in Theft.

Insiders such as employees, staff, and workforce members are the major threats in Unauthorized Access/Disclosure. While negligence of employees is a major insider threat in Theft, malicious employees and malicious business associates are major insider threats in Unauthorized Access/Disclosure. The various unauthorized accesses/disclosures lead to the disclosures of email addresses, paper PHI, ePHI, and other demographic and clinical information. Due to the prevalence of malicious employees and malicious in Unauthorized Access/Disclosure, human and organizational responses to insider threats are stricter than those of Hacking an IT Incident and Theft, including termination of the offending employee, retraining of the workforce, employee sanctions, criminal charges, and updated access termination protocol.

Previous studies have shown that insider threats are a major issue in data security in several fields, and periodic reports have also shown similar results [59]. However, the previous studies did not address how the inside threats lead to specific mitigation efforts. This paper explicitly addressed how the healthcare providers' specific insider threats are related to their vulnerabilities, data breaches, impacts of data breach incidents, and responses. This study showed that different types of insider threats call for different mitigation efforts. With the proposed approach, an individual healthcare provider can develop a comprehensive data security plan to minimize insider threats and prioritize investment budgets for high-impact data security projects. For example, if a healthcare organization has identified particular vulnerabilities to insider threats, it would be better prepared to minimize the vulnerabilities and protect its patient data from insider threats. While our study is limited to three data breach types, future research may analyze other data breach types. Investigation of the relationships between data breach types and data breach sources may shed further insights on the insider threats, vulnerabilities, data breach, impacts, and responses to the insider threats.

While our study is limited to three data breach types, an analysis can be extended to other data breach types such as emails, servers, or mobile devices and may reveal how insider threats affect mitigation efforts in these data breaches. An analysis of insider threats can be extended to other sectors such as retail, government, or banking for the generalization of the findings. Furthermore, future studies may also compare the usefulness of different text mining tools and their techniques for a richer analysis of insider threats.

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