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## HC3 White Paper - QR Code-Based Phishing as a Threat to the Health Sector

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On October 23, 2023, HHS published [QR Code-Based Phishing \(Quishing\) as a Threat to the Health Sector](#), a white paper focused on QR code phishing.

Phishing, the use of phony e-mails to deliver malicious code, has historically been a successful means for cyber attackers to compromise victim organizations and launch full-fledged, multi-staged cyberattacks. Phishing attacks are frequently utilized as the first stage of an attack on the infection vector, and this is especially true for the health sector.

A cyberattack that begins with phishing often ends with ransomware and/or a major healthcare data breach. Quick response (QR) codes were designed to quickly read and transmit legitimate data but have become increasingly abused as part of phishing attacks, called quishing. In this paper, we provide a brief overview of QR codes, phishing attacks, and the application of both of these to cyberattacks in the health sector.

HHS concludes this analysis with recommended defense and mitigation actions to reduce the likeliness and effectiveness of phishing attacks, including those augmented by the use of QR codes.

For additional details, please see the full report attached.

Health-ISAC had previously published a report named Observed Increase in QR Code Phishing Attacks, which can be accessed [here](#).

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Please email us at [contact@h-isac.org](mailto:contact@h-isac.org)

**Share Threat Intel:**

For guidance on sharing indicators with Health-ISAC via CSAP, please visit the Knowledge Base article CSAP ■Share Threat Intel■ Documentation at the link address provided here: <https://health-isac.cyware.com/webapp/user/knowledge-base> Additionally, this collaborative medium provides opportunities for attributed or anonymous sharing across ISACs and other cybersecurity-related entities.

**Knowledge Base:**

Check out our Knowledge Base for HITS integration documentation. <https://health-isac.cyware.com/webapp/user/knowledge-base/f4b0c136/>

**For Questions or Comments:**

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