

THE 13TH NATIONAL HIPAA SUMMIT

**HEALTH INFORMATION PRIVACY & SECURITY IN
SHARED HEALTH RECORD SYSTEMS**

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National Health Information Infrastructure

- ❖ Executive Order 1335, April, 2004—
 - Called for widespread adoption of interoperable EHRs within 10 years
 - Created position of National Coordinator for Health Information Technology
 - National Coordinator issued a Framework for Strategic Action issued July 21, 2004
 - Consists of 4 goals, each with 3 strategies

Goals of the NHII

❖ Informing Clinical Practice

➤ Promoting use of EHRs by

- Incentivizing EHR adoption
- Reducing the risk of EHR investment

Goals of the NHII

- ❖ Interconnecting clinicians by creating interoperability through
 - Regional health information exchanges
 - National health information infrastructure
 - Coordinating federal health information systems

Goals of the NHII

❖ Personalizing care

- Promotion of personal health records
- Enhancing consumer choice by providing information about institutions and clinicians
- Promoting tele-health in rural and underserved areas

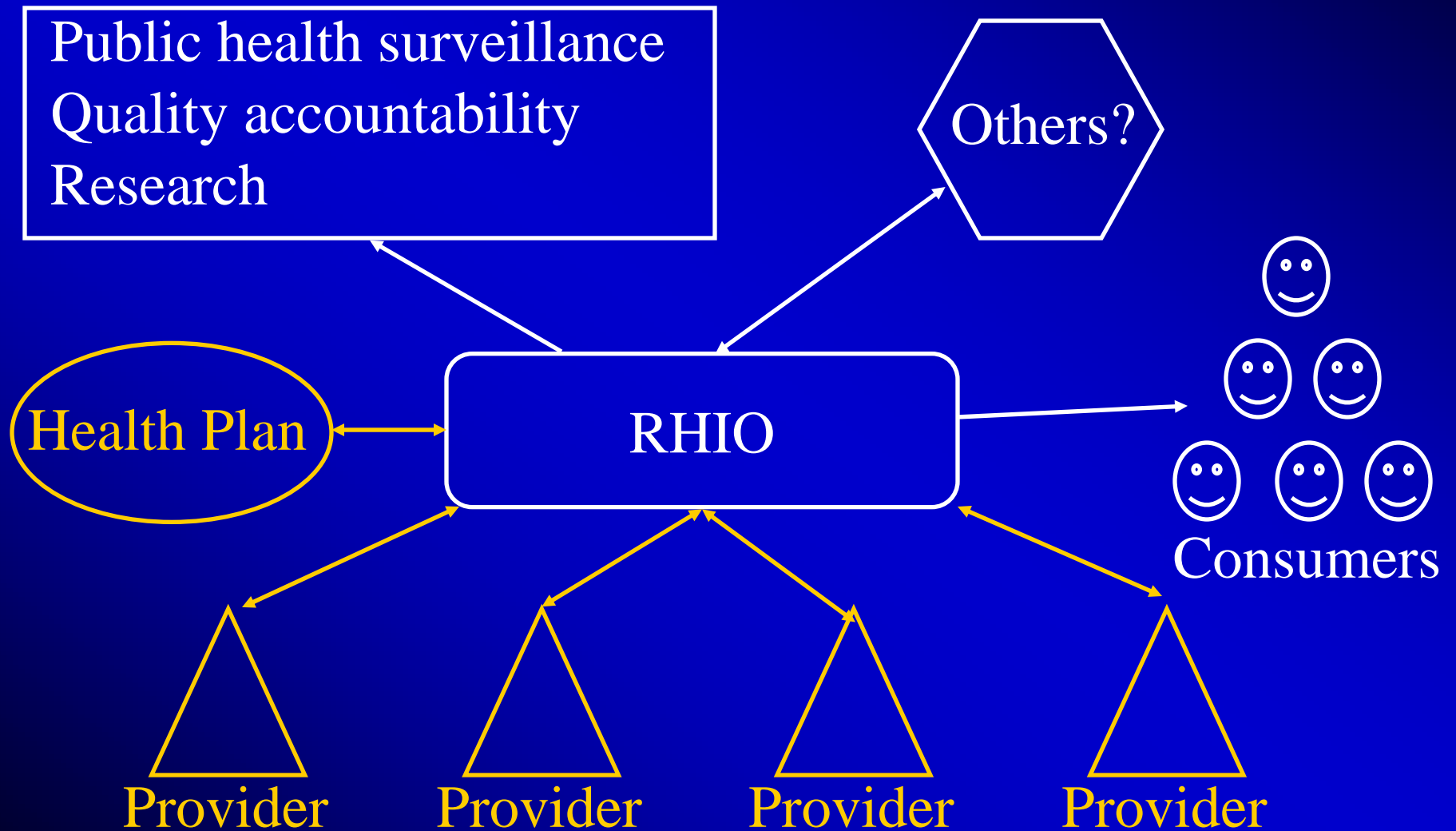
Goals of the NHII

- ❖ Improving population health
 - Unifying public health surveillance
 - Streamlining quality of care monitoring
 - Accelerating research and dissemination of evidence

Benefits for the Consumer

- ❖ Providers make better decisions, because--
 - They have better information
 - They use smart systems
- ❖ Improved public health surveillance and response
- ❖ Improved research and quicker adoption of best practices
- ❖ Consumers make better decisions because—
 - They have access to their own health information
 - They have qualitative information about providers

Regional Health Information Organization



What Am I Concerned About?

- ❖ Is my information available on the network?
 - Can I control this?
- ❖ Who is allowed access to my information on the network?
 - Will I know this? Can I control it?
- ❖ What uses can be made of my information on the network?
 - Will I know this? Can I control it?
- ❖ Do *I* have access to my information on the network? Can I change it?
- ❖ How secure is my health information on the network?
- ❖ What accountability is there for misuse of my information?

Consumer Rights under HIPAA

- ❖ HIPAA gives consumers rights to--
 - Access health information
 - Amend/annotate health information
 - Request restrictions on use and disclosure
 - Accounting of non-routine disclosures
 - Notice of privacy practices

Consumer Rights under HIPAA

- ❖ HIPAA does not give consumers rights to--
 - Decide whether to participate in electronic record exchange
 - Know whether information about them is being made available through an electronic exchange
 - Restrict what information is made available through the exchange, and to whom
 - Know who has had routine access to the information in the exchange
 - Get on-line access to information in the exchange
 - Receive notice of breaches of security of data in the exchange
 - Hold people accountable for misuses of data

Privacy under HIPAA

- ❖ All protected health information is the same
- ❖ Regulation of use and disclosure of health information is *permissive*, except
 - Disclosure to the individual
 - Disclosure to HHS for compliance
- ❖ Disclosure is generally permitted without consumer authorization for—
 - Treatment
 - Health care operations (including payment)
 - Public-interest related purposes

Privacy under HIPAA

Will the network allow--

- ❖ Access by providers for—
 - treatment
 - payment
 - health care operations
- ❖ Access by health plans for payment
- ❖ Access by public health authorities
- ❖ Access for research
- ❖ Access by law enforcement authorities
- ❖ Access by private litigants
- ❖ Access by social service agencies

Security under HIPAA

Covered entities must maintain *reasonable and appropriate* administrative, technical and physical safeguards—

- ❖ To ensure confidentiality and integrity of information
- ❖ To protect against reasonably anticipated--
 - threats to security or integrity
 - unauthorized uses or disclosures

Security under HIPAA

- ❖ Technology neutral, flexible and scalable
- ❖ To be implemented in a manner that best suits the entity's needs, circumstances and resources, taking into account--
 - Size and complexity
 - Technical infrastructure and capabilities
 - Potential risks to health information
 - Cost of security measures

Security in an Information Exchange

- ❖ Standards with implementation features, e.g.
 - Standard: access control
 - Implementation feature: Unique user identifier (password, PIN, biometric, etc.)
- ❖ Some implementation features are “addressable” (optional) – e.g., encryption

Security under HIPAA

- ❖ Authentication – who is this?
- ❖ Patient matching
- ❖ Authorization – what information can this user access?
- ❖ Logging and auditing
- ❖ Enforcement

Policing the Exchange under HIPAA

- ❖ Not directly regulated
- ❖ Covered entities disclosing health information are required to obtain & enforce contractual assurances that the business associate will--
 - Safeguard the data (security)
 - Restrict uses and disclosures to those permitted to the covered entity (privacy)
 - Return or destroy the data on termination, if feasible

Policing the Exchange

- ❖ A covered entity is liable for breaches by business associate if the covered entity--
 - Learns of a pattern or practice of violations, and
 - Fails to take reasonable and appropriate remedial measures
- ❖ Weak standard
- ❖ No private right of action