

# The Challenge Facing Privacy Officers in HIPAA



at the Third National HIPAA Summit, Washington D.C. October 26, 2001



### **Privacy Officer's Focus Thus Far**



- PO's focused on compliance
- mastering regs, updating information systems, reviewing data sharing, developing training and certification, etc.
- quite logical and very necessary
- PO the key coordinating staff person
- BUT, compliance is not the full HIPAA task
- winning health-consumer trust is also vital
- and PO's the ones to lead this effort

### **Consider the Health Consumer**



- PO's must anticipate how health consumers will react to required HIPAA privacy practices
- will be different types of consumers with different privacy orientations
- If all handled the same, in "letter-of-the-law" compliance, will generate confrontations, health-consumer distrust, complaints to regulators, and potential litigation
- FEW IF ANY PO's ADDRESSING THIS YET

#### **My Health Privacy Background**



- Privacy and Freedom (1967)
- National Acd'y of Sciences Study (1970-72); <u>Data</u> <u>Banks in a Free Society</u> (1972)
- U.S. National Bureau of Standards study; <u>Computers</u>, <u>Health Records</u>, and <u>Citizen Rights</u> (1976)
- Harris-Westin <u>Health Information Privacy Survey</u> (1993) (advisor in 50 privacy surveys since 1978)
- 1990-2001: privacy consulting for providers, payors, health-data-systems, both government and private
- 2000-2001 Privacy & American Business Corporate Privacy Officers Program

### **Dynamics of the Health Consumer**



- have some excellent and sophisticated health privacy surveys (also some garbage)
- will draw on three solid ones that reach quite similar results:
  - Harris-Westin, 1993
  - California HealthCare Foundation, 1999
  - Gallup, 2000
- key-factor analysis the most important value
- offers guidance for communications development and privacy-administration by PO's

### What Solid Surveys Confirm...1



- protecting privacy of health information "very important" to consumers -- 77%
- shift from paper to computer records seen to weaken confidentiality -- 54%
- 84% concerned their personal health information might be given to others without their consent
- high info.-handling trust in doctors (90%) and hospitals (66%) but not insurers (42%) and managed care companies (35%)

### What Solid Surveys Confirm...2



- 18% in 1999 say their medical info. was disclosed "improperly" by a provider, insurer, gov't agency, or employer. Down from 27% in 1993 survey
- Half say this resulted in harm or embarrassment
- 15% of consumers (and 38% reporting breaches) say they have taken actions to keep their health information confidential
  - go to another provider
  - pay for care themselves
  - give incomplete or false medical history info.
  - ask doctor not to record a condition or use less serious terms

## What Solid Surveys Confirm...3



- Majorities not comfortable with many uses of their health info. beyond the care setting
- 60% would <u>not grant access to hospital offering</u> preventive care programs
- 61% would not allow employer for hiring
- 56% would <u>not</u> allow health insurer offering benefits at lower costs
- but, 70% would grant access to drug companies to notify about new drugs or other products
- and majorities <u>would</u> grant for government or academic research studies with privacy safeguards

### What Drives These Views?



- beyond demographics, Harris-Westin surveys find three key factors shaping consumer attitudes here
- 1. Distrust Index: based on level of trust in institutions and fears of technology abuse
- 2. Personal medical situation: users of mental health services; persons with adverse physical conditions; persons without health insurance
- 3. Health-privacy orientation: 45% in 1993 scored High on Medical Privacy Concern Index -- 89M adults then. Compares to 25% of public who are general Privacy Fundamentalists in 2001

### Implications for HIPAA and PO's



- health consumers will differ strongly in their reactions to HIPAA communications and procedures
- predictable adverse reactions to <u>Notices</u>, <u>Consents</u>, and <u>Authorizations</u> by High-Privacy consumers if done in traditional bureaucratic-legal manner
- similar potential in face-to-face explanatory communications, seeking data-sharing, responding to record-access requests, etc.
- bad experiences with GLB (financial services) are a warning -- and bad notices would produce worse reactions in health settings

#### What Can/Should PO's Do?



- <u>One:</u> study the survey data, and assess implications for your type of covered entity, your consumer population; etc.
- <u>Two</u>: identify the "consumer-trust pressure points" in the HIPAA requirements
  - I see at least 20 such critical situations, primarily in provider settings but also for managed-care, insurers, pharmaceutical companies, and dataprocessors
- <u>Three</u>: develop a multi-step, multi-media communication process, geared to the different potential reactions of health-consumer segments

#### Some Resources to Assist PO's



- Harris Interactive and Privacy & American Business will conduct a new HIPAA-oriented consumer-trust survey in January
- will explore how consumers would want the privacyservice "pressure points" to be handled
- will test responses to different organizational communications formulations, overall and by consumer segments
- will not only help covered entities but could help shape HHS interpretations of HIPAA rules

#### **Survey Sponsorships Available**



- the new survey will be made public in early Spring and widely discussed
- health organizations and foundations that sponsor will participate in choosing key topics and developing questions
- If interested in considering sponsorship, contact:
  - Dr. Alan F. Westin, Privacy & American Business
  - Tel. 201-996-1154 Fax 201-996-1883
  - Email: ctrslr@aol.com

#### Also P&AB's CPO-2002 Program



- Since 2000, P&AB has had year-long program for corporate privacy officers -- 60 organizations now
- Provides special proprietary materials, workshops, peer case studies, participation in P&AB's annual national privacy conference, and more
- HIPAA issues fully covered, in Industry working Group
- If interested, please contact:
  - Lorrie Sherwood, Privacy & American Business
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