

- Recommendations pertinent to accessibility of health information via the Nationwide Health Information Network
- June 22, 2006 HHS should assess the desirability and feasibility of allowing individuals to control access to specific content of their health records via the NHIN, and if so, by what appropriate means.
- April 17, 2007 Public Hearing on Consumer Controls for Sensitive Health Records
 - Testifiers: Dr. Robert Fagnant, ACOG/Intermountain; Dr. Zeb Taintor, APA;
 Cheryl Floyd, PA Recovery Organization Alliance; Dr. Brian Keaton, ACEP;
 Dr. David Kibbe, AAFP; Dr. Michael Zeroukian, Michigan State; Victoria
 Prescott, General Counsel, Regenstrief; Joy Pritts, Georgetown University





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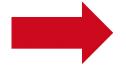
- February 28, 2008
 - Design of NHIN should permit individuals to sequester specific sections of their health record in predefined categories. Categories and their contents should be defined on a uniform, national basis.
 - HHS should initiate open & transparent process to define categories, taking into account patient concerns and concerns of health care providers about quality of care.
 - Design of NHIN should include notation when information has been sequestered at the patient's direction.
 - Design of NHIN should include break the glass feature allowing complete access in the event of a medical emergency (description of circumstances should be part of audit trail; privacy official should be notified; patient should also be informed).





- February 28, 2008 (cont.)
 - HHS should monitor developments in the relationship between clinical decision support and sequestered health information and determine if or when pilots, trial implementations or other research measures are warranted.
 - HHS should support research, development and pilot testing of technologies and tools for sequestering categories of sensitive health information transmitted via the NHIN
 - HHS should support ongoing study of the consequences of sequestration
 - Design of NHIN should permit individuals to sequester specific sections of their health record i





- November 10, 2010
 - Conduct an environmental assessment of current capabilities of electronic health records and HIEs to identify and manage sensitive information
 - Compile and publish best practices and existing standards, if any, for the identification and management of sensitive information categories
 - Invest in research to enhance the capabilities of electronic health records and HIEs to identify and manage sensitive information, including the development of standards, if appropriate.
 - Invest in pilot tests and potential future demonstration projects to assess the technological feasibility, effects on patient care, efficacy for privacy protection, benefits and costs, and other previously unidentified consequences of these capabilities.





- November 10, 2010 (cont.)
 - Potential categories of sensitive data, based on federal and state law-
 - Genetic Information
 - Psychotherapy notes
 - Substance abuse treatment records
 - HIV and other sexually transmitted diseases
 - Mental health information (beyond psychotherapy notes)
 - Children and Adolescents
 - Sexuality and Reproductive Health Information





- HITECH Act specifically directed the HIT Policy Committee to make recommendations for
 - "technologies that protect the privacy of health information and promote security in a qualified electronic health record, including for the segmentation and protection from disclosure of specific and sensitive individually identifiable health information with the goal of minimizing the reluctance of patients to see care (or disclose information about a condition) because of privacy concerns, in accordance with applicable law..."
- Requires ONC to "ensure that the relevant and available recommendations and comments from [NCVHS] are considered in the development of policies."

