

# Basic Patient Privacy Consents

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# Basic Patient Privacy Consents

**Adapted from  
IHE Privacy & Security Workgroup Presentation**



What IHE Delivers





# Agenda

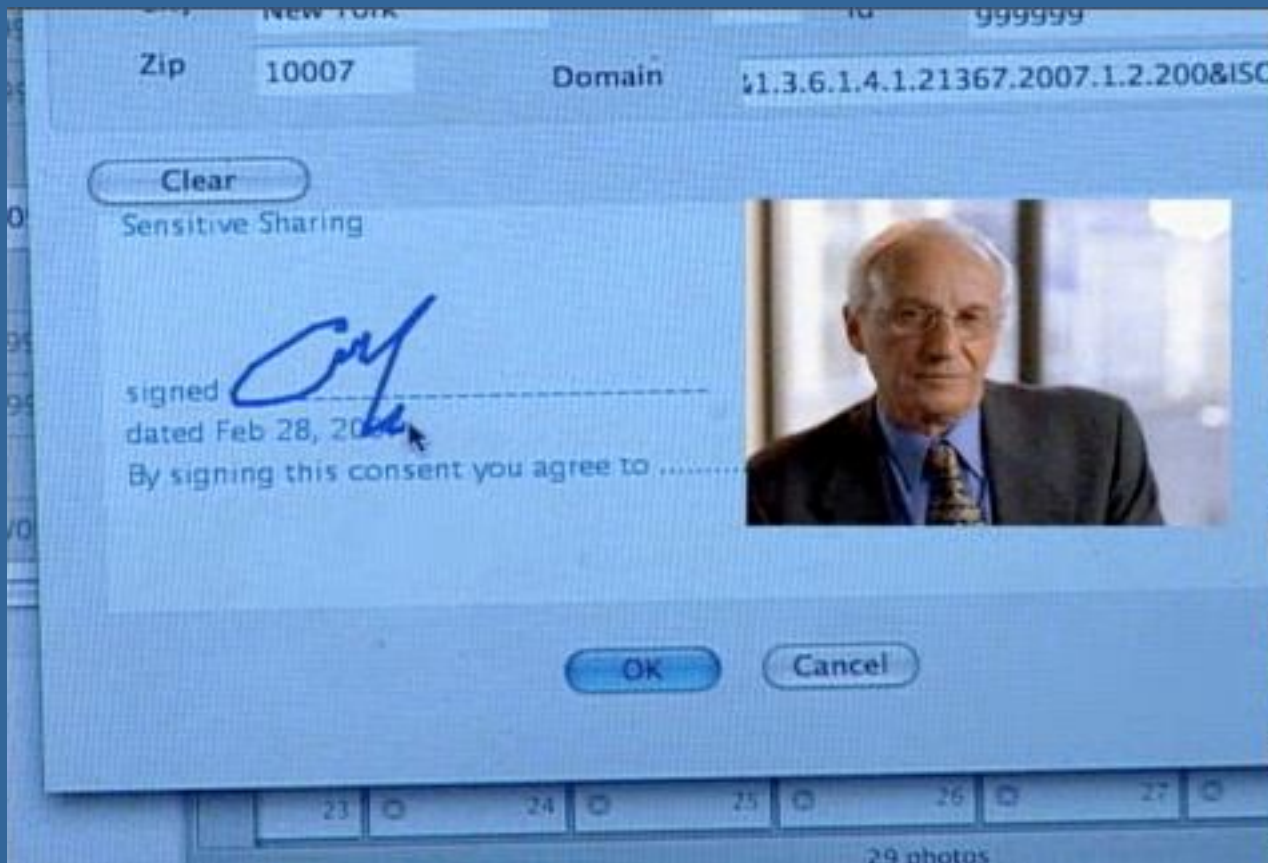
- **Lead Ideas**
- **Sample Implementation**
- **Possibilities**
- **References**

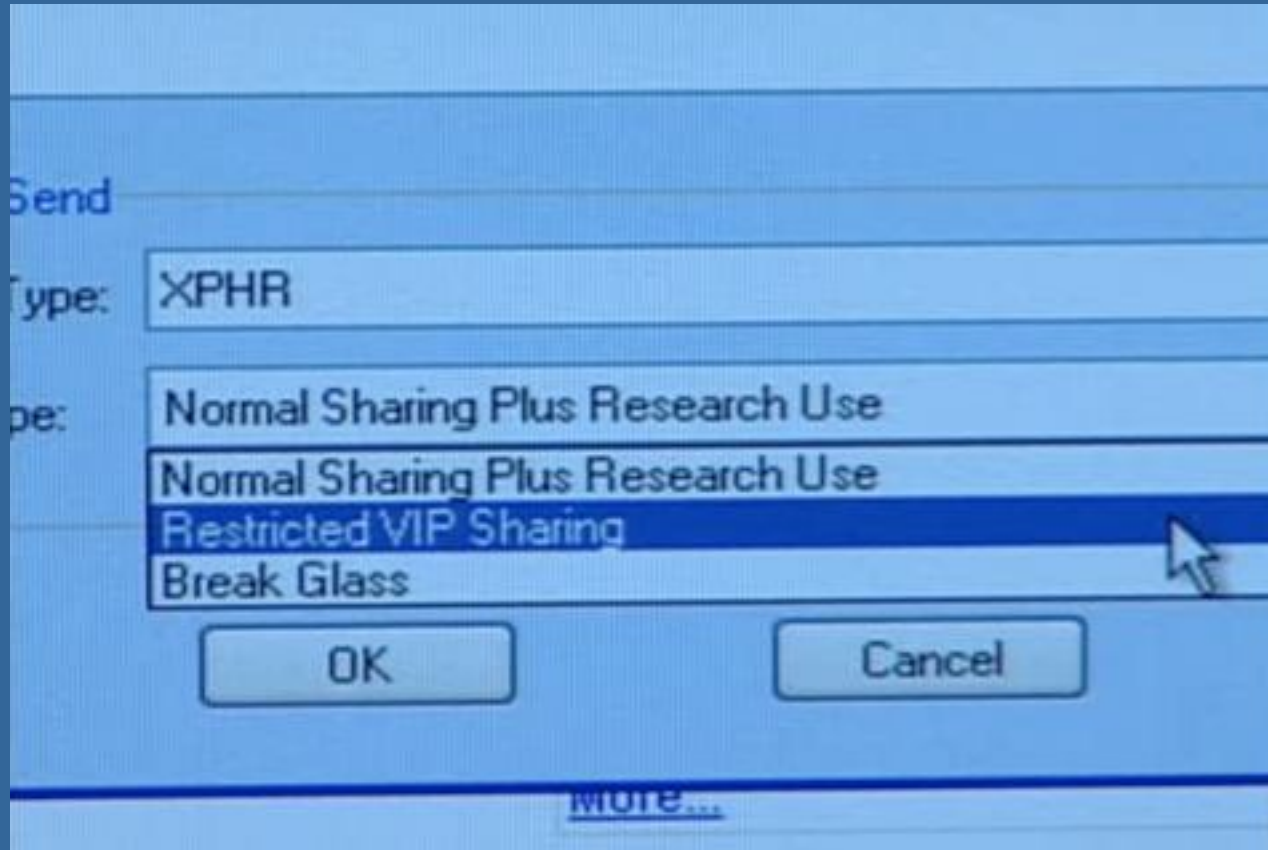
# IHE Video

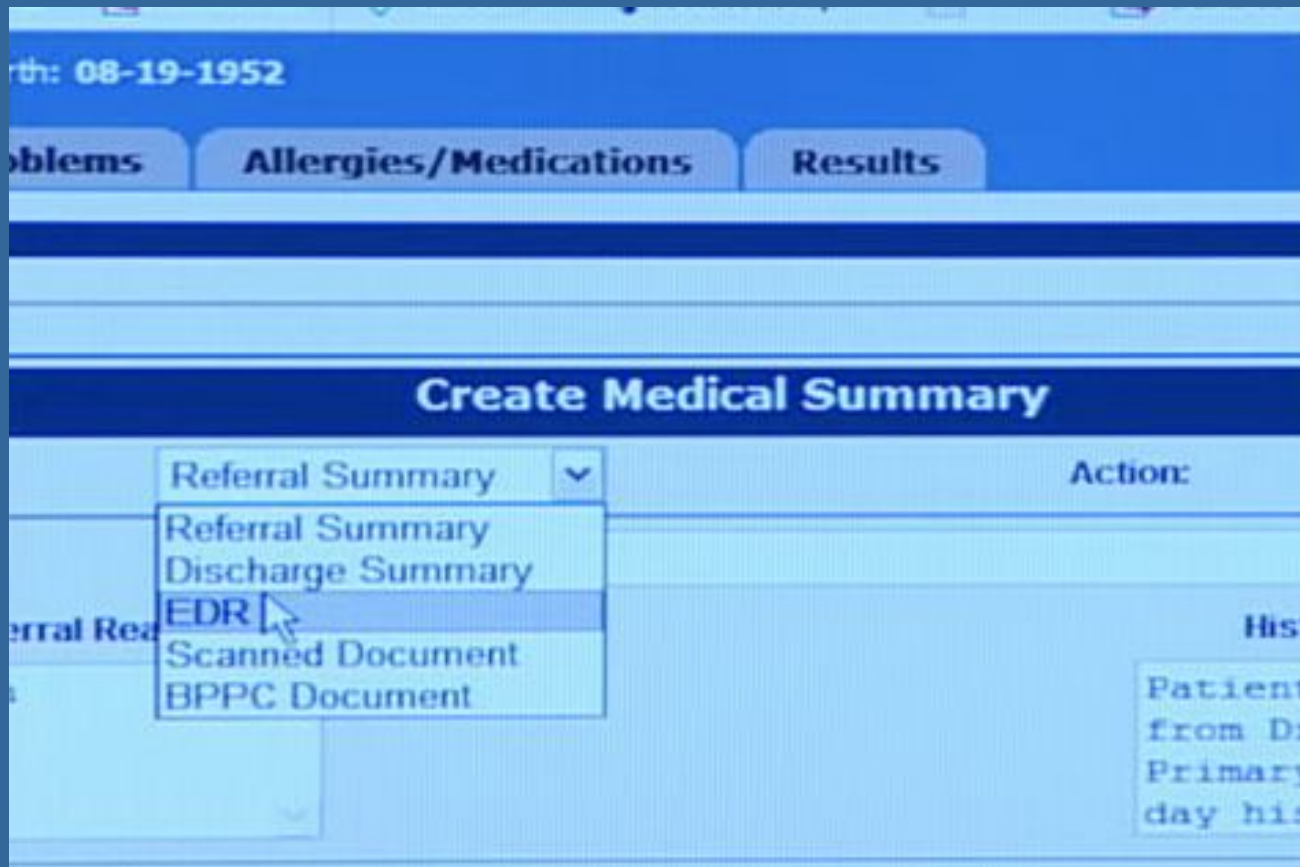
## **Medical Content and Patient Privacy Disclaimer**

The information, graphics, text, video, audio, or pictures (collectively, "Materials") contained in this video are made available strictly for educational purposes and are not necessarily medically accurate for the scenarios demonstrated. Patient names are not consistent and not all clinical data is relevant to scenario.

In addition, all information collected and displayed within this video demonstration is simulated to convey the scenario and does not contain any actual patient information.








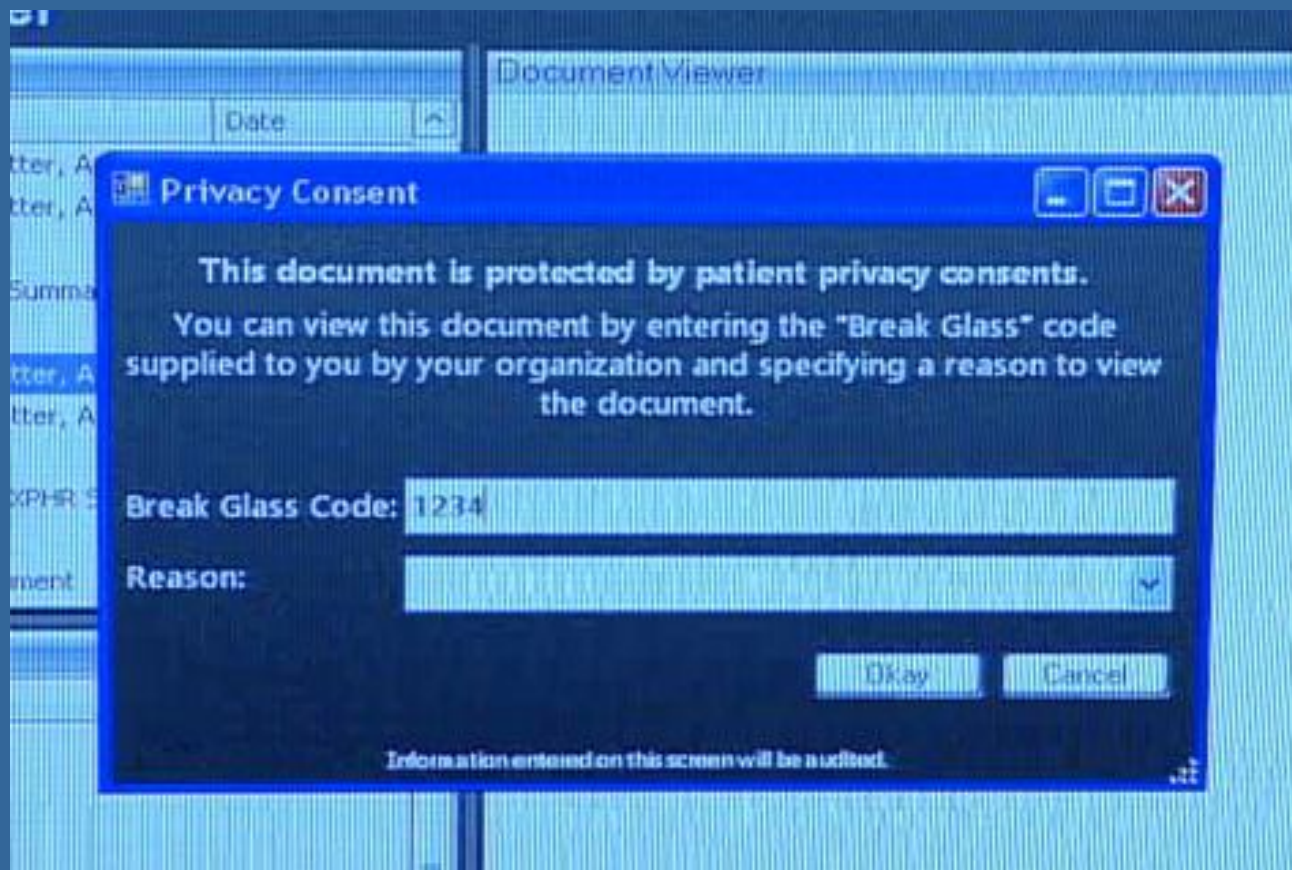
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2007.1.2.133&ISO	20070228201103	20070228201103
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SystemName	EventDisplayName	EventOr
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# The Reality: Compliance

- In 2004, when Bill Clinton had heart surgery at New York's Columbia Presbyterian Medical Center, 17 hospital employees – including a doctor – peeked at the former president's health care records out of curiosity...

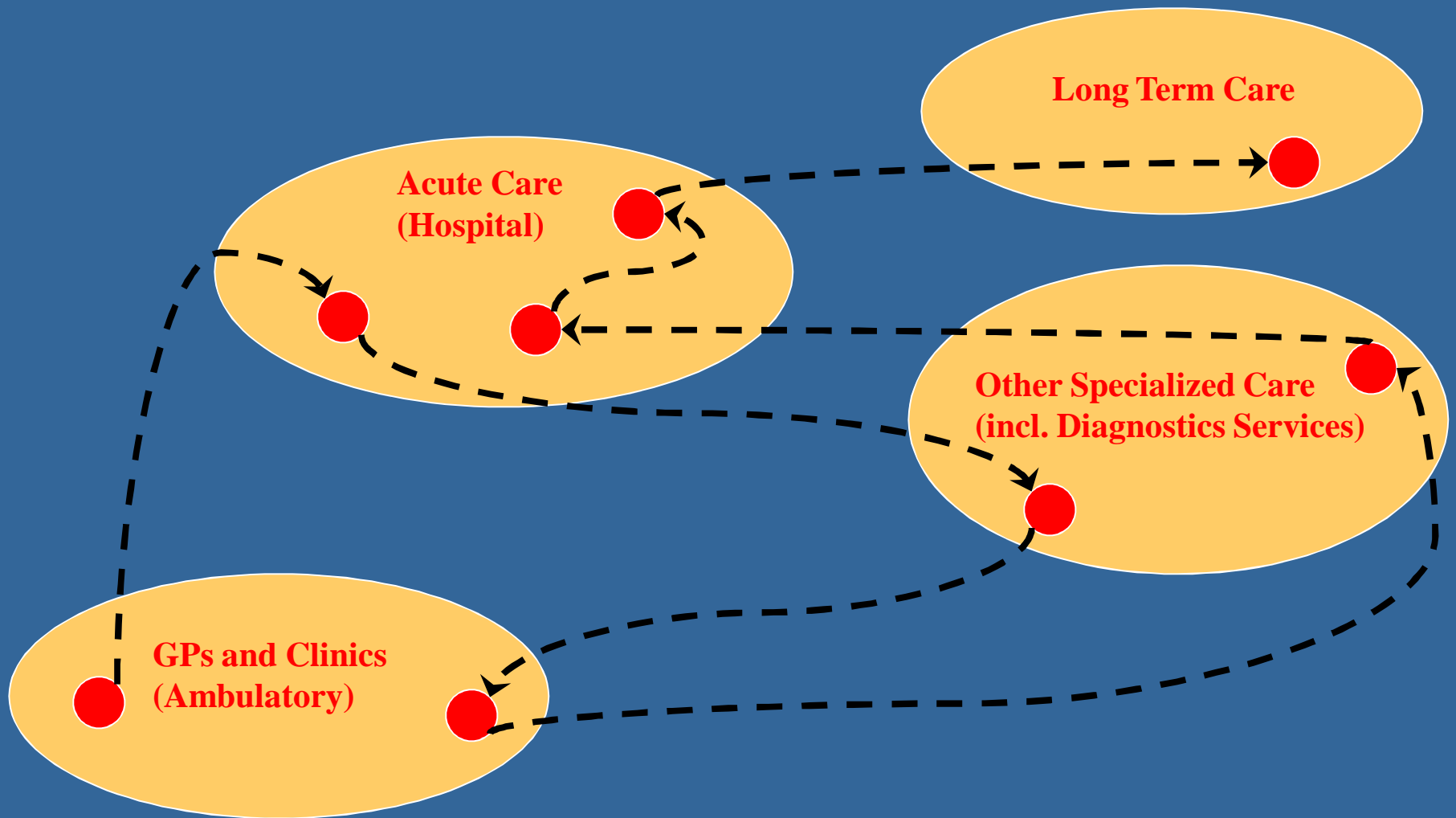
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# BPPC Relevance



# Documents Created and Consumed

EHR-LR:  
Longitudinal Record  
as used  
across-encounters

Document  
Repository

PCPs and Clinics  
(Ambulatory)

Acute Care  
(Inpatient)

Other Specialized Care  
or Diagnostics Services

Long Term Care

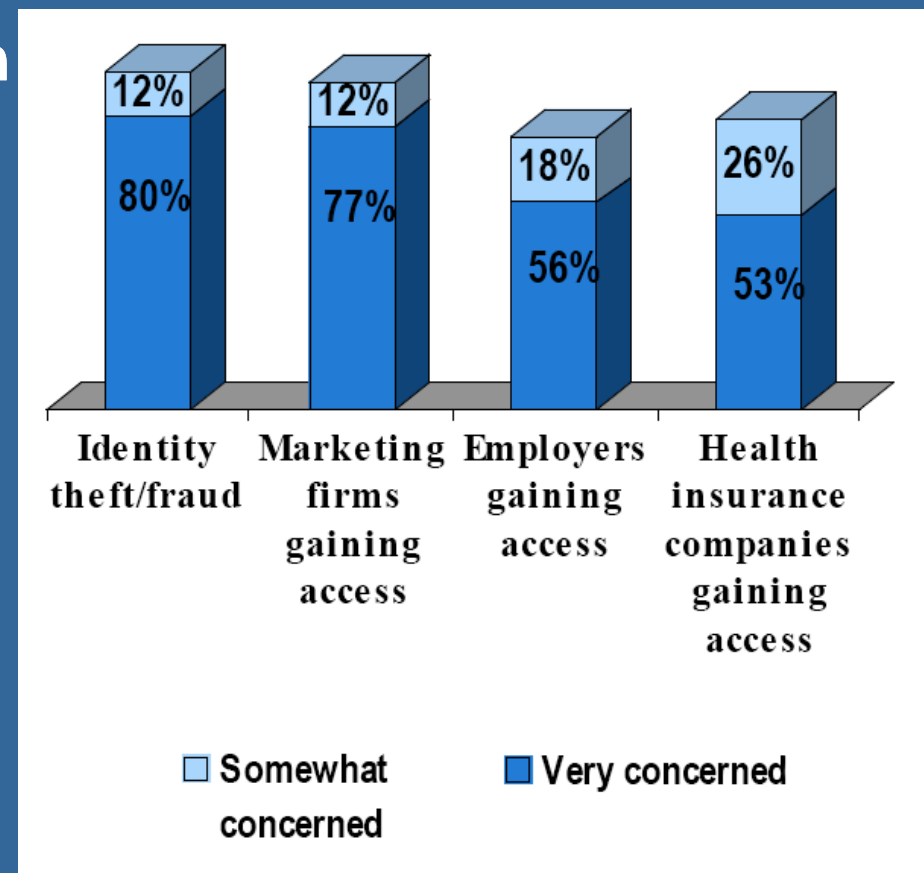
Documents Registry

EHR-CR: Care Record systems  
supporting **care delivery**

◀ *Submission of Document References*  
◀ *Retrieve of selected Documents*

# General Concerns

- November 2006 poll of 1000+ Americans:  
If your personal health information existed in an online network, how concerned would you be about...



# BPPC Offers

- **Policy**
- **Process**
- **Technology**

# What do Standards Define?

## ● Policy

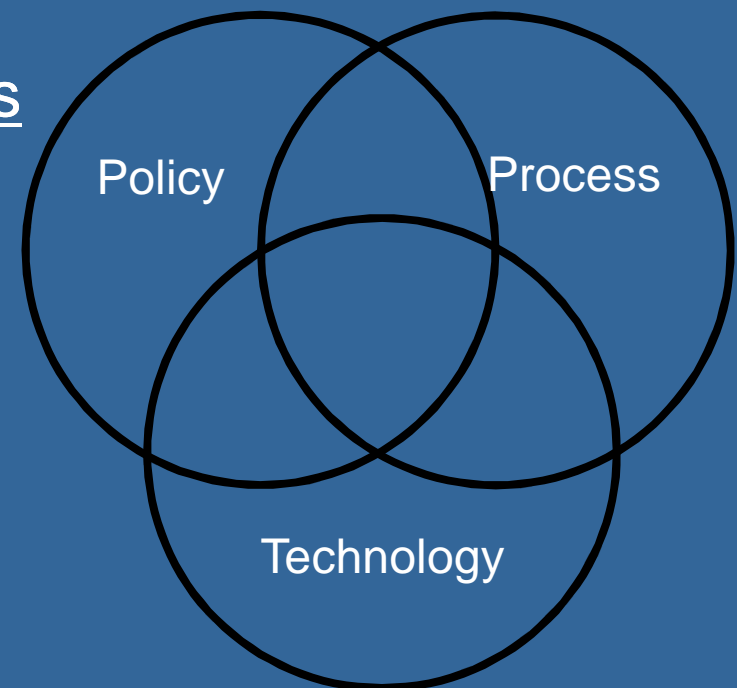
- Driven by business goals
- Informed by Risk Assessments
- Defines rights and responsibilities
- Defines punishment

## ● Process

- Enforces policy
- How people or organizations act
- who / what / where / when / how

## ● Technology

- Enforces policy
- How equipment should act
- Algorithms and data formats



# Value Proposition

## ● An XDS Affinity Domain

- Develop a set of privacy policies,
- Each policy is given a number (OID)
- Implement them with role-based or other access control mechanisms supported by EHR systems.

## ● A patient can

- Be made aware of the privacy policies.
- Have an opportunity to selectively acknowledge the options from the policies presented
- Have control over access to their healthcare information.

# Before (2006)

- **One Policy for the XDS Affinity Domain (HIE)**
- **Patient doesn't agree → Don't publish**
- **VIP Patient → Don't publish**
- **Sensitive Data → Don't publish**
- **Research Use → No Access**

# Implementation Limitations

- **Supportable**
- **Possible**
- **Not Possible**

# BPPC supportable Consents

- **Explicit Opt-In is required which enables HIE allowed document use**
- **Explicit Opt-Out that would prevent all use of their documents**
- **Implicit Opt-In allows for document use**
- **Explicit Opt-Out of any document publication**
- **Explicit Opt-Out of sharing outside of local event use, but does allowing emergency override**
- **Explicit Opt-Out of sharing outside of local event use, and without emergency override**
- **Explicit authorization that would allow specific research project**
- **Change the consent policy (change from opt-in to opt-out)**
- **Allow direct use of the document, but not re-publishing**
- **Enable use of document retrieval across communities using XCA**
- **Explicit individual policy for opt-in at each clinic**
- **Explicit individual policy for opt-in for a PHR choice**
- **Explicit Opt-In for a period of time (episodic consent)**

## Can current technology implement these?

- Patient identifies individuals that have rights to their data
- Patient identifies individuals that do not have rights to their data
- Each access of the data must be individually authorized by the patient
- A document with a mixture of more/less sensitive information thus needing different levels of protection
- Notification to those that have used a document under consent that is now revoked
- Pulling back copies of documents that have been used under a consent that is now revoked



# References

# Standards and Profiles Used

- **HL7 CDA Release 2.0**
- **IHE - XDS Scanned Documents**
  - PDF/A - ISO 19005-1b
- **IHE - Document Digital Signature**
  - XML-Digital Signature, XadES
- **IHE - Cross Enterprise Document Sharing**
- **IHE - Cross Enterprise Sharing on Media**
- **IHE - Cross Enterprise Reliable Interchange**
- **IHE - Cross Community Access**

# Informed by Privacy Policy Standards

- **ISO IS22857 Trans-border Flow of Health Information**
- **ISO TS 26000 Privilege Management and Access Control (Parts 1, 2, draft 3)**
- **ASTM E1986 Standard Guide for Information Access Privileges to Health Information**

# Questions?

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