Chair Monnes Anderson and members of the Senate Health Committee:

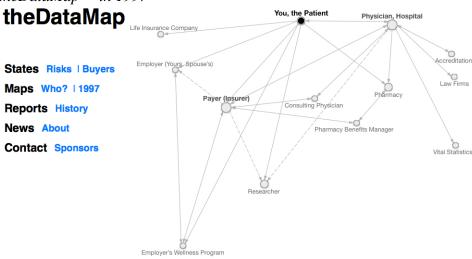
SB 144 comes with great promise, but a bill of this magnitude is not ready for prime time. HIPAA security rules simply do not cover synchronous two-way interactive video conferencing.

Before technology races ahead, the Oregon legislature must pull back the curtain on telemedicine business practices so that patient care and privacy will not be compromised. The legislature must:

- 1. Review and revise legislation regarding the licensing process for telemedicine and implemented by the Oregon Board of Medical Examiners.
- 2. Review and tighten federal HIPAA privacy and security loopholes, preferably with the help of professional organizations (such as <u>American Association of Family Physicians</u> and <u>American College of Physicians</u>) and big data experts (such as legal scholar <u>Frank Pasquale</u>² and Electronic Frontier Foundation attorney Nate Cardozo).

With big capital³ investments, Dr. Phil helped hang the 21st Century video conferencing shingle for Doctor on Demand. Dr. Mehmet Oz⁴ preaches telemedicine of another kind—one where a patient's death can be broadcast without permission. These healthcare televangelists have a shared faith that HIPAA privacy rules won't be a barrier to their business plan.

In less than 20 years, the amount of health care data collected and shared has grown exponentially. $theDataMap^{TM}$ in 1997^5



¹ http://www.oregon.gov/omb/Topics-of-Interest/Pages/Telemedicine.aspx

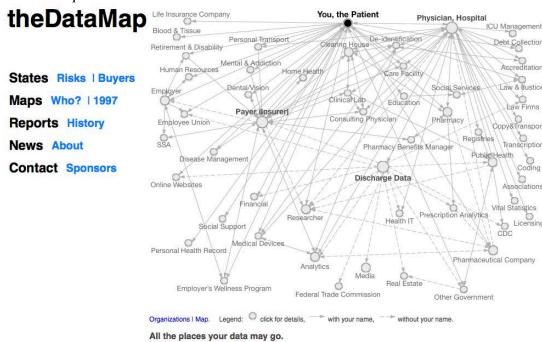
² Review of *The Black Box Society: The Secret Algorithms That Control Money and Information*, Frank Pasquale, Harvard University Press, 2015. 319 pp. http://www.sciencemag.org/content/347/6221/481.summary

ProPublica, Jan. 2, 2015: "(T)he law (HIPAA) prohibits medical professionals from sharing information about a patient only after he has been examined or treated." https://www.propublica.org/article/when-a-patients-death-is-broadcast-without-permission

³ Andreessen Horowitz, Google Ventures, <u>Lerer Ventures</u>, <u>Shasta Ventures</u>, <u>Venrock</u>. Cofounders: CEO Adam Jackson; executive producer of The Doctors Jay McGraw and his dad, TV's Dr. Phil McGraw. Former senator Tom Daschle serves on Board. <u>Athena Health's Jonathan Bush</u> invests and advises. http://www.doctorondemand.com/our-team/

⁴ When a Patient's Death is Broadcast Without Permission, Charles Ornstein

⁵ http://thedatamap.org/about.html theDataMapTMoperates as a research project in the Data Privacy Lab, a program in the Institute for Quantitative Social Science (IQSS) at Harvard University. The project leader is Professor Latanya Sweeney. Bob Gellman points out that health data does not respect a silo.



Now our personal health information (identified and de-identified) has no clear chain of custody—a big problem since researchers are learning that data released in a simply anonymized form can be easily reidentified. Furthermore, facial recognition software could soon identify us in any photo Congress is aware that consumers are surreptitiously profiled by data brokers who sell then lists of rape victims, alcoholics, and "erectile dysfunction sufferers."

The current issues of Science Magazine is devoted to "The End of Privacy." "Accountable http⁹" is a variant of the http protocol that was proposed by MIT researchers. Httpa conveys usage restrictions between the data providers and data users, creating a network log each time a protected resource is accessed. These logs might be valuable in protecting patient health data to determine compliance with HIPAA.

Confidentiality breaches jeopardize a doctor ethically and legally.

- Hippocratic Oath: Modern Version: *I will respect the privacy of my patients, for their problems are not disclosed to me that the world may know.* ¹⁰
- In Oregon, "Providers billing for covered telemedicine services are responsible for Complying with Health Insurance Portability and Accountability Act (HIPAA) and Authority

⁷ Martin Enserink and Gilbert Chin, *Unmasked*, http://www.sciencemag.org/content/347/6221/492.full

⁶ de Montjoye, Radaelli, Singh, Pentland, *Unique in the shopping mall: On the reidentifiability of credit card metadata; The End of Privacy; Science, 30 January 2015*

http://www.sciencemag.org/content/347/6221/536.full

⁸ http://www.forbes.com/sites/kashmirhill/2013/12/19/data-broker-was-selling-lists-of-rape-alcoholism-and-erectile-dysfunction-sufferers/

⁹ Susan Landau, Control use of data to protect privacy http://www.sciencemag.org/content/347/6221/504.full

¹⁰ http://www.pbs.org/wgbh/nova/body/hippocratic-oath-today.html

Confidentiality and Privacy Rules and security protections for the patient in connection with the telemedicine communication and related records. 11

The Telehealth Alliance of Oregon¹² references white paper from the Center for Telehealth and e-Health law. An excerpt below:

By way of background, the HIPAA Security Rule (45 C.F.R. §§ 164.302 – 164.318) establishes standards to protect individuals' electronic personal health information (ePHI) that is created, received, used, or maintained by a covered entity (i.e., a hospital, physician's office, a skilled nursing facility, a health plan, etc.). The Security Rule requires that covered entities put in place the appropriate administrative, physical and technical safeguards to ensure the confidentiality and security of ePHI. In essence, the Security Rule governs how covered entities should safeguard the health information they have from unauthorized access.

The HIPAA Privacy Rule (see generally 45 C.F.R. §§ 164.500 – 164.534) establishes standards to protect individuals' medical records and other protected health information (PHI). The Rule requires covered entities to sets limits and conditions on the uses and disclosures that may be made of such information without patient authorization. The Rule also gives patients rights over their health information, including rights to examine and obtain a copy of their health records, and to request corrections. In other words, the Privacy Rule governs how covered entities may use and disclose health information in its possession.

As indicated, one major difference between the Security and Privacy Rules is that the Security Rule applies only to ePHI. As defined in the Security Rule, ePHI includes telephone voice response and fax back systems, but does not include paper-to-paper faxes, video teleconferencing, or messages left on voice mail — because the information being exchanged did not exist in electronic form prior to the transmission. If, however, a covered entity records a videoconferencing session and saves a copy, that saved version would be subject to the Security Rule.

Note, however, that because the Privacy Rule applies to all PHI (not just that which exists in electronic form), videoconferencing sessions involving the use of PHI and all related information and documentation would be subject to the requirements of the Privacy Rule.

In other words, the HIPAA security rule doesn't apply to teleconferencing; but a breach of privacy could be trouble for the unaware provider.

Doctor on Demand requires Google Chrome and a Google app¹³; and Doctor on Demand is part of the Google Ventures Life Science & Health portfolio. ¹⁴ Eric Schmidt, Executive Chairman of Google once said "Google policy is to get right up to the creepy line and not cross it. ¹⁵"

WebMD interviewed Dr. Phil talking about Doctor on Demand at a recent digital health summit. 16

~1:38 We're very excited now because we've just added mental health services to that.

~3:00 You're able to go through; select a therapist; schedule an appointment; and see that person on an ongoing basis. And you can do it with the anonymity from your own home.

Then at 4:52 it gets creepy. Dr. Phil encourages opening email exchanges of arguments with a significant other or uploading a photograph of what might be marijuana in a teenage son's sock drawer.

15 http://www.theguardian.com/technology/2013/aug/14/google-gmail-users-privacy-email-lawsuit

¹¹ OAR 410-130-0610(3)(c)(A) Telemedicine http://arcweb.sos.state.or.us/pages/rules/oars 400/oar 410/410 130.html

¹² http://www.ortelehealth.org/content/privacy-and-security-0

¹³ https://patient.doctorondemand.com/patient/non_chrome/

¹⁴ http://www.gv.com/portfolio/

¹⁶ http://digitalhealthsummit.com/live/ http://digitalhealthsummit.com/2015-speakers/ https://www.youtube.com/watch?v=1tf7NOwPrSA

To learn more, I called up Doctor on Demand. There was no answer at the patient support line. I did get through when I called the Doctor Support line. I was told two doctors were immediately available for the "digital urgent care." \$40 for 15 min. UnitedHealth Care plans are covering Doctor on Demand visits.

- Christopher Pedersen¹⁷ is not listed at the Doctor on Demand website. He received an Oregon license (MD 169060) for telemedicine on 12/23/14. He lives in Las Vegas.
- Dr. Kristin Dean is listed for pediatrics at Doctor on Demand¹⁸ and lives and is licensed in California¹⁹ (License Number: 118149), but she has no license to practice in Oregon.

Two-way interactive video conferencing is not the same thing as a face-to-face appointment. Urgent care sometimes requires follow-up. And sometimes urgent becomes emergent care. No physician unlicensed in Oregon should be able to regularly care for a patient residing in Oregon. Out-of-state practitioners should be connected to brick and mortar practices here.

In summary, legalizing video teleconferencing in Oregon would be reckless without meeting privacy and safety standards of face-to face healthcare.

¹⁷https://techmedweb.omb.state.or.us/Clients/ORMB/Public/VerificationDetails.aspx?EntityID=1476978

http://www.doctorondemand.com/kristen-dean

¹⁹ https://www.breeze.ca.gov/datamart/searchLicTypeByName.do?direct=true