



The ACLU of Oregon Urges a No Vote on SB 626 A-Eng.

- **SB 626 will once again increase the risk of unauthorized access to the private medical records of tens of thousands of Oregonians who have done nothing wrong.** Prescription information often indicates the underlying medical condition which the drug is designed to address. Two major health care companies, Anthem and Premera, recently disclosed database breaches that are believed to have compromised the private information of as many as 90 million Americans.


The Oregon PDMP database now contains records of more than 23 million prescriptions and the total number of individuals who have real-time access to the system is approaching 10,000. Every time the Legislature increases the number of individuals who have access – from more locations – the more likely this system will be breached or used inappropriately.

- **SB 626 would give local public health officers unbridled access to the statewide PDMP database disclosing the identities of thousands of individual patients, practitioners and pharmacists:** The ACLU strongly opposes providing statewide individual patient identifying information to local public health officers. We can think of no legitimate interest that local public health officers would have to get such private information about individuals with whom they have no health care relationship. Local public health officers are currently authorized to receive de-identified data for any purpose related to the program. This provision of SB 626 goes way beyond what local health officers should be able to access.
- **SB 626 would implement an automatic notification system to practitioners and pharmacists that does not yet exist:** The ACLU opposes this provision unless a pilot program now in development can be shown to be effective. Unless implemented carefully, this program will likely lead to both over-reporting and under-reporting of potentially dangerous drug interactions. If not dependable, such a program would be counter-productive. There is no adequate substitute for health care providers reviewing their patient's entire health care history.

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From the Desk of
Senator Chip Shields