

THINC, Inc.

Taconic Health Information Network and Community

*Privacy and Consumer Affairs Committee Meeting
July 30, 2009 11:00AM-12:00Noon*

A meeting of the Privacy and Consumer Committee of the THINC, Inc, a New York not-for-profit corporation (the "Corporation"), was held on July 30, 2009.

Committee Members Present:

Arthur Levin, Committee Chair, Lucy Pitaro, Harriet Fritz, Paul Kaye, MD

Non-Committee Members Present:

A. John Blair, III MD, Dianne Koval, Helen Pfister, Allison Laquidara, Susan Stuard

I. APPROVAL OF JUNE 2009 MEETING MINUTES

Due to the lack of committee members, the June 2009 meeting minutes will be formally approved at the August 2009 meeting.

II. DISCUSSION OF PATIENT CONSENT POLICY

The THINC consent policy was presented to the committee in draft form for comment and discussion. The purpose of the consent policy is to protect patients' protected health information (PHI) during the access of and/or exchange of PHI via the THINC health information exchange. THINC commits to allow patients to have control over how and when their protected health information may be shared.

The committee discussed the challenge of keeping an up to date list of data suppliers at each participating organization. THINC will maintain a list of the data suppliers who will be on the exchange and post this list on the THINC website. Patients will be provided with the THINC website and/or contact information.

The committee felt the term "sharing of patient's PHI" should be changed to "accessing of patients PHI". In addition, Helen Pfister clarified for the committee that "insurance coverage reviews" refers to the provider's ability to verify eligibility and does not enable payer access to PHI. Susan Stuard reminded the committee that at this time THINC is not planning on allowing payers access to the exchange. THINC is not anticipating level 2 uses of patient information, however, a definition of level 2 activities was included in the policy in the event it becomes an avenue THINC would like to explore in the future.

The majority of the activity on the exchange will fall under the one to one exchange exception to consent. Examples of these one to one exchange activities include public health reporting, converting data and de-identified data. The committee discussed the "break the glass" functionality. The "break the glass" functionality would allow the practioner the ability to access the exchange in an emergent situation without patient consent. The practioner's access would be terminated upon completion of the emergency treatment. The following conditions will need to be met in order for the practioner to initiate the "break the glass" function 1) in the practioner's opinion an emergency condition exists and the patient is in need of immediate medical attention, 2) by reasonable judgment the practioner determines

that the information, possibly available in the exchange is material in the emergency treatment 3) a denial of consent does not exist between the patient and the organization with which the practioner is affiliated with 4) the practioner confirms that the previous conditions have been fulfilled. THINC will maintain a record of the access. In addition, the committee noted that sensitive patient information will not be excluded in a "break the glass" scenario, technically the exchange does not have the ability to filter such information.

The committee also felt that a cover page on the consent form would be useful, describing in lay terms the purpose of the policy and the health information exchange.

Susan Stuard will make the suggested changes to the THINC consent policy and will distribute to the members of the committee for the Thursday, August 27, 2009 committee meeting. There being no further topic for discussion the meeting was adjourned at 12:09 pm.