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21st Century Cures Act: Considerations for working with survivors of intimate partner violence
Ley Cures del Siglo XXI: Consideraciones para trabajar con sobrevivientes de la violencia de pareja

INFORMACIÓN DE ACCESO

Esta presentación contará con interpretación simultánea inglés/español.

LANGUAGE ACCESS

This presentation will have simultaneous English/Spanish Interpretation.

FUTURES WITHOUT VIOLENCE

Servicio de interpretación por Zoom

Using Zoom Interpretation Function

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Servicio de interpretación por Zoom

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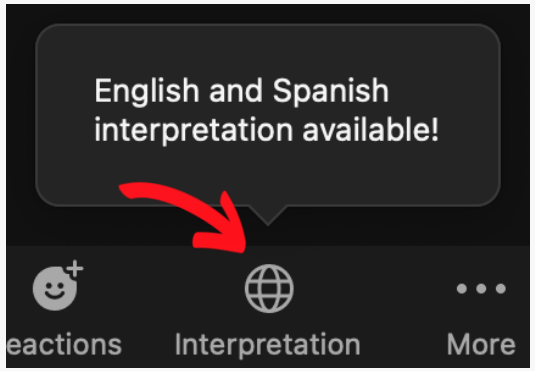
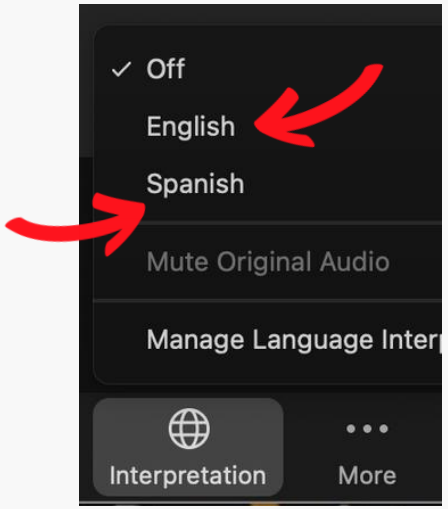
- También, si desea, seleccione “Mute original audio (Silenciar audio original)”.





Using Zoom Interpretation Function

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- Click the globe and select“English”.

The National Health Resource Center on Domestic Violence and the
National Health Collaborative on Violence and Abuse present:

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June 23rd 10-11:30am PT

23 de junio de 2021 10:00 AM hora del Pacífico

FUTURES WITHOUT VIOLENCE

Survivors, Privacy, and Health Data

- **Survivors will have questions about how their health data is collected and shared**
- **Important to address potential scenarios regarding survivors of domestic violence**
- **Adhering to privacy principles is critical**

Scenarios of Concern for Survivors

Common examples:

- **Unauthorized providers could check the survivor's record to see if abuse was disclosed.**
- **In small towns, where the hospital or the pharmacy is a primary employer, it may be possible to access to a survivors record.**
- **A survivor may want assurances that the information will be controlled.**

Questions About Health Data

Survivors will have questions about how their health data is being used:

- **What is written in my Electronic Health Record (EHR) about my experiences of violence?**
- **What control do I have over my health information and what are my rights as a patient and as a survivor?**
- **Who has access to my electronic medical record and health data?**
- **What will happen if my partner finds out that I have been talking to my provider about the violence?**
- **How will I be treated differently if other people on my care team know that I am surviving violence?**

Privacy and Confidentiality Considerations

Robust, informed patient consent about sharing of healthcare data

- Patient control over how health data is shared and with whom
- Transparency over who has access to health data and when
- Sensitive information de-identified whenever possible
- Awareness of information shared on plan/billing documents

How does the Cures Act change the game?

The Cures Act does not override other health information privacy laws (Health Insurance Portability and Accountability Act **- HIPAA):**

- **If access is not permitted, the new rules would not allow it**
- **These risks are present with any use of electronic information**
- **Access is not made any wider than what HIPAA permits**

Health providers must help patients be aware of the limits of confidentiality and adhere to privacy principles

Patient Access and Notice

Patients must be informed about:

- **What is being documented**
- **How it is being documented**
- **Why it is being documented**
- **Circumstances under which the information could be shared**
- **Who will have access to this information**

De-Identified Information

- Health information should be de-identified
- When personally identifiable information may be shared or exchanged, patients should give written authorization to share the data
- Patients should be ablet or restrict the use or disclosure of personally identifiable information beyond certain core functions

Patient Communication

- Communications should be sent *per patient preference* (e.g., phone, email)
- No mention of domestic violence verbally or inwriting should be made when communicating with providers
- Develop and adhere to best practices for coding to ensure no disclosure of domestic violence

Privacy Consent Follow Data

- All privacy and signed consents should follow the data
- If a survivors health information is shared, the consents should automatically follow it

Health providers' discretion to withhold information

- Health providers should have broad discretion to limit information exchange when disclosure could harm patient
- They should implement a system safeguard that protect sensitive information
- This is consistent with the new "exemptions" to the Cures Act rules

Discussion