

**Testimony before the Human Services Committee
March 17, 2011
Support for HB 1147**

Good afternoon, Representative Tercyak, Senator Musto, and members of the Human Services Committee. My name is Alicia Woodsby, and I am the Public Policy Director for the National Alliance on Mental Illness, or NAMI-CT. We are the largest member organization in the state of people with mental health disorders and their families.

NAMI-CT is in support of HB 1147, An Act Concerning Patient Consent for the Exchange of Electronic Health Information. HB 1147 will protect patient privacy by requiring a patient to **opt-in** to the exchange of electronic health records. This bill will help to protect patients' sensitive health information, which will increase the likelihood of success for our state's health information exchange.

People with mental illnesses have the right to privacy. Protecting privacy and confidentiality of individually identifiable health information is critical to reducing barriers that keep many people from accessing mental health treatment. Many people in desperate need of services already avoid seeking treatment for fear of discrimination and stigma. A current proposal by a state task force planning committee recommends an **opt-out** privacy policy that will default every state resident into the system unless they affirmatively ask to be taken out. This is problematic because certain sensitive health information cannot be shared without affirmative patient consent under state law.

Mental health information is among the types of sensitive health care information protected in state law. If the recommendation of the task force moves forward, then providers would be required to delete any references to those conditions and would have to take liability for making sure it happens. This process will likely prove to be infeasible, in which case the task force may seek to remove these state protections.

This bill will ensure continued safeguards for patient confidentiality to prevent inappropriate access to psychiatric information and drug and alcohol information. Informed consent by consumers/patients must be obtained for any use or disclosure of individually identifiable health information which pertains to them, and there must be strong and effective remedies for violations of these protections. Lack of initial informed consent should not exempt providers and managed care organizations from providing emergency care, urgent care or medically necessary care to persons living with mental illnesses.

Furthermore, NAMI-CT strongly recommends the involvement of consumers and family members as partners in the development of policy and decisions regarding the use of data for electronic health information systems or any other use of health care information.

In all cases, the exchange of such information must be treated confidentially and protected. The sharing of clinical information or refusal to consent to sharing of clinical information cannot be used to deny treatment, adversely affect services, or otherwise discriminate against persons with severe mental illnesses.

With the advent of electronic medical record systems, there is great opportunity to improve efficiency, patient safety, and overall care. However, strong privacy protections will be essential to the integrity of the system.

Thank you for your time. I am happy to answer any questions that you have.