

TESTIMONY OF CONNECTICUT HOSPITAL ASSOCIATION SUBMITTED TO THE GENERAL LAW COMMITTEE Tuesday, February 25, 2020

SB 134, An Act Concerning Consumer Privacy

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 134, An Act Concerning Consumer Privacy**.

Before commenting on this bill, it is important to point out that Connecticut hospitals and health systems provide high quality care for everyone, regardless of their ability to pay, and work to improve the health of those who live in our communities. Supporting Connecticut's hospitals strengthens our healthcare system and our economy.

CHA opposes the bill for two reasons.

First, as many other industry associations have voiced, we believe there will be widespread unintended consequences to implementing a set of prohibitions this broad. Before undertaking these measures, we urge the Committee to conduct an assessment to recognize how the bill will negatively impact businesses in Connecticut, both businesses that rely on data service providers, and the providers themselves. At a minimum, it would be prudent to learn from what happens in California as their similar bill becomes effective over this next year.

Second, SB 134 does not provide the necessary exclusions for the healthcare industry, and would interfere with HIPAA regulated entities' routine and appropriate use of healthcare data. There would be a significant chilling effect on access to vital technology and analytics service providers that support the healthcare industry, which are essential to various shared goals, including improving quality and patient safety, analyzing social determinants of health, advancing population health, addressing healthcare costs, and designing new payment models.

If the bill moves forward, it should not apply to any data or any entity that uses those data if the entity is already subject to HIPAA regulations. All activities that are governed by HIPAA should be exempt from the bill. The exclusion, as written, is insufficient because it only discusses "covered entities," which would only cover some HIPAA regulated activities. The exclusion is more narrow than the California model on which the bill is based. The exclusion should be much broader. We urge you to replace lines 684-692 to read as follows: The provisions of sections 1 to 18, inclusive, of this Act shall not apply to:

(A) Protected health information that is collected by a covered entity or business associate governed by the privacy, security, and breach notification rules issued by the United States Department of Health and Human Services, 45 CFR Parts 160 and 164, established pursuant to the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191).

(B) A covered entity or a business associate governed by the privacy, security, and breach notification rules issued by the United States Department of Health and Human Services, 45 CFR Parts 160 and 164, established pursuant to the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191).

(C) As used in this section, business associate, covered entity, and protected health information shall have the same meaning as in 45 CFR 160.103.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.