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OREGON STATE SENATE

Senator Burdick Testimony in favor of HB 2758 Senate Health Care Committee May 18, 2015

Good afternoon, Chair Monnes Anderson and members of the committee. For the record, my name is Ginny Burdick and I represent Senate District 18, which encompasses the city of Tigard and parts of Southwest Portland. I am here today as a proud chief sponsor of House Bill 2758, which will protect patient privacy in insurance communications.

Confidentiality plays a fundamental role in ensuring that everyone has access to healthcare services. HB 2758 seeks to close one of the last remaining loopholes in patient privacy by allowing patients to have insurance communications sent directly to the member receiving services, even if they are not the primary insurance policy holder. Currently, insurance companies send out an Explanation of Benefits (EOBs) to the primary policy holder after a doctor's visit. This statement can include sensitive visit details and information that the patient might, for many reasons, want to keep private.

The issue of patient confidentiality is not new, but with the dramatic expansion of health insurance under the Affordable Care Act, individuals can stay on their parents' insurance until the age of 26. More than 3 million young adults up to age 26 gained coverage on their parents' plan as a result of the ACA. In total, about 15 million young adults ages 19 to 25 are enrolled on their parents' plan, and more than 4 in 10 women ages 19 to 25 are covered on their parents' plan.

You can imagine why this is a major concern. Consider these scenarios:

- A 24-year-old man goes to the doctor to get screened for sexually transmitted diseases, but is fearful his parents may receive notification about this private visit.
- A 22-year-old college student is suffering from depression or an eating disorder, and she would like to address the underlying issues with a therapist. It may put her in a compromised position with her family if they receive notification of these visits.

We do not want Oregonians who need medical care foregoing that care because they are worried about who might find out about their doctor visit. Without clear confidentiality protections, individuals may be unwilling to share information about the context or causes of conditions with their healthcare provider, which could result in incorrect diagnoses and missed opportunities for prevention.



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This lack of confidentiality can also endanger domestic violence survivors, who may be unaware that the policyholder will be informed that they've sought services. For example, the EOB will often contain information that can be used to locate a survivor.

There is a lot of misinformation and confusion about HB 2758, so I want to clarify the intent of this bill.

Here is what it will do:

- It closes a loophole where patient confidentiality and privacy is currently being breached.
- It strengthens confidentiality and protections for Oregonians as they access their health care.
- It works against the problem of Oregonians foregoing health care for fear of someone learning their confidential information.

Here is what it doesn't do:

- HB 2758 does not impact minor consent statutes in Oregon. Insurance communications are sent *after* a medical visit has already taken place. HB 2758 affects only those insurance communications that follow a visit and therefore has no impact on what services can be provided to minors.
- Oregon law is explicit about age of consent for medical services for minors. The services minors can consent to are defined in statute and include dental health (ORS 109.640), mental health (ORS 109.675) and others. These have been carefully considered by the medical community and the Legislature to ensure that minors do not face unnecessary barriers to their health care and that parents and guardians have the information they need to best care for their sons and daughters.
- HB 2758 does not cut parents out of supportive decision making with their children. Often, discretion is left to the medical provider for when to bring in a guardian to a minor's care. For example, ORS 109.680 regarding mental health specifies a variety of indictors for when it is necessary for a provider to share medical information, one of them being simply if it is in the minor's best interest.
- Medical providers are responsible for knowing what services minors can and cannot receive without parental consent. A patient will not be able to receive any service without parental consent for which they are not of age.

I urge you to join me in supporting House Bill 2758.