Overview

- Importance of confidentiality
- Exigencies of payment
- Who is affected, and potential for harm
- Possible approaches
Longstanding Moral Commitment

- Hippocratic oath
- President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research
- AMA Code of Medical Ethics
- HIPAA
Exigencies of Payment

- Patient consent for provider payment
- State EOB requirements
  - Prevent fraud and abuse
  - Disclosure to policyholder with potential financial exposure
Who’s Affected

➢ Populations currently affected
  – Minor dependents
  – Young adults covered on parents’ policies
  – Women

➢ Potential impact of health care reform
  – More insured → more dependents
  – Increased age for dependent coverage
Potential for Harm: Individuals

- Substance Abuse
- Mental Health
- Domestic Violence
- Reproductive Health Care
  - Sexually transmitted infections
  - Pregnancy-related care
  - Abortion
  - Contraception
Potential for Harm: Providers and Public Programs

- Private providers unable to obtain reimbursement
- Drain on scarce public resources
Potential Approaches
Potential Approaches

- Medicaid
- Health Insurance Portability and Accountability Act (HIPAA)
- Limited financial exposure for policyholders
- State protections specific to reproductive or other sensitive health services
Lessons from Medicaid

Of 42 state Medicaid programs studied by the National Alliance to Advance Adolescent Health:

- 24 exclude information on family planning from EOBs
- 12 exclude information on sexually transmitted infections from EOBs
Protections Afforded under HIPAA

- Individuals may request special confidentiality protections
  - Spouse
  - Minor lawfully obtaining care on his/her own

- Plans must agree if
  - Reasonable request
  - Disclosure would endanger patient
If a claim for primary medical care or services obtained under this chapter [by a “minor without support”] is filed with a managed care plan or health insurance plan under which a minor without support is enrolled, and the minor does not want the plan to disclose information regarding the claim to a spouse, parent, custodian, or guardian, the minor, or the licensed health care practitioner…shall so notify the plan prior to submitting the claim. The plan may require that the request for confidential communication be made in writing and that it contain a statement that disclosure of all or part of the information to which the request pertains could endanger the minor. The plan shall have fourteen days to make any changes necessary to comply with the request for confidentiality.

Limited Financial Exposure for Policyholders

Wisconsin Insurance Commission:
EOBs not required “if the insured has no liability for payment or is liable only for a copayment.”

CIGNA website:
Enrollees “will receive an EOB…only when you owe money beyond your normal copayment.”
State Protections Specific to Reproductive Health Services

Notwithstanding any insurance law requiring the disclosure of information, a licensee shall not disclose nonpublic personal health information concerning health services related to reproductive health, sexually transmitted diseases, chemical dependency and mental health, including mailing appointment notices, calling the home to confirm appointments, or mailing a bill or explanation of benefits to a policyholder or certificate holder, if the individual who is the subject of the information makes a written request.

Potential Next Steps

- Definition of “endanger” under HIPAA
- Coding to designate sensitive services where confidentiality is needed
- Limit policyholders’ financial exposure
- Expand state confidentiality protections
For more information, visit www.guttmacher.org