## Patient Name Privacy in TEFCA

We applaud the use of modern NIST identification and assurance requirements in TEFCA. NIST Identification and Assurance standards now contain reasonable provisions for pseudonymity.

TEFCA needs to approve patient pseudonymity in digital communications end points. Name privacy is a critical right for patients, and several technologies such as Direct Protocol Addresses were originally designed to enable pseudonymity for patients.

Multiple HIE efforts have created policies that forbid the use of ANY certificate that is not fully identified. This forces patients to choose between participating in health information exchange or protecting their privacy.

Given that future interoperability efforts will use standards and methods that are unpredictable, it is impossible to make specific policy recommendations to protect pseudonymity for patients. As a result TEFCA must take an approach that is generalized and future-proof. Otherwise individual HIEs will require that other HIEs limit pseudonymity for patients in order to communicate with them. One HIE who does not support pseudonymity for patients will result in all HIEs restricting pseudonymity for patients. TEFCA must ensure that this does not happen.

Pseudonymity for patients is supported by the law (HIPAA and others) in a limited fashion. TEFCA should explicitly state that HIE policies which restrict pseudonymity options for patients beyond those legal limitations should not be allowed. State laws that further restrict pseudonymity for patients must not be applied to HIEs outside those states. Otherwise the most restrictive state law will become national policy based on peer-to-peer agreements or even merely "best practices".

TEFCA must be explicit and definitive in its support for pseudonymity for patients. If it is not 100% clear, it will be watered down by implementers, who frequently have the expectation that patients must be identified with the same rigour as providers on the network. This position misunderstands both the capability of the underlying technologies, the risks involved and the purpose of the communication network.

Regards, Fred Trotter fred@careset.com Healthcare Data Journalist CareSet Systems