

**NOTICE OF FEDERAL REQUEST
FOR PUBLIC COMMENT**

Deadline: January 15, 2002

**Citizens' Council on Health Care
1954 University Ave. W., Ste. 8
St. Paul, MN 55104**

**Medicare Beneficiary Database: New Comprehensive
Centralized Database on Senior Citizens**

Questions To Consider:

- 1) Should the Medicare administration be able to place the personal data of Medicare recipients into the largest centralized health care database in the nation without patient consent?
- 2) Should Medicare-eligible recipients who choose not to enroll in Medicare be forced to be entered onto the new Medicare database without their consent?
- 3) Should personal individually-identifiable Medicare patient data be available to public and private entities without patient consent for eleven "routine uses" ? (list below)
- 4) Should any individual or organization with what the agency deems is a "justified business need" be granted access to the medical and mental health data of the nation's senior citizens?
- 5) Should access to private health data be granted only to investigate suspected cases of fraud, or to "prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud or abuse in such programs"?
- 6) Should patient data on the database be used only for Medicare enrollment and payment purposes, or should government officials be allowed to access patient data to assess, evaluate and monitor the effectiveness, quality and cost of the nation's health care services?
- 7) Should public officials be able to grant individual and group researchers access to identifiable patient data without permission from patients or an Institutional Review Board (process established by federal government to approve research projects and review risks to patients)?
- 8) Should the federal government be allowed to archive and access patient data for research after the death of the Medicare recipient?
- 9) Should new types of data collection be added to the database without public comment?
- 10) Should genetic information and DNA tests or samples be included on the database, and if so, should it be granted specific protection from access?
- 11) Will the Medicare database be used to profile and track patients, monitor physician prescribing and treatment behavior, and ration health care services?

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Document to Reference:

FR Doc. 01-3005 – Privacy Act of
1974; System of Records

Eleven "Routine Uses" of Medicare Database Records and Patient Data,*
Including Categories, Users or Purposes

No Patient Consent Required Prior to Disclosure

- 1) Agency contractors of the Centers for Medicare and Medicaid Services (CMS) to maintain the Medicare Beneficiary Database.
- 2) Other state and federal agencies, including the IRS, for various reasons including application of tax penalties against employers, administration of federal health benefits programs, assistance with Medicaid, and to determine cost, effectiveness and quality of care.
- 3) Providers and suppliers of Medicare services to verify entitlement status of recipients.
- 4) Third-party contacts for recipients who cannot read or write, do not understand English, or are incompetent to make their own decisions.
- 5) Peer Review Organizations for review of claims, establishing and maintaining Medicare entitlement, implementing quality improvement programs, and assisting States with monitoring and enforcement efforts related to fraud and Medicare program integrity.
- 6) Employers, group health plans, HMOs, self-insurers, managed care organizations, multiple employer trusts, supplemental insurers, third-party administrators (enrollment data only).
- 7) Individuals or organizations doing research, evaluation, disease prevention projects, or health care payment, health restoration or maintenance projects.
- 8) Member of Congress with a letter of request from a constituent.
- 9) Courts, adjudicatory bodies, the U.S. Department of Justice or the U.S. Department of Health and Human Services, if involved or have interest in any health care litigation.
- 10) CMS contractors to "prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud or abuse in such programs."
- 11) Other federal or state agencies to "prevent, deter, discover, detect, investigate, examine, prosecute, sue with respect to, defend against, correct, remedy, or otherwise combat fraud or abuse in such programs."

* **Data in initial rollout of database includes, but is not limited to:** Medicare health insurance claim number, Social Security number, sex, race/ethnicity, date of birth, geographical location, Medicare enrollment and entitlement information, Medicare Secondary Payer data for appropriate Medicare claim payment, decision to have hospice care, decision to join HMO, HMO enrollment, End Stage Renal Disease entitlement, historic and current list of home residences, Medicaid eligibility and Managed Care institutional status. Diagnoses and health data to be added later.