



*****NEWS RELEASE*****

For Immediate Release
October 21, 2019

CONTACT:

Richard Larkin McLay, Communications Manager, media@cchffreedom.org, 651.350.9713

Unique Patient Identifier is a Patient Privacy Nightmare

*Three Bills in Congress Could Be Used to Unconstitutionally
Establish a National Patient ID*

ST. PAUL, Minn.—[*Citizens' Council for Health Freedom \(CCHF\)*](#) throws its full support behind efforts, like U.S. Sen. Rand Paul's latest [proposed legislation](#), that prevent the development and creation of a Unique Patient Identifier (UPI), also known as a National Patient ID.

If a UPI existed in *Lord of the Rings'* Middle-earth, "One *Number* to rule them all" would have been the central plot element in J. R. R. Tolkien's trilogy.

For 20 years, the creation of this federal number has been banned. This new number would be used to:

- Track patients
- Create a lifelong, fully linked, cradle-to-grave medical record
- Establish a national medical-records system
- Conduct research without patient consent (as permitted by the permissive HIPAA data-sharing rule)
- Issue an ID card that would be required for patient access to medical care (i.e. "No card, no care")

Although Congress has a long track record of opposing national identity systems, including the UPI, CCHF has identified **three pieces of legislation** that UPI proponents may use to try to develop and impose a National Patient ID:

1. Most notably, the Labor-HHS appropriations bill passed by the U.S. House strikes the longstanding, 20-year prohibition on the use of federal funds to create a UPI originally put in place by former Congressman Ron Paul. Thus far, the Senate has maintained the longstanding ban in its proposed appropriations bill.

2. The Senate's surprise billing legislation (S.1895) includes the creation of a national all-payer claims database (APCD), which could be used as a backdoor to develop a UPI. It requires the submission of patient medical claims data from across the country in a uniform fashion. One provision states the patient data would be deidentified "while retaining the ability to link data longitudinally."
3. A Homeland Security bill (H.R. 3525) recently passed by the House, includes funding to create an electronic health record (EHR) system: "accessed by all departmental components operating along the borders." Such a system would likely need to establish a unique identifier system to register patients who are undocumented.

CCHF says imposing a National Patient ID number on all Americans would violate 4th Amendment protections against search and seizure of "persons, houses, papers and effects."

"Aside from the many privacy concerns, a national patient ID is simply unconstitutional. It's a violation of individual rights," Brase added. "Congress must not be swayed by health and data industry claims that a UPI would improve patient care and safety. For these corporations, the drive to convince Congress to unconstitutionally impose a National Patient ID on all Americans is primarily about getting easy access to all the data in everyone's private medical records. Data has become the 21st century version of gold."

CCHF maintains a patient-centered, privacy-focused, free-market perspective. CCHF has worked in its home state of Minnesota and at the national level for more than 20 years to protect health care choices, individualized patient care, and medical and genetic privacy rights. In 2016, CCHF launched The Wedge of Health Freedom, an online directory of direct-pay-only practices. Find more information at JointheWedge.com

Twila Brase, RN, PHN was recently selected as one of 18 leaders to participate in the U.S. Department of Health and Human Services (HHS) Quality Summit, co-chaired by Deputy Secretary Eric Hargan. The Summit will be used to provide President Trump with a roadmap for restructuring quality measurement programs by the end of 2019. She is the author of the award-winning book, "[***Big Brother in the Exam Room: The Dangerous Truth About Electronic Health Records***](#)," which includes an entire section on HIPAA.

###