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CONTACT:

Deborah Hamilton, Hamilton Strategies, 215.815.7716, 610.584.1096, [DHamilton@HamiltonStrategies.com](mailto:DHamilton@HamiltonStrategies.com)

## ‘Recommendations Become Requirements’

*Citizens’ Council for Health Freedom’s Twila Brase Says New Bill Will Give Feds Even More Control over Health Care*

**ST. PAUL, Minn.**—A new bill has been introduced in the U.S. House of Representatives that will give the government even more control over Americans’ private data and medical decisions.

H.R. 5214 currently sits in the House Health Subcommittee and would require the Secretary of Health and Human Services (HHS)—Sylvia Mathews Burwell, who was sworn in this summer—to provide “recommendations for the development and use of clinical data registries for the improvement of patient care” and post those recommendations on the agency’s web site.

Twila Brase, president and co-founder of *Citizens’ Council for Health Freedom (CCHF, [www.cchfreedom.org](http://www.cchfreedom.org))*, a Minnesota-based national organization dedicated to preserving patient-centered health care and protecting patient and privacy rights, says the “recommendations” made by the Secretary will eventually become requirements and affect both the data sharing and the quality of care for patients.

***“We suspect that the Congressional Budget Office recently released details on this bill because they expect that it will pass in the House of Representatives,” Brase said. “The language of the bill makes Americans think that these ‘recommendations’ from the HHS Secretary will be beneficial to them, but in actuality, this is how medical practice will be standardized and controlled. ‘Recommendations’ will turn into ‘requirements,’ and doctors, nurses and patients will slowly but surely lose even more control over care.”***

According to the bill, the Secretary must, no later than one year after passage, “make recommendations for the development and use, when appropriate, of clinical data registries that are integrated with clinical practice guidelines and best practices or standards of care, including registries designed to minimize duplication and burden on those operating or reporting to such registries, for the improvement of patient care.”

These specific recommendations include standards that would allow for the “bidirectional, interoperable exchange of information between the electronic health records of the reporting clinicians and such registries.” This “standard” means broad sharing of patients’ private medical data entered

electronically into their health records, Brase said, then shared among numerous data registries accessible by countless agencies, organizations and government employees.

***“Government-imposed EHRs are dangerous to patients’ health,” Brase said. “This administration is building a national health information exchange for all medical data and a federal health insurance exchange for all insurance and financial data. In violation of patient rights, these ‘recommendations’ will further the government’s goal to use the patients’ data to build treatment protocols that limit patient access to care and to bring all patient data under one very insecure and very leaky umbrella.”***

Brase notes that the Patient-Centered Outcomes Research Institute is transferring data on 26-30 million patient medical records into a federal registry without patient consent for purposes the individuals did not authorize. She also reported in a recent weekly **CCHF** e-newsletter that criminal attacks on health care data have increased by 100 percent in just four years. Most were a result of human error, and of the breaches, 78 percent took months to discover and 84 percent were discovered by outsiders. In 2013 alone, about 200 data breaches exposed more than 7 million patient records.

Other recommendations in the bill surround outcomes-based registries to “evaluate various care models and methods, including improved clinical care coordination,” as well as suggest how the registries should be structured to facilitate the recording and reporting of data to monitor the safety and efficacy of FDA-approved devices and drugs.

*Celebrating its 20<sup>th</sup> year, **Citizens’ Council for Health Freedom** is a patient-centered national health freedom organization based in St. Paul, Minn. **CCHF** exists to protect health care choices and patient privacy. **CCHF** sponsors the daily, 60-second radio feature, *Health Freedom Minute*, which airs on more than 150 stations nationwide on the American Family Radio Network and 90-plus stations on the Bott Radio Network. Listeners can learn more about the agenda behind proposed health care initiatives and steps they can take to protect their health care choices, rights and privacy.*

***CCHF** president and co-founder Twila Brase, R.N., has been called one of the “100 Most Powerful People in Health Care” and one of “Minnesota’s 100 Most Influential Health Care Leaders.” Brase, a public health nurse, has been interviewed by CNN, Fox News, Minnesota Public Radio, NBC Nightly News, NBC’s Today Show, NPR, New York Public Radio, the Associated Press, Modern Healthcare, TIME, The Wall Street Journal, The Washington Post and The Washington Times, among others. She is at the forefront of informing the public of crucial health issues, such as intrusive wellness and prevention initiatives in Obamacare, patient privacy, informed consent, the dangers of “evidence-based medicine” and the implications of state and federal health care reform.*

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**For more information or to interview Twila Brase, president and co-founder of *Citizens’ Council for Health Freedom*, contact Deborah Hamilton, Hamilton Strategies, 215.815.7716, 610.584.1096, [DHamilton@HamiltonStrategies.com](mailto:DHamilton@HamiltonStrategies.com).**