

August 20, 2014

California Office of Health Information Integrity (CalOHII)
1600 9th Street, Room 460
Sacramento, CA 95814
Submitted electronically to ohi@ohi.ca.gov

RE: Authorization Tool

Dear Ms. Lane:

Consumers Union, the policy and advocacy division of Consumer Reports, appreciates the opportunity to provide input on CalOHII's Patient Authorization Guidance Tools. As consumer advocates, we are particularly concerned with protecting patient privacy and securing their data. Although we value having these Tools available as an educational handout or training tool for stakeholders, we are concerned with the usability of the documents as currently prepared and see room for improvement in how the information is organized and presented.

These Tools consolidate a lot of information into only a few pages. We agree that materials like these should be packaged as succinctly as possible to reach the largest audience. However, to maximize their impact they must be logically ordered. We suggest that CalOHII re-organize these materials based on content, who are the likely users, and the frequency with which users will be faced with each scenario. For example on the *Lanterman Petris Short (LPS) Act Guidance Tool*, in the "Disclose to whom?" column, it is more likely a probation officer will seek information than a coroner. Similarly, the scenario of "As needed for the protection of federal and state elective constitutional officers and their families" is far less likely to occur than "In facility communications between professionals providing services or referrals".

In addition to revising the organization of these Tools, we suggest redesigning them so the graphic design enhances rather than distracts. For example, in both the *Mental Health/Behavioral Health* and the *Substance Abuse Treatment Records* Tools, the header "Key questions to pose before you disclose" is graphically separated from either "Substance Abuse Treatment Records" or "Mental / Behavioral Health Treatment Records" creating a fragmented and confusing presentation. In addition, the use of vertical headings may make sense from a design standpoint, but the flow for the reader feels discordant and requires extra attention to decipher the meaning.

As consumer advocates, we welcome tools such as these, which organize important information related to patient privacy into usable educational and training materials. Before finalizing these materials and distributing them, however, we encourage CalOHII to take a step back and review these documents from the point of view of their readership. In doing so, we think CalOHII will see opportunities for improvement in organization and graphic design that will take these Tools to the next level.

Sincerely,



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