

My name is Fred Buhr and I live at 6112 Exchange Street in McFarland, Wisconsin. I am president and CEO of Metasteward LLC. My company deals with data governance and the semantic infrastructure of the Internet. My business is concerned with the potential for pieces of information (particularly health data) about persons or businesses being networked in such a way as to present serious security vulnerabilities for individuals or businesses.

In December 2007, the National Committee on Vital and Health Statistics (NCVHS) called for a transformation to enhanced protections for all uses of health data, by all users, independent of HIPAA covered entity status. NCVHS proposed that all organizations and individuals with access to personal health data follow attributes of appropriate data stewardship.

In addition to being a president and CEO of a company, I am a volunteer data entry operator for the McFarland Senior Outreach Program which is one of the focal points for the Dane County Area Agency on Aging (AAA). From the standpoint of an individual, being served by a focal point agency, it is easy to see the difference in the treatment and management of personal health data by HIPAA conforming entities and treatment and management of the same data by Older American Act entities. I have attached two forms illustrating the differences.

The first form is titled, "CRITERIA FOR HIGH RISK OF NURSING HOME ADMISSION" and follows Department of Health Services (DHS) standards and state laws for forms. The statutory authorization (for the questions on the form) is clearly stated and the consequences of failing to complete and submit the form are clearly defined.

The second form titled, "DETERMINE YOUR NUTRITIONAL HEALTH" is a Dane County form mandated by the DHS Bureau of Aging and Disability Resources (BADR) and, in stark contrast to the first form, does not follow DHS standards nor state law. The statutory authorization is not stated and the consequences of failing to complete the form are not clearly defined. Furthermore, it appears to be a proprietary form of the Nutrition Screening Initiative and in other contexts, I have seen a note indicating that the materials are used with permission of the Nutrition Screening Initiative. The statement at the bottom of the form indicating that, "The information you are being asked to provide is needed to determine if you are eligible to receive Older Americans Act Services and to comply with federal reporting requirements," is not true and is, in fact, a lie.

As you consider the information system for a multiple legal entities under various governance options for Family Care, please choose as system that treats personal health information as if it were covered by HIPAA. The difference in systems is easily seen by comparing treatment of health related information in the Medicaid Management Information System (MMIS) and the treatment of similar information in the Social Assistance Management System (SAMS). In both systems social security numbers are being replaced as identifiers but, in the case of SAMS, users will have the option of retaining SSN's in Excel workbooks, at their discretion. Medicaid would never permit this but there is a difference in the millions of dollars for the Medicaid system and the \$25,000 a year that BADR pays for the SAMS system. The real cost of the SAMS system must be measured in the price paid by the citizens of Wisconsin (and else where) for compromising their privacy and health information in all the systems that do conform to HIPAA standards.

Thank you.