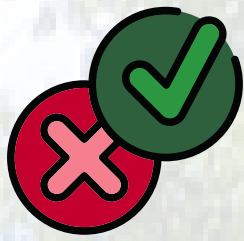


# CONSENT EQUITY STRATEGY

## OVERALL VISION & PURPOSE

In support of the goals outlined in the [2021 Colorado Health IT Roadmap](#), the Office of eHealth Innovation (OeHI) will develop a digital patient portal for consent management. To ensure that this consent solution is useful for all, we will be **intentionally building equity into design**. We want to empower patients to understand and direct how their health data is used.



The overarching goal is to have a digital solution for patients to view and modify which health providers can access their health records.

## MEET OUR USER PERSONAS & THEIR NEEDS

### PEOPLE WHO RECENTLY IMMIGRATED TO THE U.S. AND THEIR FAMILIES



#### ADRIAN

Recently moved to the U.S. with his husband and is learning English. Has multiple chronic health conditions.

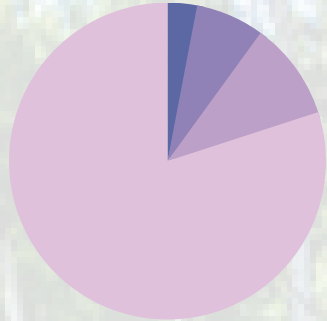
### PEOPLE WITH BEHAVIORAL HEALTH CONCERNS AND/OR SUBSTANCE USE DISORDER (SUD)



#### VANESSA

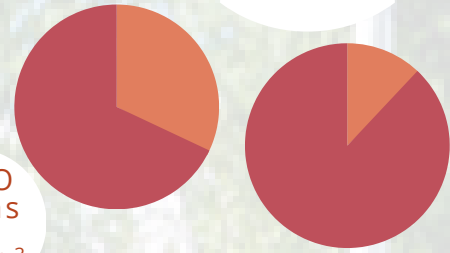
Recently lost her job and has been diagnosed with depression and SUD. She has also started going to a food bank.

## POPULATION



About 20% of people in Colorado are immigrants or the children of immigrants.<sup>2</sup>

1/3 of adults in CO reported symptoms of anxiety or depression in 2021.<sup>3</sup>



From 2017-2018, 12% of adults in CO reported a substance use disorder.<sup>4</sup>

## INJUSTICES

Discrimination  
Racism  
Xenophobia  
Medical Mistreatment

People have multiple identities that impact their experiences.

Stigma  
Differential Treatment  
Social Isolation

## PRIVACY & TRUST

I don't want my health information to be shared with the government or to impact my immigration case.

There are many concerns about protecting sensitive data and making sure it is not shared with any unwanted groups.

I don't want my other doctors, potential employers, or the foodbank to know about my SUD. I don't mind if my other health data is shared with other doctors.

## DIGITAL ACCESS

I have Internet access at home, but it is very slow and frustrating to use. I prefer my phone over a laptop. My doctors never told me about a portal.

Black & Hispanic patients are **less likely to be offered portal access** by their providers.<sup>5</sup>

Since I lost my job, I have not been able to pay my Internet bills. I share a laptop with my roommate when I **have** to use a computer.

## DIGITAL LITERACY

I'd say I am relatively tech savvy, but my husband is not at all. I handle most of the technology-related things in our home.

Lack of digital literacy is a huge barrier to telehealth services in Colorado, which could also impact consent portal usage.<sup>6</sup>

I've never used technology much, and I am just not that interested in it. I don't like the security risks that come with it.

## LEGAL PROTECTIONS

Our digital consent solution needs to be compliant with both **HIPAA** and **42 CFR Part 2** protections, as well as other various state and federal protections.

## PATIENT PORTAL EQUITY RECOMMENDATIONS

- Clearly stated information on:
  - Why, when, and with whom data is shared, who is profiting, etc.
  - Individual rights
  - Risks and benefits of data sharing
  - No repercussions if consent is not provided or revoked
- Web, mobile, and paper versions
- Multiple languages
- No confusing language
- Granularity (what data can be seen by who)
- Automatic portal enrollment
- Self assessment at the end
- Ability to modify choices later

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