

# THE FUTURES OF eHEALTH Social, legal and ethical challenges Panel "eHealth and the Law: Comparative Perspectives"

### **eHEALTH LEGAL CHALLENGES IN RUSSIA**

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## About the speaker





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### Issues in focus

- eHealth market in Russia
- ☐ Public eHealth in Russia: Moscow experience
- ☐ New Federal Law on Telemedicine 2017
- ☐ Health Information Systems: Development of Legal Framework
- □ Data Protection Law: Challenges for eHealth



### eHealth market in Russia



# **У Яндекс** Здоровье

telemedicine consultations



telemedicine consultations



electronic appointments, telemedicine consultations



electronic profiles, access to the results of analysis

#### **Facts:**

1 billion rubles in 2017, 3 billion rubles in 2018

>1 million telemedicine users in 2018, sustainable growth

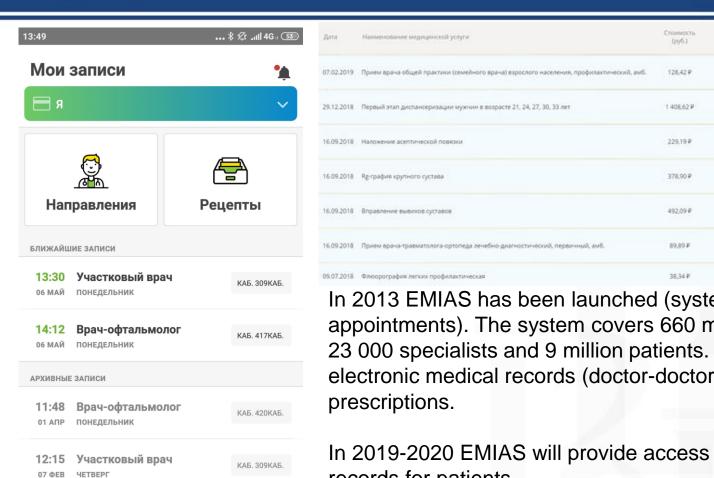
About 80 % of users from regions (not from large cities)

People like it – 70 % of telemedicine consultations are repeated use

https://vc.ru/future/39963-chto-mozhet-telemedicina-v-rossii-v-2018-godu https://rg.ru/2018/09/09/populiarnost-telemediciny-v-rossii-rastet-skazhdvm-dnem.html



## Public eHealth in Russia: Moscow experience



Экспертиза 0 DKE N 17 проводилась FR N 212 0 In 2013 EMIAS has been launched (system for electronic appointments). The system covers 660 medical organizations, 23 000 specialists and 9 million patients. It also provides tools for electronic medical records (doctor-doctor), electronic

Медициносия

организация

FIT N 212

TTI N 212

DKE N 17

TK5 N 17

**FKEN 17** 

100%

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In 2019-2020 EMIAS will provide access to personal health records for patients.

Transparent medical insurance system (all paid medical services are available for monitoring)



## New Federal Law on Telemedicine 2017 (1)

2016 - Governmental strategy "eHealth" (one of the key issues – adoption of legislative framework for telemedicine)

2017 – Amendments to the Federal Law "On the basics of healthcare in the Russian Federation" (2011) – the so-called "Telemedicine Law"

"telemedicine technologies - information technologies that provide

- remote interaction of medical specialists with each other, with patients (and/or their legal representatives),
- identification and authentication of these persons,
- documentation of their actions during consultations and consiliums,
- > distant health monitoring" (p. 22 Art. 2)



# New Federal Law on Telemedicine 2017 (2)

### The law permits

- ☐ issue medical reports, certificates, prescriptions in electronic form
- give consent on medical intervention in electronic form
- provide online consultations
- distant health monitoring

### The law does not permit

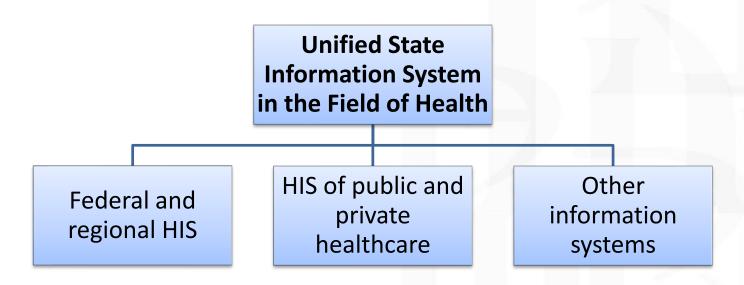
Diagnose, prescribe treatment and set distant health monitoring WITHOUT PRIOR FACE-TO-FACE VISIT



# Health Information Systems (HIS): Development of Legal Framework

### The purposes of legal framework for HIS in eHealth:

- ☐ integration and interoperability of HIS
- ☐ mobility and dynamism of data processed in HIS
- □ expand applicability of information systems
- □ ensure the patient`s right to access and manage health records





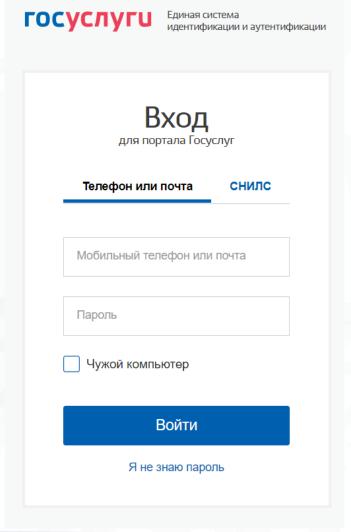
### Identification/Authentication of Doctors and Patients

For identification/authentication of patients the Unified System of Identification and Authentication (ESIA) is used. This governmental system was organized to provide electronic public services. Private entities also can connect to this system.

### Challenges:

- Right to anonymity?
- ➤ Alternative platforms for identification?

Access of doctors to health records, documentation of all actions during telemedicine sessions, etc. - by means of the **qualified e-signature**.





## Data Protection Law: Challenges for eHealth

# Consent of the data subject

For health data processing Russian legislation requires written consent with a range of information to specify in it (in GDPR – just expressed consent)

# Processing for research purposes

To process health data for research purposes also written consent needed (regardless to depersonalization of the data).

In the Russian legislation there is no differentiation between anonymized and pseudonymized data

# Personal data and medical secrets

There are 2 parallel legal regimes cover health data. There is **no boarder line** in legislation that coordinates between these regimes.

**Duplication of requirements** and
additional obstacles
for eHealth



### Conclusions

- ✓ Legislative framework for health data exchange adopted in Russia.
- ✓ Telemedicine services (consultations and consiliums, issuing documents in electronic form, distant health monitoring) are legalized.

### **Current challenges:**

- Actual legal framework has more focus on doctor-doctor interaction. The need to enforce doctor-patient interaction
- Patients still do not have easy access to personal health records
- Is it possible to legalize initial diagnosis and treatment without face-to-face visit?
- Should we ensure the right to anonymous telemedicine session? Identification only through governmental system excludes anonymity.
- > The need for adaptation personal data law to eHealth.
- Debureaucratization of requirements to the consent
- Facilitating research with health data (secondary usage)
- Eliminate collisions between personal data law and medical secrets law
- Other challenges (licensing, medical insurance, etc.)





# Thank you for attention!

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