

Chairman Phil Mendelson
at the request of the Attorney General

A BILL

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

To require regulated entities that collect consumer health data to have a consumer health data privacy policy containing specific information about its collection, use and sharing of consumer health data and post it on the home page of their website, to prohibit regulated entities from contracting with processors, affiliates, or third parties to process consumer health data in a manner inconsistent with the policy, to require regulated entities to obtain consumer consent before collecting consumer health data after providing the consumer with requests for consent containing specified information, to limit a regulated entity's collection and sharing of consumer health data to the purposes contained in the consumer's consent, to establish a consumer's right to obtain information about consumer health information collected and shared, to withdraw consent for collection and sharing, and to obtain deletion of information collected and shared, to require a valid consumer authorization before consumer health data may be sold, to prohibit the establishment of geofences around places where health services are delivered under specified circumstances, to make violations of this act unfair and deceptive trade practices, and to exclude certain types of data collection and data sharing from the operation of the act.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the "Consumer Health Information Privacy Protection Act of 2024".

Sec. 2. Definitions

For the purposes of this act, the term:

(1) "Abortion" means the termination of a pregnancy for purposes other than producing a live birth.

41 (2) “Affiliate” means a legal entity that shares common branding with another legal entity
42 and controls, is controlled by, or is under common control with another legal entity. For purposes
43 of this definition, “control” or “controlled” means:

44 (A) Ownership of, or the power to vote, more than 50 percent of the outstanding
45 shares of any class of voting security of a company;

46 (B) Control in any manner over the election of a majority of the directors or of
47 individuals exercising similar functions; or

48 (C) The power to exercise controlling influence over the management of a
49 company.

50 (3) “Authenticate” means to use reasonable means to determine that a request to exercise
51 any of the rights afforded in this act is being made by, or on behalf of, the consumer who is
52 entitled to exercise such consumer rights with respect to the consumer health data at issue.

53 (4) “Biometric data” means data that is generated from the measurement or technological
54 processing of an individual’s physiological, biological, or behavioral characteristics and that
55 identifies a consumer, whether individually or in combination with other data. Biometric data
56 includes:

57 (A) Imagery of the iris, retina, fingerprint, face, hand, palm, vein patterns, and
58 voice recordings, from which an identifier template can be extracted; and

59 (B) Keystroke patterns or rhythms and gait patterns or rhythms that contain
60 identifying information.

61 (5) “Clear and conspicuous” means a disclosure that is easily noticeable and easily
62 understandable by the consumer and does not contain any statements that are inconsistent with,
63 or in mitigation of any other statements or disclosures provided by the regulated entity.

64 “Clear and conspicuous” requires the information to be reasonably accessible to
65 consumers with disabilities, taking into account industry standards for online disclosures.

66 (6) “Collect” means to buy, rent, access, retain, receive, acquire, infer, derive, or
67 otherwise process consumer health data in any manner.

68 (7) “Consent” means a clear affirmative act that signifies a consumer’s freely given,
69 specific, informed, opt-in, voluntary, and unambiguous agreement, following a clear and
70 conspicuous disclosure to the individual, which shall consist of written consent or consent
71 provided by electronic means. For the purposes of this act “consent” shall not include:

72 (A) A consumer’s acceptance of a general or broad terms-of-use agreement or a
73 similar document that contains descriptions of personal data processing along with other
74 unrelated information;

75 (B) A consumer’s hovering over, muting, pausing, or closing a given piece of
76 electronic content; or

77 (C) A consumer’s agreement obtained through the use of deceptive designs.

78 (8) “Consumer” means a natural person acting in an individual or household capacity,
79 however identified, including by any unique identifier, who is a District of Columbia (“District”)
80 resident or whose consumer health data is collected in the District. “Consumer” does not include
81 an individual acting in the course of their employment.

82 (9) “Consumer health data” means personal information that is linked or can reasonably
83 be linked to a consumer and that identifies the consumer’s past, present, or future physical or
84 mental health status. “Consumer health data” does not include personal information that is used
85 to engage in public or peer-reviewed scientific, historical, or statistical research in the public
86 interest that adheres to all other applicable ethics and privacy laws and is approved, monitored,

87 and governed by an institutional review board, human subjects research ethics review board, or a
88 similar independent oversight entity that determines that the regulated entity or the small
89 business has implemented reasonable safeguards to mitigate privacy risks associated with
90 research, including any risks associated with reidentification.

91 (10) “Deceptive design” means a user interface designed or manipulated with the effect
92 of subverting or impairing user autonomy, decision making, or choice. “Any practice that the
93 Federal Trade Commission refers to as a “dark pattern” is presumed a deceptive design.

94 (11) “Deidentified data” means data that cannot reasonably be used to infer information
95 about, or otherwise be linked to, an identified or identifiable consumer, or a device linked to such
96 a consumer. “Deidentified data” includes consumer health data in the possession of a regulated
97 entity where the regulated entity:

98 (A) Takes reasonable measures to ensure that such data cannot be associated with
99 a consumer;

100 (B) Publicly commits to maintain and process the data in a deidentified fashion
101 and to not attempt to reidentify the data, except that the regulated entity may attempt to
102 reidentify the information solely for the purpose of determining whether its deidentification
103 processes satisfy the requirements of this paragraph; and

104 (C) Contractually obligates any recipients of such data to maintain the data in a
105 deidentified fashion.

106 (12) “Gender-affirming care information” means personal information relating to seeking
107 or obtaining past, present, or future gender-affirming care services. “Gender-affirming care
108 information” includes:

109 (A) Precise location information that could reasonably indicate a consumer’s
110 attempt to acquire or receive gender-affirming care services;

111 (B) Efforts to research or obtain gender-affirming care services; or

112 (C) Any information related to seeking or obtaining past, present, or future
113 gender-affirming care services that is derived, extrapolated, or inferred, including from non-
114 health information, such as proxy, derivative, inferred, emergent, or algorithmic data.

115 (13) “Gender-affirming care services” means health services or products that support and
116 affirm an individual’s gender identity, including social, psychological, behavioral, cosmetic,
117 medical, or surgical interventions. “Gender-affirming care services” includes treatments for
118 gender dysphoria, gender-affirming hormone therapy, and gender-affirming surgical procedures.

119 (14) “Genetic data” or “genetic information” means any data, regardless of its format,
120 that concerns a consumer’s genetic characteristics. “Genetic data” or “genetic information”
121 includes:

122 (A) Raw sequence data that result from the sequencing of a consumer's complete
123 extracted deoxyribonucleic acid (“DNA”) or a portion of the extracted DNA;

124 (B) Genotypic and phenotypic information that results from analyzing the raw
125 sequence data; and

126 (C) Self-reported health data that a consumer submits to a regulated entity and
127 that is analyzed in connection with consumer's raw sequence data.

128 (15) “Geofence” means technology that uses global positioning coordinates, cell tower
129 connectivity, cellular data, radio frequency identification, Wi-fi data, or any other form of spatial
130 or location detection to establish a virtual boundary around a specific physical location, or to

131 locate a consumer within a virtual boundary. For purposes of this definition, “geofence” means a
132 virtual boundary that is 2,000 feet or less from the perimeter of the physical location.

133 (16) “Health care services” means any service provided to a person to assess, measure,
134 improve, or learn about a person's mental or physical health, including:

135 (A) Individual health conditions, status, diseases, or diagnoses;

136 (B) Social, psychological, behavioral, and medical interventions;

137 (C) Health-related surgeries or procedures;

138 (D) Use or purchase of medication;

139 (E) Bodily functions, vital signs, symptoms, or measurements of the information
140 described in this paragraph;

141 (F) Diagnoses or diagnostic testing, treatment, or medication;

142 (G) Reproductive health care services; or

143 (H) Gender-affirming care services.

144 (17) “Homepage” means the introductory page of an internet website and any internet
145 webpage where personal information is collected. In the case of an online service, such as a
146 mobile application, homepage means the application's platform page or download page, and a
147 link within the application, such as from the application configuration, “about,” “information,” or
148 settings page.

149 (18) “Person” means an individual, firm, corporation, partnership, cooperative,
150 association, or any other organization, legal entity, or group of individuals however organized,
151 including agents thereof. The term “person” includes a regulated entity, third party, affiliate, or
152 processor. The term “person or entity” shall not include the government of the United States, the

153 District of Columbia government, or any of the agencies or instrumentalities of either
154 government.

155 (19) “Personal information” means information that identifies or is reasonably capable of
156 being associated or linked, directly or indirectly, to a particular consumer. “Personal
157 information” includes data associated with a persistent unique identifier, such as a cookie ID, an
158 IP address, a device identifier, an advertising ID, or any other form of persistent unique
159 identifier. “Personal information” does not include publicly available information or deidentified
160 data.

161 (20) “Physical or mental health status” includes:

162 (A) Individual health conditions, treatment, diseases, or diagnoses;

163 (B) Social, psychological, behavioral, and medical interventions;

164 (C) Health-related surgeries or procedures;

165 (D) Use or purchase of prescribed medications;

166 (E) Bodily functions, vital signs, symptoms, or measurements of the information

167 described in this paragraph;

168 (F) Diagnoses or diagnostic testing, treatment, or medication;

169 (G) Gender-affirming care information;

170 (H) Reproductive or sexual health information;

171 (I) Biometric data;

172 (J) Genetic data;

173 (K) Precise location information that could reasonably indicate a consumer's

174 attempt to acquire or receive health services or supplies;

175 (L) Data that identifies a consumer seeking health care services; or

176 (M) Any information that a regulated entity, or their processor, processes to
177 associate or identify a consumer with the data described in this paragraph that is derived or
178 extrapolated from non-health information (such as proxy, derivative, inferred, or emergent data
179 by any means, including algorithms or machine learning).

180 (21) “Precise location information” means information derived from technology and that
181 is used or intended to be used to locate a consumer within a radius of 1,750 feet.

182 (22) “Process” or “processing” means any operation or set of operations performed on
183 consumer health data.

184 (23) “Processor” means a person that processes consumer health data on behalf of a
185 regulated entity.

186 (24) “Publicly available information” means information about a consumer that a
187 regulated entity has reasonable cause to believe the consumer has lawfully made available to the
188 general public through federal, state, or municipal government records or widely distributed
189 media. “Publicly available information” does not include any biometric data collected about a
190 consumer by a business without the consumer’s consent.

191 (25) “Regulated entity” means any legal entity, including its agents, that conducts
192 business in the District or produces or provides products or services that are targeted to
193 consumers in the District and that alone or jointly with others, determines the purpose and means
194 of collecting, processing, sharing, or selling consumer health data. “Regulated entity” does not
195 include government agencies, tribal nations, or contracted service providers when processing
196 consumer health data on behalf of a government agency.

197 (26) “Reproductive or sexual health information” means personal information relating to
198 seeking or obtaining past, present, or future reproductive or sexual health services.

199 “Reproductive or sexual health information” includes:

200 (A) Precise location information that could reasonably indicate a consumer's
201 attempt to acquire or receive reproductive or sexual health services;

202 (B) Efforts to research or obtain reproductive or sexual health services; or

203 (C) Any reproductive or sexual health information that is derived, extrapolated, or
204 inferred, including from non-health information (such as proxy, derivative, inferred, emergent, or
205 algorithmic data).

206 (27) “Reproductive or sexual health services” means health services or products that
207 support or relate to a consumer's reproductive system or sexual well-being including:

208 (A) Individual health conditions, status, diseases, or diagnoses;

209 (B) Social, psychological, behavioral, and medical interventions;

210 (C) Health-related surgeries or procedures including abortions;

211 (D) Use or purchase of medication including medications for the purposes of
212 abortion;

213 (E) Bodily functions, vital signs, symptoms, or measurements of the information
214 described in this paragraph;

215 (F) Diagnoses or diagnostic testing, treatment, or medication; and

216 (G) Medical or nonmedical services related to and provided in conjunction with
217 an abortion, including associated diagnostics, counseling, supplies, and follow-up services.

218 (28) “Sell” or “sale” means the exchange of consumer health data for monetary or other
219 valuable consideration. “Sell” or “sale” does not include the exchange of consumer health data

220 for monetary or other valuable consideration to a third party as an asset that is part of a merger,
221 acquisition, bankruptcy, or other transaction in which the third party assumes control of all or
222 part of the regulated entity's assets and that complies with the requirements and obligations of a
223 regulated entity in this act.

224 (29) "Share" or "sharing" means to release, disclose, disseminate, divulge, make
225 available, provide access to, license, or otherwise communicate orally, in writing, or by
226 electronic or other means, consumer health data to a third party or affiliate. The term "share" or
227 "sharing" does not include:

228 (A) The disclosure of consumer health data by a regulated entity to a processor
229 when such sharing is to provide goods or services in a manner consistent with the purpose for
230 which the consumer health data was collected and is disclosed pursuant to a binding contract
231 between the regulated entity and the processor;

232 (B) The disclosure of consumer health data to a third party with whom the
233 consumer has a direct relationship when:

234 (i) The consumer has requested the disclosure for purpose of obtaining a
235 product or service from the third party;

236 (ii) The regulated entity maintains control and ownership of the data; and

237 (iii) The third party uses the consumer health data only at the direction of
238 the regulated entity and in a manner consistent with the purpose for which the consumer
239 provided the data and consented to its release; or

240 (C) The disclosure or transfer of personal data to a third party as an asset that is
241 part of a merger, acquisition, bankruptcy, or other transaction in which the third party assumes

242 control of all or part of the regulated entity's assets and complies with the requirements and
243 obligations of a regulated entity in this act.

244 (30) "Third party" means an entity other than a consumer, regulated entity, processor, or
245 affiliate of the regulated entity. "Third party" includes a person who purchases consumer health
246 data.

247 Sec. 3. (a) A regulated entity shall maintain a consumer health data privacy policy that
248 clearly and conspicuously discloses:

249 (1) The categories of consumer health data collected;

250 (2) The purposes for which the consumer health data is collected, including how
251 the data will be used;

252 (3) The categories of sources from which the consumer health data is collected;

253 (4) The categories of consumer health data that are shared;

254 (5) A list of the categories of third parties and the specific affiliates with whom
255 the regulated entity shares the consumer health data, whether actively or passively, and the
256 purposes for such sharing;

257 (6) The length of time the regulated entity intends to retain each category of
258 consumer health data, or if that is not possible, the criteria used to determine that period;
259 provided that a regulated entity shall not retain a consumer's consumer health data for each
260 disclosed purpose for which the personal information was collected for longer than is reasonably
261 necessary for that disclosed purpose; and

262 (7) How a consumer can exercise the rights provided in section 5 of this act.

263 (b) A regulated entity shall prominently publish a link to its consumer health data
264 privacy policy on its homepage.

265 (c) It is a violation of this act for a regulated entity to contract with a processor, affiliate,
266 or third party to process consumer health data in a manner or for a purpose that is inconsistent
267 with the regulated entity's consumer health data privacy policy.

268 Sec. 4. (a) A regulated entity shall not collect any consumer health data unless it first
269 obtains consent from the consumer for such collection for a specified purpose. The request for
270 consent shall clearly and conspicuously disclose:

271 (1) The categories of consumer health data collected;

272 (2) The purpose of the collection of the consumer health data, including the
273 specific ways in which it will be used;

274 (3) The length of time the regulated entity intends to retain each category of
275 consumer health data, or if that is not possible, the criteria used to determine that period provided
276 that a regulated entity shall not retain a consumer's consumer health data for each disclosed
277 purpose for which the personal information was collected for longer than is reasonably necessary
278 for that disclosed purpose; and

279 (4) How the consumer can withdraw consent from future collection of the
280 consumer's health data.

281 (b) A regulated entity shall not share any consumer health data unless it first obtains
282 consent from the consumer for such sharing for a specified purpose. This consent for sharing
283 shall be separate and distinct from the consent obtained to collect consumer health data. The
284 request for consent shall clearly and conspicuously disclose:

285 (1) The categories of consumer health data shared;

286 (2) The purpose of the sharing of the consumer health data, including the specific
287 ways in which it will be used;

288 (3) The categories of entities with whom the consumer health data is shared; and

289 (4) How the consumer can withdraw consent from future sharing of the
290 consumer's health data.

291 (d) A regulated entity shall not collect, use, or share additional categories of consumer
292 health data not disclosed in the consumer health data privacy policy without first disclosing the
293 additional categories and obtaining the consumer's consent prior to the collection, use, or sharing
294 of such consumer health data.

295 (e) A regulated entity shall not collect, use, or share consumer health data for additional
296 purposes not disclosed in the consumer health data privacy policy without first disclosing the
297 additional purposes and obtaining the consumer's consent prior to the collection, use, or sharing
298 of such consumer health data.

299 (f) A regulated entity's collection, use, retention, disclosure, and sharing of a consumer's
300 consumer health data shall be reasonably necessary and proportionate to achieve the purposes for
301 which the consumer health data was collected or processed, or for another disclosed purpose that
302 is compatible with the context in which the consumer health data was collected, and not further
303 processed in a manner that is incompatible with those purposes.

304 (g) A regulated entity that shares or otherwise discloses consumer health data with an
305 affiliate, processor, or third party shall enter into a binding contract with the affiliate, processor,
306 or third party that specifies how the processor, affiliate, or third party may receive, use, manage,
307 and store the consumer health data it receives from regulated entity and contractually obligates
308 the affiliate, processor, or third party to comply with the requirements and obligations in this act.

309 (h) It is a violation of this act for a regulated entity to contract with a processor to process
310 consumer health data in a manner or for a purpose that is inconsistent with the consent a
311 consumer has given for the collection, use, or sharing of data.

312 (i) A regulated entity shall not unlawfully discriminate against a consumer for exercising
313 any rights included in this act.

314 Sec. 5. (a) A consumer has the right to confirm whether a regulated entity is collecting,
315 sharing, or selling consumer health data concerning the consumer. The regulated entity shall
316 provide the consumer with access to such data as expeditiously as possible and without
317 unreasonable delay. This information shall include a list of all third parties and affiliates with
318 whom the regulated entity has shared or sold the consumer health data, and an active email
319 address or other online mechanism that the consumer may use to contact these third parties.

320 (b) A consumer has the right to withdraw consent from the regulated entity's collection
321 and sharing of consumer health data related to the consumer.

322 (c) A consumer has the right to have consumer health data related to the consumer
323 deleted from the database of the regulated entity and any other entity to which the regulated
324 entity has shared or sold the consumer health data. The consumer may exercise this right by
325 requesting the deletion pursuant to subsection (g) of this section.

326 (d) A regulated entity that receives a consumer's request to delete any consumer health
327 data concerning the consumer shall:

328 (1) Delete the consumer health data from its records, including all parts of the
329 regulated entity's network, including archived or backup systems; and

330 (2) Notify all affiliates, processors, and third parties with whom the regulated
331 entity has shared or sold consumer health data of the deletion request.

332 (e) Each affiliate, processor, and third party that receives notice of a consumer's deletion
333 request shall honor the consumer's deletion request and delete the consumer health data from its
334 records according to the same requirements applicable to a regulated entity.

335 (f) If consumer health data that a consumer requests to be deleted is stored on archived or
336 backup systems, the request for deletion may be delayed for up to 6 months from the
337 authentication of the deletion request to enable restoration of the archived or backup systems.

338 (g) A consumer may exercise the rights set forth in this section by submitting a request, at
339 any time, to a regulated entity. Such a request may be made by a secure and reliable means
340 established by the regulated entity and clearly and conspicuously described in its consumer
341 health data privacy policy. The method shall take into account the ways in which consumers
342 normally interact with the regulated entity, the need for secure and reliable communication of
343 such requests, and the ability of the regulated entity to authenticate the identity of the consumer
344 making the request. A regulated entity shall not require a consumer to create a new account to
345 exercise consumer rights under this section but may require a consumer to use an existing
346 account.

347 (h) If a regulated entity is unable to authenticate the request using commercially
348 reasonable efforts, the regulated entity is not required to comply with a deletion request under
349 this section and may request that the consumer provide additional information reasonably
350 necessary to authenticate the consumer and the consumer's request.

351 (i) The regulated entity shall provide information in response to a consumer request at
352 least twice during any 12-month period upon request of the consumer and without charge to the
353 consumer. If requests from a consumer are manifestly unfounded, excessive, or repetitive, the
354 regulated entity may charge the consumer a reasonable fee to cover the administrative costs of

355 complying with the request or decline to act on the request. The regulated entity shall bear the
356 burden of demonstrating the manifestly unfounded, excessive, or repetitive nature of the request.

357 (j) A regulated entity shall comply with a deletion request without undue delay, and in all
358 cases within 45 days of receipt of the request. A regulated entity shall promptly take steps to
359 authenticate a consumer request, but these steps shall not extend the regulated entity's duty to
360 comply with the consumer's request within 45 days of receipt. The regulated entity may extend
361 the response period once for 45 additional days when reasonably necessary, taking into account
362 the complexity and number of the consumer's requests, if the regulated entity informs the
363 consumer of any such extension within the initial 45-day response period, together with the
364 reason for the extension.

365 (k) A regulated entity shall establish a process for a consumer to appeal the regulated
366 entity's refusal to take action on a request within a reasonable period of time after the consumer's
367 receipt of the decision. The availability of the appeal process shall be clearly and conspicuously
368 included in the regulated entity's consumer health data privacy policy. Within 45 days of receipt
369 of an appeal, a regulated entity shall inform the consumer in writing of any action taken or not
370 taken in response to the appeal, including a written explanation of the reasons for the decisions.
371 If the appeal is denied, the regulated entity shall also provide the consumer with an online
372 mechanism, if available, or other method through which the consumer may contact the attorney
373 general to submit a complaint.

374 (l) If a regulated entity dissolves or terminates its operations, the regulated entity shall
375 delete all consumer health data from its records, including any archived or back-up systems and
376 provide each consumer whose data has been shared with or sold to a processor, affiliate, or third

377 party with a notice of how the consumer can contact the processors, affiliates, or third parties to
378 request deletion of their information.

379 Sec. 6. A regulated entity shall:

380 (a) Restrict access to consumer health data by the employees, affiliates, processors, and
381 third parties of such regulated entity to only those employees, affiliates, processors, and third
382 parties for which access is necessary to further the purposes for which the consumer provided
383 consent or where necessary to provide a product or service that the consumer to whom such
384 consumer health data relates has requested from such regulated entity; and

385 (b) Establish, implement, and maintain administrative, technical, and physical data
386 security practices that, at a minimum, satisfy reasonable standard of care within the regulated
387 entity's industry to protect the confidentiality, integrity, and accessibility of consumer health data
388 appropriate to the volume and nature of the consumer health data at issue.

389 Sec. 7. (a) A processor, affiliate, or third party may receive, use, or process consumer
390 health data only pursuant to a binding contract with the regulated entity that specifies how the
391 processor, affiliate, or third party may receive, use, manage, and store the consumer health data it
392 receives from regulated entity.

393 (b) A processor, affiliate, or third party shall not further share or sell consumer health
394 data it has received from a regulated entity with any other person or entity.

395 (c) A processor, affiliate, or third party shall assist the regulated entity by appropriate
396 technical and organizational measures, insofar as this is possible, in fulfilling the regulated
397 entity's obligations under this act.

398 (d) If a processor, affiliate or third party fails to adhere to the regulated entity's
399 contractual requirements or receives, uses, manages, or stores consumer health data in a manner

400 that is outside the scope of the contract with the regulated entity, the processor, affiliate, or third
401 party shall be considered a regulated entity with regard to such data and shall be subject to all the
402 requirements of this act.

403 Sec. 8. (a) It is unlawful for any person to sell or offer to sell consumer health data
404 related to a consumer without first obtaining valid authorization from the consumer. This
405 authorization shall be separate and distinct from the consent obtained to collect or share
406 consumer health data required under section 4 of this act.

407 (b) A valid authorization to sell consumer health data shall be a written or electronic
408 document consistent with this section. It shall be in plain language and contain the following:

409 (1) The specific consumer health data concerning the consumer that the person
410 intends to sell;

411 (2) The name and contact information of the person selling the consumer health
412 data;

413 (3) The name and contact information of the regulated entity that originally
414 collected the consumer health data;

415 (4) The name and contact information of the person purchasing the consumer
416 health data from the seller identified in paragraph (2) of this subsection;

417 (5) A description of the purpose for the sale, including how the consumer health
418 data will be gathered and how it will be used by the purchaser identified in paragraph (4) of this
419 subsection when sold;

420 (6) A statement that the provision of goods or services may not be conditioned on
421 the consumer signing the valid authorization;

422 (7) A statement that the consumer has a right to revoke the valid authorization at
423 any time and a description of how to submit a revocation;

424 (8) An expiration date for the valid authorization that is no later than one year
425 after the date the consumer signs the valid authorization; and

426 (9) The signature or e-signature of the consumer and date.

427 (c) An authorization shall be invalid if it contains any of the following defects:

428 (1) The expiration date has passed;

429 (2) The authorization does not contain all the information required under this
430 section;

431 (3) The consumer has revoked the authorization;

432 (4) The authorization has been combined with other documents to create a
433 compound authorization; or

434 (5) The provision of goods or services is conditioned on the consumer signing the
435 authorization.

436 (d) The seller shall obtain the valid authorization from the consumer and provide copies
437 to the consumer and the purchaser.

438 (e) The seller and purchaser of consumer health data shall retain a copy of all valid
439 authorizations for sale of consumer health data for 6 years from the date of the consumer's
440 signature or the date when it was last in effect, whichever is later.

441 (f) A person may sell consumer health data only pursuant to a binding contract between
442 the person selling the consumer health data and the person purchasing the consumer health data
443 that identifies the purpose and use of the consumer health data and contractually obligates the

444 person purchasing the consumer health data to comply with the applicable requirements and
445 obligations in this act.

446 (g) The person who purchases consumer health data shall only use, retain, and share a
447 consumer's health data in a manner compatible with purpose and use identified in a valid
448 authorization from a consumer.

449 Sec. 9. It is unlawful for any person to implement a geofence around an entity that
450 provides in-person health care services where the geofence is used to:

451 (a) Identify or track consumers seeking health care services;

452 (b) Collect consumer health data; or

453 (c) Send notifications, messages, or advertisements to consumers related to their
454 consumer health data or health care services.

455 Sec. 10. A violation of this act is an unfair and deceptive trade practice pursuant to D.C.
456 Official Code § 28-3904.

457 Sec. 11. (a) This chapter does not apply to:

458 (1) Information that meets the definition of:

459 (A) Health information protected under the federal Health Insurance
460 Portability and Accountability Act of 1996 ("HIPAA"), approved August 21, 1996 (Pub. L. 104-
461 191; 110 Stat. 1936), and related regulations;

462 (B) Patient identifying information collected, used, or disclosed in
463 accordance with 42 C.F.R. Part 2 and section 131 of the ADAMHA Reorganization Act,
464 approved July 10, 1992 (106 Stat. 368; 42 U.S.C. § 290dd-2);

465 (C) The following research-related information:

466 (i) Identifiable private information under the federal policy for the
467 protection of human subjects pursuant to 45 C.F.R. Part 46;

468 (ii) Identifiable private information that is otherwise information
469 collected as part of human subjects research pursuant to the good clinical practice guidelines
470 issued by the international council for harmonization;

471 (iii) Information made private for the protection of human subjects
472 under 21 C.F.R. Parts 50 and 56; or

473 (iv) Personal data used or shared in research conducted in
474 accordance with one or more of the requirements in this paragraph;

475 (D) Information or documents created for purposes of the federal Health
476 Care Quality Improvement Act of 1986, approved November 14, 1986 (100 Stat. 3784; 42
477 U.S.C. § 11101), and related regulations;

478 (E) Patient safety work product under 42 C.F.R. Part 3 and section 2 of the
479 Patient Safety and Quality Improvement Act of 2005, approved July 29, 2005 (119 Stat. 424; 42
480 U.S.C. §§ 299b-21 - 299b-26);

481 (F) Information that is deidentified in accordance with 45 C.F.R. Part 164,
482 and derived from any of the health care-related information listed in subsection (a)(1) of this
483 section;

484 (2) Information originating from, and intermingled to be indistinguishable with,
485 information under paragraph (1) of this subsection that is maintained by:

486 (A) A covered entity or business associate as defined by HIPAA and
487 related regulations;

488 (B) A program or a qualified service organization under 42 C.F.R. Part 2
489 and section 131 of the ADAMHA Reorganization Act, approved July 10, 1992 (106 Stat. 368: 42
490 U.S.C. § 290dd-2); and

491 (3) Information used only for public health activities and purposes as described in
492 45 C.F.R. §. 164.512 or that is part of a limited data set that is used, disclosed, and maintained in
493 the manner required by 45 C.F.R. § 164.514;

494 (b) Personal information that is governed by and collected, used, or disclosed pursuant to
495 the following regulations, parts, titles, or acts, is exempt from this chapter:

496 (1) The Gramm-Leach-Bliley Act, approved November 12, 1999 (113 Stat. 1338;
497 15 U.S.C. § 6801 *et seq.*) and implementing regulations;

498 (2) Part C of Title XI of the Social Security Act, approved August 21, 1996 (110
499 Stat. 1936; 42 U.S.C. § 1320d *et seq.*);

500 (3) The Fair Credit Reporting Act, approved May 29, 1968 (82 Stat. 146; 15
501 U.S.C. § 1681 *et seq.*);

502 (4) The Family Educational Rights and Privacy Act, approved August 21, 1974
503 (88 Stat. 57; (20 U.S.C. § 1232g) and 34 C.F.R. Part 99.

504 (c) The obligations imposed on regulated entities and processors under this act do not
505 restrict a regulated entity's or processor's ability to collect, use, or disclose consumer health data
506 to prevent, detect, protect against, or respond to security incidents, identity, theft, fraud,
507 harassment, malicious or deceptive activities, or any activity that is illegal under District or
508 federal law; preserve the integrity or security of systems; or investigate,
509 report, or prosecute those responsible for any such action that is illegal under District or federal
510 law.

511 (d) If a regulated entity or processor processes consumer health data pursuant to
512 subsection (c) of this section, such entity bears the burden of demonstrating that such processing
513 qualifies for the exemption and complies with the requirements of this section.

514 Sec. 12. D.C. Official Code § 28-3904 is amended as follows:

515 (a) Subsection (kk) is amended by striking the word “or” at the end.

516 (b) Subsection (ll) is amended by striking the period at the end and inserting the phrase “;
517 or” in its place.

518 (c) A new subsection (mm) is added to read as follows:

519 “(mm) violate any provision of the Consumer Health Information Privacy Protection Act
520 of 2024.”.

521 Sec. 13. Fiscal impact statement.

522 The Council adopts the fiscal impact statement in the committee report as the fiscal
523 impact statement required by section 4a of the General Legislative Procedures Act of 1975,
524 approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

525 Sec. 14. Effective date.

526 This act shall take effect following approval by the Mayor (or in the event of a veto by
527 the Mayor, action by the Council to override the veto), a 30-day period of congressional review
528 as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December
529 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of
530 Columbia Register.

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