



March 19, 2026

The Honorable Christina Henderson
Chairperson, Committee on Health
Council of the District of Columbia
The John A. Wilson Building,
1350 Pennsylvania Avenue, NW
Washington, DC 20004

RE: ATA ACTION COMMENTS REGARDING B26-0525

Dear Chairperson Henderson and members of the Committee on Health:

On behalf of the ATA Action, I am submitting the following comments regarding B26-0525. While this legislation is significantly better than health data privacy legislation introduced in many other states, our organization believes that a HIPAA exemption should be considered alongside a consistent, industry agnostic approach to consumer data privacy.

ATA Action is the affiliated policy and legislative advocacy arm of the American Telemedicine Association. ATA Action is the leading advocacy organization dedicated to advancing policy and accelerating the adoption of technology-enabled healthcare. Working collaboratively with federal and state legislators and policymakers, our organization drives industry momentum by influencing legislative and regulatory developments in telehealth, virtual care, remote patient monitoring, artificial intelligence in health, health data privacy, private sector healthcare investment, and more. We represent a diverse membership – including hospital systems, technology companies, professional associations, direct-to-consumer digital health providers, payers, pharmaceutical manufacturers, digital therapeutics developers, and remote monitoring organizations.

Telehealth is and will remain an important way Americans access the healthcare they need. As more providers come online – figuratively and literally – ATA Action urges increased vigilance by the healthcare community to ensure these practices meet standards for patient safety, data privacy, and information security. Indeed, patient privacy and the protection of patient data are prerequisites for connected care and core principles for our organization. State and federal regulatory schemes should allow for innovation and support the advancement of technology-assisted care; however, telehealth and virtual care platforms, systems, and devices should be required to mitigate cybersecurity risks and provide for patient safety and confidentiality.

In light of the advancement of privacy legislation in many states across the country to address such concerns, the American Telemedicine Association has published [Health Data Privacy Principles](#) to aid legislators in crafting legislation that supports both secure data practices and patient access to care. ATA Action hopes these policy principles are helpful in crafting forward-thinking privacy legislation in the District of Columbia.

ATA Action has concerns that certain elements of B26-0525 (“the Act”) run counter to sound data privacy policy and puts undue burdens on telehealth providers due to its complexity and undefined breadth. Specifically, ATA Action makes the following recommendations:

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Exempt HIPAA-covered entities from this Act: ATA Action believes the current HIPAA rules provide detailed and appropriate protection for the confidentiality of protected health information, as they have been a fixture in our healthcare system for more than two decades. Imposing additional, duplicative and potentially inconsistent regulation on HIPAA covered-entities would create unnecessary and inappropriate burdens and cost. ATA Action recommends B26-0525 be revised to clearly exempt HIPAA-covered entities and business associates from the provisions of this Act.

Legislators should seek uniform privacy laws consistent across states and industries: As states adopt privacy laws across the nation, efforts to establish uniformity with existing federal and other state standards would reduce both complexity and costs regarding compliance, as well as confusion for consumers. Unfortunately, B26-0525 is both specific only to healthcare data and creates uneven burdens on providers relative to federal laws (discussed below). Instead, ATA Action encourages legislators to take an approach similar to Virginia (see the Virginia Consumer Data Protection Act¹) and Connecticut (see the Connecticut Consumer Data Privacy and Online Monitoring Act²). As B26-0525 continues to work through the legislative process, we hope this Committee and the District Council will strive for uniformity with these existing state regulatory frameworks and avoid burdensome requirements that would be specific only to the District of Columbia.

Thank you for your support of telehealth. We encourage you and your colleagues to consider our amendments to B26-0525 to ensure easy and efficient access to high-quality health care services in the District of Columbia. Please do not hesitate to let us know how we can be helpful to your efforts to advance common-sense telemedicine policy. If you have any questions or would like to discuss the telemedicine industry's perspective further, please contact me at hyoung@ataaction.org.

Kind regards,

A handwritten signature in black ink that reads "Hunter Young". The signature is written in a cursive, flowing style.

Hunter Young
Head of State Government Relations
ATA Action

¹ Virginia Consumer Data Protection Act, VA Code Ann. § 59.1-575 *et seq.*,
<https://law.lis.virginia.gov/vacodefull/title59.1/chapter53/>.

² Connecticut Consumer Data Privacy and Online Monitoring Act, Conn. Gen. Stat. § 42-515 *et seq.*,
https://www.cga.ct.gov/current/pub/chap_743jj.htm.