

**Madison Brame**

From: Aly Warner <alywarner@protonmail.com>
Sent: Wednesday, August 26, 2026 3:36 PM
To: IRRC
Subject: Public Comment_Department of Health Regulation #10-242: Communicable and Noncommunicable Diseases, IRRC Number 3490

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To Whom It May Concern:

I am writing today as a resident of Pennsylvania to respectfully, but strongly oppose the proposed regulation changes in regard to IRRC# 3490, under PA Code 28, Chapter 27.

I do not agree with this proposed regulation for the following reasons:

1. I do not authorize nor want my private health information (PHI) automatically disclosed to the government nor outside of my control without my permission. My health information is my own and I control who has access to it. HIPAA already protects this information and I fear this proposed regulation will be weaponized against me, which would be unconstitutional.
2. According to the Fourth Amendment to the U.S. Constitution, no one may come into my private residence and unlawfully (without a warrant) search my home or seize my private property. This proposed regulation would allow state health workers to do just that without a warrant.
3. I do not consent for this type of entry into another location in the community and search of my child. Again, unconstitutional.
4. Under no circumstances will the state health workers have access to my child when I am not present nor without my consent.
5. I do not consent to you collecting my child's PHI for any purpose.
6. The statewide school mask mandate issued in September 2021 by Acting Pennsylvania Health Secretary Alison Beam was found in *Corman vs. Acting Secretary of the Pennsylvania Department of Health*, 266 A.3d 452 (Pa. 2021) to be invalid and unenforceable. There is 100% no way that I would allow me or my family to be subjected to a mask mandate again under any circumstances. You have to have learned by now that none of the guidance provided by Dr. Fauci and the former CDC director were baseless on their own admission.
7. Looking at the state's history of mishandling the covid/pandemic, there is no reality in which I would trust any PA state health official to make the best decision for me and my family.

Sincerely,
Aly Warner
Nazareth, PA

Summary of issues that the proposed regulation poses:

Privacy and Personal Health Data

- Expands the number of diseases, infections, and conditions reported to the state, increasing the amount of personal medical information entering government systems.

- Requires hospitals to send emergency-room data to the Department in near real time, including age or birth date, gender, race, ethnicity, ZIP code, reason for visit, diagnosis, and patient or visit identifier.
- Allows the Department to require additional emergency-room data elements it deems necessary, without listing every future category in the regulation.
- Requires vaccine reporting to the state immunization system unless the patient opts out in writing. Reports include name, date of birth, gender, address, race, and ethnicity.
- Creates or expands electronic registries for information such as birth defects, congenital anomalies, and certain newborn conditions.

Government Access to Medical Records

- Gives the Department or local health authority explicit access to patient medical records during disease investigations.
- Allows officials to request copies of records and requires providers to transmit them electronically in a secure manner acceptable to the health authority.
- Prohibits interference with the government's review of those records.
- Expands local health department authority to review and audit highly sensitive HIV-related medical records.
- HIV-related audits may involve records dating back to January 1, 2000.

Government Entry Into Homes and Private Property

- Allows state or local health authorities to enter an apartment, building, or other location when deemed necessary for an investigation.
- Separately permits entry into apartments and other locations for contact tracing and partner services.
- The proposed text requires officials to show documentation proving they are authorized representatives.
- The regulation itself does not state that a warrant or court order is required before entering a private residence.
- It also says a person may not obstruct or interfere with an investigation, creating questions about what happens when a resident refuses entry.
- Some authority to seek entry into a house already exists under current regulations, but the proposal reorganizes and broadens the language and expressly includes apartments, schools, colleges, and universities.

Parental Rights and Access to Children at School

- Requires schools to provide health officials reasonable and timely access to students for contact tracing or partner services.
- Requires schools to permit health officials to meet and speak with a student in private.
- The proposed regulation does not establish a general parental-notice requirement before such a private interview.
- It does not require a parent to be present.
- It does not establish a general parental-consent requirement before health officials speak privately with a student.

- School employees are prohibited from interfering with certain existing statutory rights of minors to consent to health services involving reportable diseases.

Contact Tracing and Personal Relationship Information

- Expands formal authority for contact tracing and partner services.
- Partner services include identifying and notifying sexual or needle-sharing partners and connecting individuals with services involving HIV care, STD treatment, reproductive health, prenatal care, substance-use treatment, mental-health services, housing assistance, and other services.
- Health officials may enter private locations as part of these activities.
- Schools must allow access to students for these purposes and must not interfere with those investigations.

Government Surveillance and Tracking

- Establishes mandatory near-real-time emergency-room surveillance statewide.
- Makes vaccine administration part of a statewide reporting system unless the patient submits a written opt-out.
- The Department states that immunization information will support surveillance and program operations.
- The proposal permits the Department to request additional reports from regulated entities when it considers them necessary to prevent or control disease.
- Taken together, these provisions increase the amount, frequency, and range of personal health information available to state and local public-health authorities.

Confidentiality and Sharing of Personal Information

- Reports are generally confidential and restricted to authorized Department or local health employees or agents with a legitimate purpose.
- Confidentiality is not absolute.
- Information may be disclosed when authorities determine disclosure is necessary to carry out the Disease Prevention and Control Law.
- The proposal expressly permits disclosure when health authorities determine it is necessary to inform the public about the risk of a communicable disease, subject to other applicable law.
- Information also may be released for approved research under confidentiality restrictions.

Expansion of Government Discretion

- The Department or local health authority may investigate cases, outbreaks, public-health emergencies, and unusual occurrences of disease.
- Disease-control measures may be used for surveillance, prevention, containment, or mitigation when authorities consider them appropriate and necessary to protect the public.
- The proposal removes existing language limiting investigations to matters specifically judged to be a potential threat to public health. The Department's position is that anything reportable under these provisions already represents such a threat.

- Several provisions rely on phrases such as "as necessary," "deemed necessary," "appropriate," and "other data elements deemed necessary by the Department." Those standards give health authorities significant administrative discretion.

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