
PARTNERSHIP TO AMEND 42 CFR PART 2

A COALITION OF 29 HEALTH CARE STAKEHOLDERS COMMITTED TO ALIGNING 42 CFR PART 2 (PART 2) WITH HIPAA TO ALLOW APPROPRIATE ACCESS TO PATIENT INFORMATION THAT IS ESSENTIAL FOR PROVIDING WHOLE-PERSON CARE.

May 3, 2017

The Honorable Chris Christie, Chair
White House Commission on Combatting Drug Addiction and the Opioid Crisis
P.O. Box 001
Trenton, NJ 08625

Dear Governor Christie:

On behalf of the Partnership to Amend 42 CFR Part 2 (Partnership), I am writing to underscore our commitment to helping the country end the opioid crisis and to offer our support to the White House Commission on Combating Drug Addiction and the Opioid Crisis (Commission) as you take steps to achieve that goal. Specifically, we believe additional changes to federal regulations governing the confidentiality of drug and alcohol treatment and prevention records, 42 CFR Part 2 (Part 2), will help to ensure persons with opioid use disorder receive the safe, effective care they need.

The Partnership is a coalition of 29 national health care organizations representing a range of stakeholders, including patients, clinicians, hospitals, biopharmaceutical companies, pharmacists, electronic health record (EHR) vendors, and insurance providers, committed to aligning Part 2 with the Health Insurance Portability and Accountability Act (HIPAA) to allow appropriate access to patient information that is essential for providing whole-person care. See attached position paper for more information and a full list of Partnership members.

Health care is constantly evolving, and our coalition members are able to use technology and data to improve care delivery and outcomes and reduce costs for the toughest chronic diseases, with the exception of substance use disorders. Part 2, a 1970s regulation, sets requirements limiting the use and disclosure of patients' substance use records from certain substance use treatment programs. This can prohibit payers from sharing this information with the health care providers who are on the front line caring for patients suffering from opioid and other substance use disorders. The outdated regulation severely constrains the health care community's efforts to coordinate care for persons with substance use disorders.

Recognizing the need to revise this outmoded law, the Substance Abuse and Mental Health Services Administration (SAMHSA) issued a final rule last year that would make minor improvements to Part 2. We believe those changes are a small step in the right direction toward integrating care (see attached comment letter), but more needs to be done to fully account for the new realities of and innovations in health care delivery today. Aligning Part 2 with HIPAA through a legislative fix or regulatory guidance via the Supplemental Notice of Proposed Rulemaking to the Part 2 final rule is necessary. We urge the Commission to work with Congress to further ensure that providers and organizations have all the information necessary for safe, effective, high quality treatment and care coordination that addresses all of a patient's health needs.

Our coalition of forward-thinking health care organizations is committed to improving care delivery and patient outcomes; but without the ability to share substance use disorder records, they are severely limited in their ability to help reduce the skyrocketing number of emergency room visits due to addictions. We hope your Commission will include Part 2 as a priority area. This SAMHSA regulation severely limits abilities of insurers, doctors, hospitals, pharmacists, electronic health record vendors, pharmaceutical companies, and others from assisting in the nation's efforts to eliminate heroin and prescription drug abuse.

The Partnership strongly supports the goals of the Commission and is committed to working with the Administration and Congress to help eradicate the heroin and prescription drug abuse consuming our country. A statutory change to Part 2 is necessary in order to effectively coordinate care and allocate services to those suffering from addictions. We would like to request a meeting with the Commission to discuss this issue in more detail; please contact me at klein@abhw.org or (202) 449-7658.

Sincerely,



Rebecca Murow Klein, Chair
Partnership to Amend 42 CFR Part 2

Attachment: Partnership to Amend 42 CFR Part 2

cc: Secretary Tom Price, U.S. Department of Health and Human Services
Acting Director Richard Baum, Office of National Drug Control Policy