
PARTNERSHIP TO AMEND 42 CFR PART 2

A COALITION OF OVER 40 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.

March 21, 2018

The Honorable Markwayne Mullin
United States House of Representatives
1113 Rayburn House Office Building
Washington, DC 20515

The Honorable Earl Blumenauer
United States House of Representatives
1111 Longworth House Office Building
Washington, DC 20515

Dear Representatives Mullin and Blumenauer:

The undersigned members of the Partnership to Amend 42 CFR Part 2 (Partnership) and additional stakeholder organizations applaud your leadership on the issue of substance use disorder privacy records and strongly support your bill, the Overdose Prevention and Patient Safety (OPPS) Act, H.R. 3545, to align 42 CFR Part 2 (Part 2) with the Health Insurance Portability and Accountability Act (HIPAA) for the purposes of health care treatment, payment, and operations (TPO). We appreciate the provision in your bill that strengthens protections against the use of substance use disorder records in criminal proceedings.

The Partnership is a coalition of over 40 health care stakeholder organizations committed to aligning Part 2 with HIPAA to allow appropriate access to patient information that is essential for providing whole-person care.

The federal regulations governing the confidentiality of drug and alcohol treatment and prevention records, Part 2, set requirements limiting the use and disclosure of patients' substance use records from certain substance use treatment programs. Obtaining multiple consents from the patient is challenging and creates barriers to whole-person, integrated approaches to care, which are part of our current health care framework. Part 2 regulations may lead to a doctor treating a patient and writing prescriptions for opioid pain medication for that individual without knowing the person has a substance use disorder. Separation of a patient's addiction record from the rest of that person's medical record creates several problems and hinders patients from receiving safe, effective, high quality substance use treatment and coordinated care.

We are pleased that your bill would align Part 2 with HIPAA's consent requirements for the purposes of TPO, which will allow for the appropriate sharing of substance use disorder records to ensure persons with opioid use disorder and other substance use disorders receive the integrated care they need. Additionally, as we do not want patients with substance use disorders to be made vulnerable as a result of seeking treatment for addiction, this legislation strengthens protections of their records.

As you know, the Substance Abuse and Mental Health Services Administration (SAMHSA) released final rules in 2017 and 2018 which take some steps to modernize Part 2, but do not go far enough. Legislative action is also necessary in order to modify Part 2 and bring substance use records into the 21st Century. We thank you for leading that effort and look forward to working with you to advance this important bipartisan legislation.

Sincerely,

Academy of Managed Care Pharmacy
American Association on Health and Disability

American Health Information Management Association
American Hospital Association
American Psychiatric Association
American Society of Addiction Medicine
American Society of Anesthesiologists
America's Essential Hospitals
America's Health Insurance Plans
AMGA
Association for Ambulatory Behavioral Healthcare
Association for Behavioral Health and Wellness
Association for Community Affiliated Plans
Blue Cross Blue Shield Association
The Catholic Health Association of the United States
Centerstone
Confidentiality Coalition
Employee Assistance Professionals Association
Global Alliance for Behavioral Health and Social Justice
Hazelden Betty Ford Foundation
Health IT Now
Healthcare Leadership Council
InfoMC
The Joint Commission
The Kennedy Forum
Mental Health America
National Alliance on Mental Illness
National Association of ACOs
National Association of Psychiatric Health Systems
National Association of State Mental Health Program Directors
Netsmart
Otsuka America Pharmaceutical, Inc.
Premier Healthcare Alliance
Smiths Medical

Additional Stakeholder Organizations

Adventist Health
Adventist Health System
Aetna
AnMed Health
Anthem
Ascension
Association of American Medical Colleges
Atlanticare
Atrius Health
Aurora Health
Avera Health
Banner Health
Baptist Healthcare System
Beacon Health Options
East Alabama Medical Center
First Health of the Carolinas
Greater New York Hospital Association
Henry Ford Health System

Johns Hopkins Health System
Lehigh Valley Health Network
LifeBridge Health
Marshfield Clinic
Mercy Health
Methodist Health System
Morehouse School of Medicine
Mosaic Life Care Medical Center
Mountain States Health Alliance
New Directions Behavioral Health
PerformCare
SSM Health
St. Joseph's/Candler
Summa Health
Trinity Health