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# PARTNERSHIP TO AMEND 42 CFR PART 2

*A COALITION OF NEARLY 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.*

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October 26, 2017

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

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

Dear Congressman Mullin and Congressman Blumenauer:

The Partnership to Amend 42 CFR Part 2 (Partnership) applauds your affirmation of support for the Overdose Prevention and Patient Safety (OPPS) Act, H.R. 3545. We also thank Congressman Mullin for becoming the lead republican sponsor of the legislation. We are grateful for your leadership on the issue of substance use disorder privacy records and strongly support your bill 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 especially 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 nearly 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, earlier this year, the Substance Abuse and Mental Health Services Administration (SAMHSA) released a final rule which takes some steps to modernize Part 2; but it does not go far enough. Legislative action is also necessary in order to modify Part 2 and bring substance use records into the 21<sup>st</sup> Century. We thank you for leading that effort and look forward to working with you to advance this important bipartisan legislation.

Sincerely,

*Rebecca Murow Klein*

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