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# PARTNERSHIP TO AMEND 42 CFR PART 2

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**FOR IMMEDIATE RELEASE**  
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## **SAMHSA Final Rule Well Intended, Falls Short** ***Coalition to urge Congress to take next steps***

**Washington, DC (January 13, 2017)** – The Partnership to Amend 42 CFR Part 2, a coalition of nearly 30 health care organizations committed to aligning the Substance Abuse and Mental Health Service Administration's (SAMHSA) final rule on Confidentiality of Alcohol and Drug Abuse Patient Records, 42 Code of Federal Regulations Part 2 (Part 2) with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) to allow appropriate access to patient information that is essential for providing whole-person care, issued the following statement in response to the Part 2 final rule.

The SAMHSA final rule takes helpful steps to modernize Part 2, but it does not go far enough. Now legislative action is necessary to bring the sharing of substance use records into the 21<sup>st</sup> century. Access to a patient's entire medical record, including addiction records (for example, if a person has been diagnosed with an opiate addiction), ensures that providers and organizations have all the information necessary to provide safe, effective, high quality treatment and care. We are reviewing and will comment on the Supplemental Notice of Proposed Rulemaking that proposes additional clarifications to Part 2 regulations that was concurrently released.

“While the final rule is a step in the right direction, it fails to adequately ensure that persons with substance use disorder receive the effective coordinated care they deserve. Particularly in light of our country's opioid crisis, it is imperative that Part 2 requirements are aligned fully with the HIPAA requirements that allow the use and disclosure of patient information for treatment, payment, and health care operations. Failure to integrate care that addresses all of a patient's health needs can lead to unintended risks and dangers to individuals. – *Rebecca Murow Klein, Chair, Partnership to Amend 42 CFR Part 2 and Director, Government Affairs, Association for Behavioral Health and Wellness*

“The American Society of Addiction Medicine thanks SAMHSA for taking the initiative to update the confidentiality regulations that govern addiction treatment records. While well-intended, the old Part 2 rule has made it difficult for health care systems to integrate addiction treatment services, causing patients with addiction to receive siloed, uncoordinated care. The new final rule makes important updates, but more work needs to be done. We look forward to working with our partners and Congress this year to improve the confidentiality law so that it continues to offer important patient protections without impeding good care. – *Jeffrey Goldsmith, MD., President, American Society of Addiction Medicine*

“Safety Net Health Plans fully support efforts to safeguard patient privacy, but regard the segregation of patient records around substance use disorder from the rest of the health care system as an impediment to care, and a threat to patient safety. This segregation could have the opposite of the

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regulations' intended effect by exacerbating the stigma around SUD treatment. We hope that the supplemental NPRM issued today will refine the rule in a way that addresses these concerns. We will review the NPRM and provide feedback to SAMHSA.” – *Margaret A. Murray, CEO, Association for Community Affiliated Plans*

“The effort to drive high-value, patient centered healthcare depends upon the seamless flow of health information. Today, that care is hindered for some of those who need help the most -- those with substance use disorders. We applaud SAMHSA's effort to facilitate the information sharing needed to care of these individuals, but it will likely not be not enough. Regulations regarding this information should be fully aligned with the strong protections of HIPAA, which safeguard individuals as we move towards more coordinated care models that drive better outcomes for all patients.” – *Mary R. Greal, President, Healthcare Leadership Council*

Members of The Partnership to Amend 42 CFR Part 2 include:

Academy of Managed Care Pharmacy · Alliance of Community Health Plans · American Association on Health and Disability · American Dance Therapy Association · American Hospital Association · American Orthopsychiatric Association · American Psychiatric Association · American Society of Addiction Medicine · 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 · Corporation for Supportive Housing · Employee Assistance Professionals Association · Hazelden Betty Ford Foundation · Healthcare Leadership Council · InfoMC · The Kennedy Forum · Mental Health America · National Alliance on Mental Illness · National Association of Psychiatric Health Systems · National Association of State Mental Health Program Directors · National Rural Health Association · Netsmart · Otsuka America Pharmaceutical, Inc. · Premier Healthcare Alliance