Opioid Treatment Association of Rhode Island (OTARI)

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April 16, 2018

Representative Greg Walden Chairman Energy and Commerce Committee 2185 Rayburn House Office Building Washington, DC 20515

Representative Frank Pallone, Jr. Ranking Member U.S. House of Representatives Energy and Commerce Committee 237 Cannon House Office Building Washington, DC 20515

RE: Opposition to H.R. 3545 - "Overdose Prevention and Patient Safety Act" and Support for Other Legislative Proposals to Preserve Confidentiality and Coordinate Care

Dear Chairman Walden and Ranking Member Pallone:

The Opioid Treatment Association of Rhode Island (OTARI) writes to express our opposition to H.R. 3545, the "Overdose Prevention and Patient Safety Act." In the midst of the worst opioid epidemic in our nation's history, we must do everything possible to increase the number of people who seek treatment, but H.R. 3545 would do the opposite. By reducing privacy protections for individuals receiving substance use disorder ("SUD") treatment to allow disclosures and re-disclosures of SUD information without patient consent to a wide range of health care providers and plans and others with whom they work, H.R. 3545 would discourage people from entering care out of fear that their treatment records will be used against them in many harmful ways.

OTARI members provide treatment and recovery support services to over 5000 Rhode Islanders living with Opioid Use Disorder (OUD) using the three (3) Federally-approved medications – methadone, buprenorphine, injectable naltrexone. Additionally, our members provide treatment and support for other Substance Use Disorders (SUD).

The heightened protections for substance use disorder records in the federal confidentiality law, 42 U.S.C. § 290dd-2 and its regulations at 42 CFR Part 2 (collectively known as "Part 2"), are as critically important today as ever. They support care coordination while maintaining patient confidentiality to help ensure that people enter SUD treatment.

Patients have relied, and still rely, on the current protections to assure their ability to enter in to, and receive treatment without the fear of judgement, recrimination, and marginalization. Many continue to find it difficult to find work, housing, and compassionate medical care. Many, particularly those in Medication Assisted Treatment (MAT), have been "abandoned" by their medical provider, terminated from employment, and blamed for their illness. The changes proposed in *H.R.* 3545 - "Overdose Prevention and Patient Safety Act" will expose every person receiving treatment and recovery support for the broad range of Substance Use Disorders (SUD), including but not limited to, MAT, general outpatient for alcohol and other drugs, residential and inpatient treatment.

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Every person seeking and/or receiving treatment and recovery support will be required to live with the fear and anxiety of unauthorized disclosure of personal as well as treatment information. Many, who might be considering entering treatment may be so concerned about the loss of confidentiality, may choose to forego treatment rather than run the risk associated with these disclosures. As it is, there are enough barriers to treatment. In a time when we are doing our best to get people into life-saving treatment, these proposed changes only add another, unnecessary and life-threatening barrier to access, engagement, and recovery.

Other reasons for our opposition to this bill include the following:

- SAMHSA's amendments to Part 2 by in 2017 and 2018 have made it much easier to
 facilitate (with patient consent) the sharing of health information between SUD and
 other health care providers in electronic health information systems and
 coordinated care settings. Unfortunately, many in the health care system do not
 know what these rules allow, and many SUD treatment programs do not have
 adequate computer systems to enable them to maintain electronic health records.
- Patients in substance abuse disorder treatment should retain the power to decide when and to whom their records are disclosed, given the continued prevalence of discrimination in our society.

For these reasons, OTARI oppose H.R. 3545 and instead support the following bills that are critical to preserving patient confidentiality and coordinating care between various health providers:

- The Senate's bipartisan "Opioid Crisis Response Act of 2018:" Provides model programs and materials for training health providers and compliance staff on the permitted uses and disclosures of substance use disorder information, and training family members and patients on their rights to protect and obtain substance use disorder information.
- H.R. 3331 Introduced by Representative Lynn Jenkins and co-sponsored by Representative Doris Matsui: Provides needed incentive payments to substance use disorder and behavioral health providers to obtain certified electronic health record technology.

Thank you for your consideration.

Sincerely,

Michael Rizzi, Chair

Opioid Treatment Association of Rhode Island