



Improving Care for People with Alcohol and other Drug Problems while Maintaining Individual Confidentiality Protections

Faces & Voices of Recovery believes that confidentiality protections for individuals seeking health care are essential. As the privacy of patient records is discussed in various forums with the advent and encouragement of electronic health record systems use to improve care, patient privacy rights are generally being strengthened. For people with substance use disorders, those privacy rights are embodied in the Federal law and regulations governing Confidentiality of Alcohol and Drug Patient Records, 42CFR Part 2.

As the federal government recognized in 1975, privacy protections encourage Americans in need of addiction care to seek help. With over 23 million Americans yet to get the help they need to recover from addiction to alcohol and other drugs, 2010 is not the time to open up a debate on the underlying law.

The current privacy protections address the real threat of discrimination that people seeking help for alcohol and other drug problems face, including the inability to obtain life and other insurance; eviction from public housing; loss of child custody; loss of employment; arrest and prosecution. In a 2001 survey of the recovery community conducted by Peter D. Hart Research Associates for Faces & Voices of Recovery, we found that 24% of people in recovery reporting having experienced employment and/or insurance discrimination and 12% reporting they had been personally denied a job or promotion. These experiences occurred even with privacy protections in place. A robust federal confidentiality law is essential to ensure that Americans seeking help for alcohol and other drug problems are not denied basic rights needed to sustain their recovery and wellbeing.

Current privacy protections should not be viewed as a barrier to integrating care for addiction with the rest of the health care system. As the Legal Action Center has pointed out, the tools exist to facilitate communication between these systems. The federal law and regulations allow for the disclosure of health information by an alcohol and drug program with an individual's voluntary, prior informed consent, and also allow for disclosure without their patients' prior consent in a number of circumstances, such as in a medical emergency or when there is a signed Qualified Service Organization/Business Associate Agreement in place between an addiction treatment program and another organization involved in providing or coordinating health care or other services to the program's patients.

With the implementation of health information technology, there is an opportunity to increase communication and collaboration between health care professionals including those providing care for people with substance use disorders, while maintaining critical privacy protections. Faces & Voices goal is to get effective care to more people and coordinate their care while protecting them from discrimination.

Faces & Voices joins other organizations including the Legal Action Center and the National Association of State Alcohol and Drug Abuse Directors in recommending the establishment of a deliberative process that would examine opportunities to improve the quality of care for people seeking recovery and encourage others to seek help. The stakeholders should include federal agencies led by the Substance Abuse and Mental Health Services Administration (SAMHSA), people in long-term recovery and their family members, state agencies, service providers, legal and health information technology experts and others. Their charge should be to develop recommendations for the promotion of efficient and clear communication between all health care systems without jeopardizing the underlying statute that is the backbone of privacy rights for individuals seeking and sustaining their recovery from addiction.

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