



Advancing Health Care Policy
for Mental Health and Addiction

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ABHW Pleased with Opioid Bill, Yet Concerns Remain Over Care Coordination and Confidentiality

Washington, DC (September 26, 2018) – The [Association for Behavioral Health and Wellness \(ABHW\)](#), the national voice for payers that manage behavioral health insurance benefits for over 175 million people, fear that without changes to 42 CFR Part 2 (Part 2), many of the lifesaving provisions in H.R. 6 SUPPORT for Patients and Communities Act will not be as effective in preventing overdoses, providing treatment, and coordinating care.

“This is an unfortunate missed opportunity. One in 12 American adults, 18.7 million, have a substance use disorder and we need a comprehensive workable solution - now,” stated ABHW President and CEO, Pamela Greenberg, MPP. “The alignment of Part 2 with HIPAA for TPO is one of the most important changes Congress can make to address our nation’s opioid overdose epidemic. Without this provision the opioid bill does not go far enough, and the Senate should not leave Washington with such a vital and lifesaving piece of legislation left on their desk,” Greenberg continued.

ABHW supports many of the provisions in H.R. 6 SUPPORT for Patients and Communities Act including the loosening of the Institutions for Mental Diseases (IMD) restrictions. However, without changes to Part 2, if someone gets out of an IMD after being treated for an opioid use disorder (OUD) and doesn’t share the fact that they were treated for an OUD with their other treating providers they could be prescribed opioids upon re-entry to the community and relapse or worse yet, overdose and die. Furthermore, unless the individual signs an authorization the IMD or the health plan cannot coordinate the individual’s follow-up care, again, making relapse more likely to occur.

Other ABHW backed initiatives in the bill include: expanded use of telehealth services for the treatment of substance use disorders, establishment of recovery housing best practices, and testing of incentive payments for behavioral health providers for adoption and use of certified electronic health record technology. Yet, the exclusion of Part 2 makes implementation of some of these policies less effective.

The omission of Part 2 reform, federal regulations that govern confidentiality of drug and alcohol treatment and prevention records, can result in the failure to integrate services and may lead to potentially dangerous medical situations.

The Overdose Prevention and Patient Safety (OPPS) Act, H.R. 6082, recently passed the House of Representatives by an overwhelming bi-partisan vote of 357-57. This bill would align Part 2 with the Health Insurance Portability and Accountability Act (HIPAA) for treatment, payment, and health care operations (TPO), while strengthening protections against the use of addiction records in criminal, civil, or administrative proceedings. The bill further amplifies consumer protections by incorporating antidiscrimination language, significantly enhanced penalties for any breach of a patient's substance use record, and breach notification requirements.

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[ABHW](#) is the leading health plan association working to improve access and quality of care for mental health and substance use disorders. ABHW's members include national and regional health plans who care for more than 175 million people. Together we work to reduce stigma and advance federal policy on mental health and addiction care. Member companies - Aetna Behavioral Health, Anthem, Beacon Health Options, Centene Corporation, Cigna, Magellan Health, New Directions Behavioral Health, Optum, and PerformCare.