



April 19, 2018

The Honorable Greg Walden  
Chairman  
House Committee on Energy and  
Commerce  
2125 Rayburn House Office Building  
Washington, DC

The Honorable Frank Pallone, Jr.  
Ranking Member  
House Committee on Energy and  
Commerce  
2322A Rayburn House Office Building  
Washington, DC 20515

Re: HR 3545 – The Overdose Prevention and Patient Safety (OPPS) Act

Dear Congressmen Walden and Pallone:

The College of Healthcare Information Management Executives (CHIME) is pleased to support HR 3545, the Overdose Prevention and Patient Safety (OPPS) Act. The legislation would be integral in managing opioid addiction records through seeking to align 42 CFR Part 2 regulation with the Health Insurance Portability and Accountability Act (HIPAA) for the purposes of payment, treatment and health care operations.

CHIME is an executive organization dedicated to serving chief information officers (CIOs), chief medical information officers (CMIOs), chief nursing information officers (CNIOs) and other senior healthcare IT leaders. With more than 2,500 members in 51 countries and over 150 healthcare IT business partners, CHIME provides a highly interactive, trusted environment enabling senior professional and industry leaders to collaborate; exchange best practices; address professional development needs; and advocate the effective use of information management to improve the health and healthcare in the communities they serve.

Recently, in the face of the almost 45,000 lives lost in 2016 to opioid addiction and overdose CHIME's [Opioid Task Force](#) is undertaking several initiatives aimed at curbing the pattern of addiction including reviewing the impact of technology and data driven solutions.

When a provider is caring for a patient's health, it is essential that they have a complete medical history with all relevant information that will help them make clinical decisions to the best of their ability. To ensure the highest quality of care possible, information pertaining to substance use disorder (SUD) is pertinent. However, as it currently stands as required by 42 CFR Part 2, SUD treatment and diagnoses are kept confidential from providers which can be extremely problematic when a clinician is attempting to treat someone but doesn't know their prior addiction history. Our members strongly support synchronizing these consent policies and reducing the burdens imposed by these two different sets of rules and facilitating consent for the purposes of treatment, payment and healthcare operations pursuant to HIPAA>



Oftentimes, someone is prescribed an opioid for pain because the physician doesn't have any knowledge of problematic substance abuse history. If they had been able to access this information, they would often have been able to keep those vulnerable for misuse safe from the harm of the highly addictive painkiller. HR 3545 would align 42 CFR Part 2 with HIPAA which would allow the sharing of patient information with clinicians treating the patient, so they can make the most informed decisions possible. By allowing this, the information would still be safeguarded under the rules of HIPAA while giving clinicians electronic access to a broader picture of a patient's health; therefore, resulting in a better care experience for the patient.

We appreciate your continued interest and leadership on this subject. We stand ready to work with you and your colleagues toward the passage of this important legislation, which would help clinicians treat those patients struggling with addiction. Should you have any questions about our position or require additional information, please contact us at [policy@chimecentral.org](mailto:policy@chimecentral.org).

Sincerely,

Russell P. Branzell, CHCIO, LCHIME  
President and CEO  
CHIME