

FAQ for Providers on Behavioral Health Data Sharing

This document provides important information about how your patients' behavioral health information can be shared via CRISP - a registered Health Information Exchange (HIE) in DC. CRISP can be a helpful tool to facilitate the integration of physical and behavioral health data.

This document is for informational purposes only. It is not intended as legal advice. Specific questions regarding compliance with federal and state law should be referred to your legal counsel.

Can I share my patient's mental health information through CRISP?

As permitted by DC Mental Health Information Amendment Act of 2018, mental health information can be shared via CRISP. This law permits the disclosure of mental health information by third-party payors to health care providers, in certain circumstances. It also allows clients to prevent the disclosure of mental health information. ¹

Can patients opt-out of their mental health data being shared through CRISP?

In accordance with the DC Mental Health Information Act, a patient must be given the right to optout of their mental health information being shared. All mental health providers must provide an opportunity for patients to opt-out of their information being shared. CRISP does not currently have functionality to allow patients to opt-out of data sharing related to a specific diagnosis or provider. Consequently, if a patient decides to opt-out of CRISP at this time, none of their health information will be shared for purposes of coordinating care and treatment.

We provide services for substance use disorder (SUD). Can we share that information through CRISP?

At this time, CRISP is not able to accept nor share any substance use disorder records that are protected under 42 CFR Part 2.² This law requires CRISP to have a mechanism to capture or manage the necessary written consents. CRISP currently does not have a way to do this.

What is 42 CFR Part 2?

Title 42 of the Code of Federal Regulations (CFR) Part 2: Confidentiality of Substance Use Disorder Patient Records, protects the confidentiality of SUD patient records by restricting the circumstances under which Part 2 Programs or other lawful holders can disclose such records. Part 2 Programs are federally assisted programs that provide alcohol or drug abuse diagnosis, treatment, or referral for treatment. In general, Part 2 Programs and lawful holders are prohibited from disclosing any information that would identify a person as having or having had a SUD unless that person provides written consent. ³

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¹ L22-0244 - Effective March 13, 2019. http://lims.dccouncil.us/Legislation/B22-0742

² https://www.samhsa.gov/sites/default/files/faqs-applying-confidentiality-regulations-to-hie.pdf

³ https://www.govinfo.gov/content/pkg/FR-2017-01-18/pdf/2017-00719.pdf

CRISP requires that I submit a panel or list of patients in order to use CRISP services. My panel is protected by 42 CFR Part 2. Can I still sign up and use CRISP services?

Yes, CRISP can accept your panel or list of patients under a Qualified Service Organization Agreement (QSOA). A QSOA is a two-way agreement between a Part 2 program and the entity providing the service. CRISP will ensure that no information from the panel is re-disclosed in accordance with 42 CFR Part 2 and the QSOA. Your panel will be given an alias name and you will need to reference that alias when you have questions about your CRISP account or services upon completion of onboarding.⁴

My patient has given consent for me to share their SUD information with their health care team. Can I share the information with CRISP?

No, not at this time. CRISP is unable to accept paper consents or attestation of consents at this time. CRISP is not able to accept any information protected by 42 CFR Part 2, except for patient panels used only for administrative purposes.

Where can I go for more information?

If you have additional questions, please contact CRISP DC Outreach Coordinators who will be more than happy to assist you:

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⁴ For additional information, see FAQ Number 10 of the 2010 FAQs published by SAMHSA and the ONC at: Applying the Substance Abuse Confidentiality Regulations to Health Information Exchange (HIE). https://www.samhsa.gov/sites/default/files/faqs-applying-confidentiality-regulations-to-hie.pdf