



April 7, 2016

Kana Enomoto, MA
Acting Administrator
Substance Abuse and Mental Health
Services Administration
Department of Health and Human Services
Attention: SAMHSA-4162-20
5600 Fishers Lane, Room 13N02B
Rockville, MD 20857

Submitted electronically to www.regulations.gov

Re: Confidentiality of Substance Use Disorder Patient Records (SAMHSA-4162-20)

Dear Ms. Enomoto:

On behalf of the American Nurses Association (ANA), we are pleased to comment on the Substance Abuse and Mental Health Services Administration's (SAMHSA) proposed rule to revise the Confidentiality of Substance Use Disorder Patient Records. As the only full-service professional organization representing the interests of the nation's 3.4 million registered nurses (RNs), ANA is privileged to speak on behalf of its state and constituent member associations, organizational affiliates, and individual members. RNs serve in multiple direct care, care coordination, and administrative leadership roles, across the full spectrum of health care settings. RNs provide and coordinate patient care, educate patients and the public about various health conditions, and provide advice and emotional support to patients and their family members. ANA members also include the four advanced practice registered nurse (APRN) roles: nurse practitioners, clinical nurse specialists, certified nurse-midwives and certified registered nurse anesthetists.¹

ANA supports SAMHSA's goal to update and modernize the regulations concerning the confidentiality of substance use and disorder patient records while maintaining strong privacy protections. Information sharing is essential to support the coordination of patient care, which is necessary to advance the delivery of health care, improve quality, and further the priorities of the triple aim: improving health care quality; improving population health; and reducing unnecessary health care. Equally important is the goal to ensure that patients with substance use disorders can fully benefit from integrated health care models. It is also essential, however to ensure that patients

¹The Consensus Model for APRN Regulation defines four APRN roles: certified nurse practitioner, clinical nurse specialist, certified nurse-midwife and certified registered nurse anesthetist. In addition to defining the four roles, the Consensus Model describes the APRN regulatory model, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation.

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receiving care for substance use disorder can obtain services without fear of suffering adverse consequences from inappropriate disclosure of information. In order to fully achieve these goals, ANA urges SAMHSA to carefully consider the comments, concerns and recommendations set forth in the letter submitted by the American Medical Informatics Association (AMIA).

We appreciate the opportunity to share our views on this matter. If you have questions, please contact Mary Beth Bresch White, Director, Health Policy (marybreschwhite@ana.org).

Sincerely,

A handwritten signature in black ink that reads "Debbie D. Hatmaker". The signature is written in a cursive, flowing style.

Debbie D. Hatmaker, PhD, RN, FAAN
Executive Director

cc: Pamela Cipriano, PhD, RN, NEA-BC, FAAN, ANA President
Marla Weston, PhD, RN, FAAN, ANA Chief Executive Officer