



Opioid Treatment Programs (OTP) Service Continuity Pilot: Information Webinar

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BHITS Project
Behavioral Health Information Technologies and Standards



Agenda



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Purpose of Pilot Project



Primary objective: To facilitate patients' ability to share specific opioid treatment information in cases of care discontinuity in a manner that is sensitive to privacy concerns under 42 CFR Part 2 regulations, through a health information exchange (HIE) organization.

Key indicators of pilot's success include:

- Opioid treatment program (OTP) patients' ability to share their medical information with other OTP providers.
- Avoiding a disruption in service when a patient's medical records cannot be accessed through their OTP (e.g., due to natural disaster or other unforeseen disruptions).
- Use of a HIE to share specific opioid treatment information in a manner that is sensitive to federal and state privacy requirements.

Disaster Preparedness: Building a System for OTPs & Patients

- In the wake of the attacks of 9-11, and working with SAMHSA/CSAT, stakeholders proposed a solution to ensure service continuity in the worst of circumstances –
 - *“Creation of a reliable and interoperable database to ensure that patients being treated for opioid dependence could obtain their medication when an emergency or other type of disruption forces them to seek treatment at a treatment program where they are not normally enrolled – an “Opioid Dosage Data System.”*
- Over 10 years, through Katrina and subsequent events, SAMHSA/CSAT worked with stakeholders to develop, pilot and then implement a centralized system called D-ATM (Digital Access to Medication).
- A Patient Advocate proposed the project’s name - D-ATM - inspired by bank ATMs, “which we rely on to give us what we need in a secure manner.”

Disaster Preparedness: Building a System for OTPs & Patients



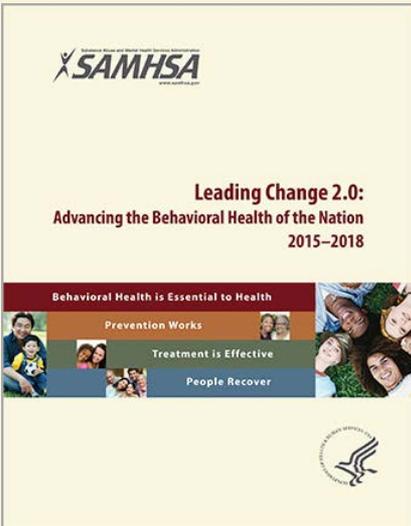
- D-ATM was created to help ensure that opioid treatment patients would be able to obtain their medication in the event of a service disruption – whether due to a major disaster or more routine event, such as a snowstorm.
- D-ATM was built to house “just enough” information for OTP staff to be able to verify that a displaced individual was an OTP patient and if so, to provide their medication safely and accurately – and to do so in a manner that honored their privacy and dignity.
- SAMHSA supported the D-ATM project for 10 years, until it became clear that while the problem remained the same, the solution needed to be revisited.

SAMHSA's Continued Efforts

- SAMHSA, in collaboration with the Office of the National Coordinator for Health Information Technology (ONC), has identified the need to address privacy and confidentiality concerns limiting the inclusion of behavioral health data in HIE efforts as a priority.
- SAMHSA is using HIT as a means to coordinate care for OTP patients in times of diminished or disrupted access to services and medication.
- Disruptions in services (e.g., due natural disasters or unexpected personal circumstances) can hinder recovery and effect health outcomes.
- Safeguards are critical to ensuring continuity of care and to alleviate risk for patients and medical professionals.



SAMHSA's Strategic Initiative



Substance Abuse and Mental Health Services Administration, *Leading Change 2.0: Advancing the Behavioral Health of the Nation 2015-2018*. HHS Publication No. (PEP) 14-LEADCHANGE2. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

Goals for Strategic Initiative #5 – Health Information Technology:

- ✓ Promote development of technologies and standards to enable interoperable exchange of behavioral health data while supporting privacy, security, and confidentiality.
- ✓ Promote the adoption of Electronic Health Records (EHRs) and other HIT tools with behavioral health functionality by health care providers, patients, consumers, states, and tribes to improve prevention, treatment, and recovery for behavioral health conditions.
- ✓ Enhance capacity for the secure collection and use of data in EHRs and other technologies by continuing to develop behavioral health national data standards, which support quality improvement and effective outcome tracking.
- ✓ Promote the broad dissemination of technologies for improving behavioral health care, prevention, and wellness.

Use Case: Guest Patient Process Today

Sally



Sally lives in Chicago and has been in opioid addiction recovery for 3 years, but has never left the city during this time. Before Sally can travel, she must make special arrangements with her provider to ensure that her methadone treatment will continue uninterrupted.

It will take a lot of coordination and time to review and sign the proper paper forms before she feels comfortable to travel.



Sally's
Local OTP

Out-of-State OTP



Use Case: Guest Patient Process Tomorrow

Sally



Now, because Sally has already logged on to a web-based **Electronic Consent System**, she has given her local OTP advanced authorization to share her medical information with an out-of-state OTP.

This will ensure that her methadone treatment will continue uninterrupted.



Electronic Consent



Out-of-State OTP



SAMHSA's Pilot Team

Team Leader/Funder: The Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services



Pilot Implementation and TA Lead: FEi Systems

- Oversees technical implementation of OTP Service Continuity Pilot and provides ongoing technical assistance.
- Offers expertise in HIT implementation, data segmentation, and electronic consent management.

SAMHSA's Funding Vehicle for Pilot: Behavioral Health Information Technologies and Standards (BHITS) Program

- Advances SAMHSA's mission to reduce the impact of substance abuse and mental illness in America's communities through the effective use of health information technology.

Pilot Benefits

Anticipated benefits to pilot awardees include:

- Improved patient care through enhanced access to secure data
- Strengthen the level of trust in provider-patient relationships
- Improved patient mobility between OTP facilities
- Sustained compliance with Federal and state confidentiality regulations
- Reduction in poor patient outcomes due to treatment disruption



Available Resources

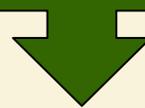
The awardee and their team can expect to receive:

- Financial assistance of up to \$375,000 to reimburse costs incurred by the HIE (or organization with similar capabilities) awardee and participating OTPs.
- Technical assistance on the implementation of HIT tool(s), processes, protocols, and policies to facilitate HIE and OTP integration.
- Assistance to write and publish outcomes, policies, procedures, standards, and protocols for the pilot, for national dissemination.



Eligibility of Applicants

Examples of Potential Primary Applicants: Health Information Exchange, State/County/Local Public Health Agency, Opioid Treatment Program, etc.



Eligibility Requirements

Demonstrated ability to assemble a team that includes:

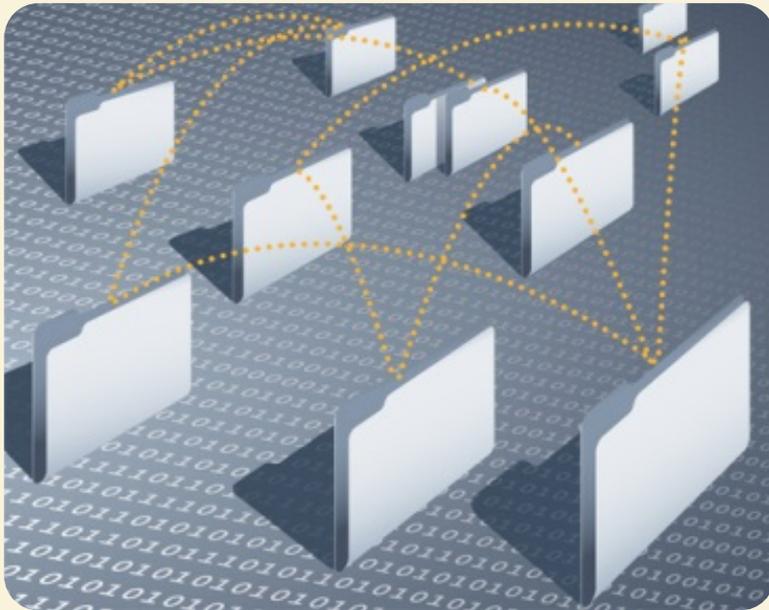
- ✓ An HIE
- ✓ 2 or more OTPs
- ✓ Existing EHR and/or Medication Management System (MMS)

Ability of HIE to incorporate behavioral health data to provide patients with the ability to authorize data sharing.

Pilot Expectations

The successful applicant will:

- Subcontract with SAMHSA's prime contractor, FEi Systems, for the pilot.
- Participate in the planning and evaluation of the pilot.
- Implement the pilot within 3-6 months of pilot kickoff (anticipated April 2015).



- ✓ Develop a data exchange workflow compliant with 42 CFR Part 2
- ✓ Develop electronic data transfer between the OTP and the HIE
- ✓ Develop a method for patients' provision of electronic consent of their record
- ✓ Integrate and use a HL7 Clinical Document Architecture (CDA) document for information exchange
- ✓ Perform query/response transactions using patient dosing information

Pilot Expectations

Anticipated Technical Scope of Work:*

1. Integrate behavioral health (BH) provider EHR and/or MMS with HIE
2. Integrate BH EHR and HIE with Access Control Services
3. Create an EHR or MMS application interface (if not already in place)
4. Establish workflow that integrates OTP providers into the HIE
5. Facilitate automatic sending of dosing information to HIE
6. Successfully accept query response from the HIE



* Exact SOW is likely to vary among pilot candidates.

Technology Demonstration



Walkthrough of Consent2Share Software

Maurice Andrew Malcolm, CISSP, CISM, CRISC, PMP
Information Security
January 14, 2015

BHITS Project
Behavioral Health Information Technologies and Standards

Technology Demo: Log-in Page

Share with confidence.

consent2share 



Your health is between you and your doctor, so take control of your medical privacy!

[Sign up Now.](#)

Your medical privacy is important to you, so take control of your health records and decide what information to share and with whom to share it with. Get started today with a free account, setup is easy and fast.

Please Note: This site is for **demonstration purposes** only. Please **DO NOT** enter any personal data or personal health information.

Log in with your C2S account

Username:

Password:

[Login](#)

[Trouble accessing your account?](#)

What is privacy consent?

If you have ever visited a doctors office to receive treatment, you most likely were asked by a receptionist at the lobby to fill

About Consent 2 Share.

Consent 2 Share is a publicly funded program which provides individuals with education resources and electronic tools

Learn about privacy.

Every year millions of individuals visit the doctors office and are asked to share their medical records as part of receiving

Technology Demo: Creating Consent

[Add Consent](#) **GUIDE** Language consent2share C/S

I, Albert Smith, hereby authorize...

The following individual(s) and/or organization(s):
LUQUIN, TERESA

To disclose my information to:
VAN DONGEN, MONICA

Medical Information

Select how you would like to share your medical information.

SHARE ALL information in my medical record.

SHARE my medical record **WITH EXCEPTION** of specific information. [Edit](#)

Drug abuse information sensitivity Psychiatry information sensitivity Sexuality and reproductive health information sensitivity

Alcohol Abuse and Alcoholism Information

Purpose of Use

Choose for what purposes your medical information may be used

SHARE my medical record **ONLY** for the selected purpose(s) of use. [Edit](#)

Healthcare Treatment

Consent Term

Technology Demo: Signing Consent

Please e-sign: [DEMO USE ONLY] Consent 1

Share for the following:

- Healthcare Treatment

EchoSign Test Document
Not for commercial use

I understand that my consent is required for the release of my Protected Health Information (PHI) in accordance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) and the Privacy Rule, including Confidentiality of Alcohol and Drug Abuse Patient Records, 42 CFR Part 2, and cannot be disclosed without my written consent unless otherwise provided for in the regulations. I also understand that I may revoke this consent at any time except to the extent that action has been taken in reliance on it, and that in any event this consent expires automatically as follows:

Effective Date: 01/07/15
Expiration Date: 01/06/16

Signature: **Start**

Email:

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Powered by ADOBE® ECHOSIGN™

If you have finished signing this Consent or wish to cancel, please click the Close button to exit this window. Close

Application: Process & Timeline

- Application Release expected **2/15/15** through the SAMHSA HIT listserv and the ONC HIE listserv.
- Electronic application submissions due no later than **3/15/15**.
- Winning awardee selected and notified no later than **4/15/15**.
- Accommodations will be made for information requests and questions during the application window.
- All questions should be directed to Dina Passman, SAMHSA Public Health Advisor, at otpdemo@feisystems.com.

Questions will be answered via a weekly 'Frequently Asked Questions' email.

Question & Answer Session





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