



American Society of Addiction Medicine

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Marilyn B. Tavenner

Acting Administrator

Centers for Medicare and Medicaid Services

Department of Health and Human Services

Room 445-G, Hubert H. Humphrey Building

200 Independence Avenue, SW

Washington, DC 20201

RE: Medicare and Medicaid Programs; Electronic Health Record Incentive Program—Stage 2; CMS-0044-P; RIN 0938-AQ8

Dear Acting Administrator Tavenner,

The American Society of Addiction Medicine (ASAM) is grateful for the opportunity to comment on the proposed rules for implementing Stage 2 of the Medicare and Medicaid electronic health record (EHR) incentive programs.

ASAM represents nearly 3000 physicians who specialize in the treatment of addiction. Fully 40 percent of ASAM members report serving patients who pay for treatment with Medicare or Medicaid and, thus, are eligible to receive incentive payments under the “meaningful use” program. More importantly, we feel uniquely qualified to comment on the sections of these rules that are of importance to addiction medicine physicians and other physicians working in the behavioral health community.

Comments Regarding the Proposed Rules for Stage 2 of the Meaningful Use EHR Incentive Program

1. Core Meaningful Use Objectives

- i. The Meaningful Use proposed rule stipulates that eligible providers must meet 17 of the 23 proposed core objectives. ASAM would like to recommend that the list of core objectives be expanded to include an objective for eligible providers that requires “recording alcohol and/or drug use for patients 13 and older.”
- ii. Pages 13728-9 of the Notice of Proposed Rulemaking (NPRM) refers to a proposed “eligible provider” objective, “Use secure electronic messaging to communicate with patients on relevant health information.” The privacy of medical records documenting addiction treatment is especially important. Confidentiality is the fundamental requirement for the establishment of trust when the most private details of a person’s life are revealed. Activities of addiction treatment providers are addressed by laws which recognize that these special therapeutic relationships should be protected by the strictest expectations of confidentiality. Chapter 42 of the Code of Federal Regulations, Part 2, (42 CFR Part 2) is the statute in federal law that requires that documents of addiction treatment be held to higher standards of confidentiality than even psychiatric records, and far higher than records of general medical encounters. In order to encourage the widespread adoption of EHR’s among behavioral health physician providers, it is imperative that these special protections be afforded addiction patients in all settings and by all providers; and that these protections be given special consideration as the Administration develops the regulations to implement the Meaningful Use rule.

2. Core Clinical Quality Measures

- i. In addition, the Meaningful Use proposed rule requires eligible providers to report on 12 of the 2014 proposed clinical quality measures for eligible professionals (Table 8, NPRM). While ASAM is grateful that the list of proposed measures includes several measures related to chemical dependence prevention, screening and counseling, we respectfully request that the following National Quality Forum-endorsed measures relevant to addiction treatment be included:
 - a. Risky behavior assessment or counseling by age 13 for Alcohol, Tobacco, Substance Abuse, Sexual Activity (NQF #1406).
 - b. Risky behavior assessment or counseling by age 18 for Alcohol, Tobacco, Substance Abuse, Sexual Activity (NQF #1507).

- ii. ASAM also requests that the list of proposed clinical quality measures for eligible hospitals for 2014 include measures relevant to addiction treatment (Table 9, NPRM). Examples might include measures for alcohol and drug use screening and/or brief interventions for risky alcohol and/or drug use.

Again, ASAM thanks CMS for the opportunity to submit comments regarding this important issue. We look forward to a continued collaboration with the Centers for Medicare and Medicaid Services on the development and adoption of health information technology that supports increased access to addiction treatment.

Sincerely,

A handwritten signature in black ink, appearing to read "Stuart Gitlow". The signature is written in a cursive, flowing style.

Stuart Gitlow, MD, MBA, MPH, FAPA

Acting President and AMA Delegate, American Society of Addiction Medicine