THE LEGISLATIVE ANALYSIS AND PUBLIC POLICY ASSOCIATION

Intro. to Information Sharing and Resources for OFRs

NYS Overdose Fatality Review Meet and Greet - Part 2 November 15, 2023

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Legislative Analysis and Public Policy Association (LAPPA)

About LAPPA



501(c)(3) nonprofit organization whose mission is to conduct legal and legislative research and analysis and draft legislation on effective law and policy in the areas of public safety and health, substance use disorders, and the criminal justice system.

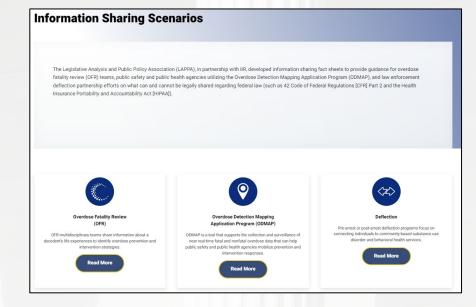
ONDCP's Model Acts Program Grant recipient for 2019-21, 2021-23, and 2023-25.

www.legislativeanalysis.org



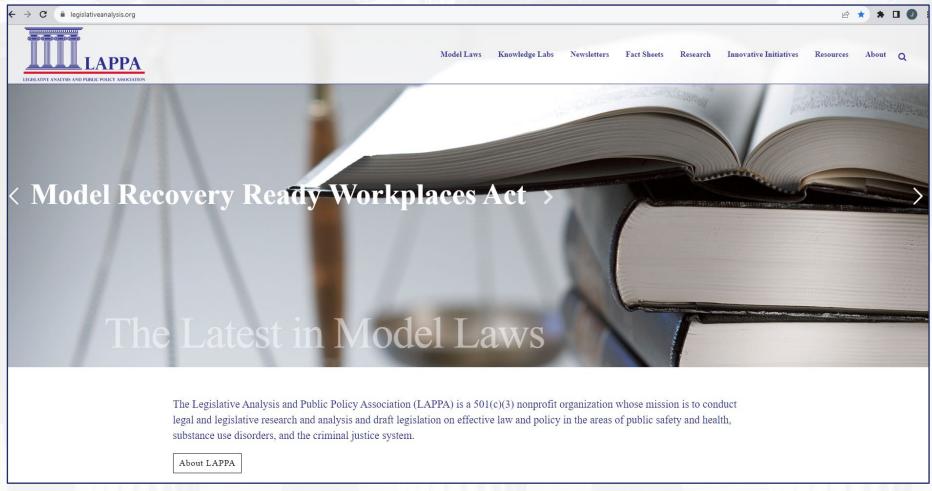
What does LAPPA do?

- Model Acts grant
 - Model laws (17 published)
 - 50-state Summary of Laws (17 published)
 - Fact sheets (39 published)
 - <u>Case Law Monitor</u> (six per year)
 - News Bites (six per year)
 - Knowledge Labs (six in 2023-2H)
 - Technical assistance (TA)
- COSSUP grant subaward
 - Information sharing scenarios (COSSUP website)
 - TA





What does LAPPA do?





Types of information sharing laws

r/ABoringDystopia

Posted by u/Maurens · 11h · i.redd.it





Types of information sharing laws

Federal laws and regulations

State (specific) laws and regulations



HIPAA Privacy Rule

42 C.F.R. Part 2

28 C.F.R. Part 23

FERPA

CAPTA

Resources online



HIPAA Privacy Rule

- Title II to the Health Insurance Portability and Accountability Act (Section 264)
- Privacy Rule regulations → 45 C.F.R. Parts 160 and 164 (A and E)
- Covered entity or business associate may not use or disclose protected health information (PHI), except as permitted or required
- Patient authorization is necessary for uses and disclosures of PHI not otherwise allowed
- More avenues for sharing under Privacy Rule than 42 C.F.R. Part 2



HIPAA Privacy Rule - Scenario analysis

Do I even need to bother with the Privacy Rule?

- Is the information at issue **PHI**? and
- Is the info. holder a covered entity or business associate?

Does the Privacy Rule permit disclosure without patient **authorization**?

Does state or local law pose a hurdle?

Is only the **minimum necessary** information disclosed?

Is it practical to get patient **authorization**?



HIPAA Privacy Rule - Individ. identifiable health info. (IIHI)

- IIHI = subset of health information that is
 - Created or received by a health care provider, health plan, employer, or health care clearinghouse
 - Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual and
 - Either
 - Identifies the individual or
 - For which there is reasonable basis to believe could be used to identify individual



HIPAA Privacy Rule - Protected health information (PHI)

- PHI = individually identifiable health information (IIHI) that is
 - Transmitted by or maintained in any form or medium and
 - Not one of the following:
 - In records covered by FERPA
 - Certain physician, psychiatrist, psychologist records pertaining to student over 18
 - In employment records held by covered entity employer
 - Regarding person who died 50+ years ago



HIPAA Privacy Rule - Protected health information (PHI)

- De-identified health information is not PHI
- How can information be de-identified?
 - ❖ Remove 18 identifiers listed in 45 C.F.R. § 164.514(b)(2)(i)(A)-(R) or
 - Have a person with appropriate knowledge of and experience with generally accepted statistical and scientific principles and methods conclude info is de-identified



HIPAA Privacy Rule – Covered entity

- Covered entity = one of the following
 - Health plan
 - Health care clearinghouse or
 - Health care provider who transmits any health information in electronic form in connection with a transaction covered by HIPAA
- Hybrid covered entity



HIPAA Privacy Rule – Business associate

- <u>Business associate</u> = Person or entity that performs certain activities or services involving the use or disclosure of **PHI** either on behalf of, or to, a **covered entity** (but not the covered entity's employees).
- Covered entity can be business associate of another covered entity

SERVICES

Legal; actuarial; accounting; consulting; data aggregation; management; administrative; accreditation; financial

ACTIVITIES

Claims processing; data analysis, processing, or administration; utilization review; quality assurance; billing; benefit management; practice management



HIPAA Privacy Rule – Business associate

- Covered entity must include certain protections for the information in a business associate agreement (BAA)
- BAA must impose specified written safeguards on PHI used or disclosed by its business associates
- Covered entity cannot use BAA to authorize a business associate to make disclosures not allowed under Privacy Rule



HIPAA Privacy Rule - Disclosures w/o authorization

- Six (6) permitted (but not required) disclosures
 - To the individual who is subject of the PHI
 - For treatment, payment, or healthcare operations
 - Where individual given opportunity to agree or object
 - Incident to an otherwise permitted use and disclosure
 - Limited data set for research, public health, or health care purposes
 - "Public interest and benefit activities" (12)





HIPAA Privacy Rule - Disclosures w/o authorization

- <u>Public interest and benefit activities</u> ("Uses and disclosures for which an authorization or opportunity to agree or object is not required")
 - Required by law
 - Public health activities
 - About victims of abuse, neglect, or domestic violence
 - Health oversight activities
 - Judicial and administrative proceedings
 - Certain law enforcement purposes

- Decedent information
- Cadaveric organ, eye or tissue donation purposes
- Research purposes
- Avert a serious threat to health or safety
- Specialized government functions
- Workers compensation compliance



HIPAA Privacy Rule - Patient authorization

- Valid authorization requires:
 - Six core elements
 - Three statements
 - Plain language
 - Copy to individual

ELEMENTS

Description of information; who is authorized to disclose/receive; purpose; expiration date; signature

STATEMENTS

Patient may revoke; potential for redisclosure; ability/inability to condition treatment, payment, enrollment or eligibility for benefits on the authorization



HIPAA Privacy Rule - Decedents' records

- Covered entity must treat personal representative the same as the individual with respect to uses and disclosures of PHI
- <u>Personal representative</u> = person with legal authority (based on state law) to act on behalf of the decedent or the decedent's estate



HIPAA Privacy Rule - Scenario analysis

Do I even need to bother with the Privacy Rule?

- Is the information at issue **PHI**? and
- Is the info. holder a covered entity or business associate?

Does the Privacy Rule permit disclosure without patient **authorization**?

Does state or local law pose a hurdle?

Is only the **minimum necessary** information disclosed?

Is it practical to get patient **authorization**?



HIPAA Privacy Rule - Overdose fatality review (OFR)

- How can an OFR team obtain medical records?
- Sharing information learned from family
- Non-member observers





https://www.ofrtools.org/

HIPAA Privacy Rule - Overdose fatality review (OFR)

 How can an OFR team obtain medical records?

Options for Obtaining Medical Records Is there a state statute, state regulation, HIPAA allows disclosure to an OFR team or local ordinance allowing an OFR team [45 C.F.R. §164.512(a)]. to receive medical records? Is there a state statute, state HIPAA allows disclosure to an regulation, or local ordinance allowing a OFR team generally if certain elements public health authority to receive medical are met [45 C.F.R. § 164.512(b)(1)]. records for a specific purpose? Is there a signed authorization by the HIPAA treats this as patient decedent's personal representative to authorization; allows disclosure to an receive medical records? OFR team [45 C.F.R. § 164.502(g)].



HIPAA Privacy Rule - Overdose fatality review (OFR)

- How can an OFR team obtain medical records?
 - **(b)** Standard: Uses and disclosures for public health activities—(1) Permitted uses and disclosures. A covered entity may use or disclose protected health information for the public health activities and purposes described in this paragraph to:
 - (i) A <u>public health authority</u> that is authorized by law to collect or receive such information for the purpose of preventing or controlling disease, injury, or disability, including, but not limited to, the reporting of disease, injury, vital events such as birth or death, and the conduct of public health surveillance, public health investigations, and public health interventions; or, at the direction of a <u>public health authority</u>, to an official of a foreign government agency that is <u>acting</u> in collaboration with a <u>public health authority</u>;



HIPAA Privacy Rule - Overdose fatality review (OFR)

Overdose Fatality Review (OFR)

Information sharing can be a challenge for overdose fatality review (OFR) teams and their members. To assist teams in capturing as much information as possible about a decedent to make meaningful recommendations for prevention, Legislative Analysis and Public Policy Association (LAPPA), in partnership with IIR, developed information sharing fact sheets. These fact sheets provide OFR teams an understanding of what members legally can and cannot share regarding federal law (such as 42 CFR and HIPAA).

Obtaining Medical Records	~	Obtaining Next of Kin Consent
Obtaining Behavioral Health Records	~	Allowing Nonmember Professional Observers
Obtaining Educational Records	~	Limiting Use of Shared Information
Obtaining Child Services Records	~	Freedom of Information Act Request
Obtaining Prescription Drug Monitoring Program (PDMP) Records	~	Sharing Overdose Detection Mapping Application Program (ODMAP) Data



HIPAA Privacy Rule – Deflection initiatives

- Challenges vary depending type of initiative
- Post-overdose outreach program; mental health co-responder and a CRS
 - Is OD victim info covered by HIPAA or can it be shared with/between response team members?
 - Does it make a difference if referral is LE or EMS?
 - What if outreach team wants to share information with family members?
 - Do they need to obtain permission from the OD victim beforehand?





HIPAA Privacy Rule - Resources

- Administrative Simplification Regulations (HHS; as of 2013)
- 45 CFR Part 164 SECURITY AND PRIVACY (LII/Cornell Law School)
- Summary of HIPAA Privacy Rule (HHS; last reviewed October 2022)
- HIPAA FAQs for Professionals (HHS)
- Information Sharing Scenarios (COSSUP Resources)
- Examples of Compliance Cases (HHS)
- <u>ODMAP and PHI under HIPAA</u> (LAPPA)
- Information Sharing in Criminal Justice Mental Health Collaborations (BJA)

42 C.F.R. Part 2 (42 C.F.R. §§ 2.1 to 2.67)

- Confidentiality of substance use disorder (SUD) treatment records
- Authority from 42 U.S.C. § 29odd-2
- Regulations first adopted in 1975 (prior to electronic records)
- Restricts the disclosure and use of SUD patient records which are maintained in connection with the performance of any part 2 program
- More straightforward and direct than HIPAA Privacy Rule
- Changes forthcoming in "near" future



42 C.F.R. Part 2 – Scenario analysis

Do I even need to bother with Part 2?

- Does the **record** identify a **patient** as having or having had SUD either directly or by reference to other info. or person? and
- Does the **record** contain info. obtained by a **part 2 program** for purposes of SUD treatment, diagnosis, or referral?

Does Part 2 permit disclosure w/o **consent**?

Is it practical to get patient **consent**?

Does state or local law pose a hurdle?

Generally, no



42 C.F.R. Part 2 – Patient, record, patient identifying info.

- <u>Patient</u> = individual who applies for or receives diagnosis, treatment, or referral for treatment for SUD at a part 2 program
- Record = any information, whether recorded or not, created by, received, or acquired by a **part 2 program** relating to a **patient** (e.g., diagnosis, treatment, and referral for treatment information, billing information, emails, voice mails, and texts)
- Patient identifying information (PII) = name, address, SSN, fingerprints, photo, or other information by which the identity of patient can be determined with reasonable accuracy

42 C.F.R. Part 2 – Part 2 program

- Part 2 program = [federally assisted] [program]
- Federally assisted = defined in 45 C.F.R. § 2.12(b)
- Program = one of the following:
 - Individual or entity holding itself out as providing SUD diagnosis, treatment, or referral for treatment
 - Identified unit within a general medical facility doing the above
 - Medical personnel /other staff in a general medical facility whose primary function is providing SUD diagnosis, treatment, or referral for treatment and who are identified as providers



42 C.F.R. Part 2 – Types of disclosures

- Disclosure without patient consent
- Disclosure with patient consent
- Court orders authorizing disclosure and use



42 C.F.R. Part 2 - Disclosure without patient consent

- Disclosure of PII may occur in three (3) situations:
 - By medical personnel, during bona fide medical emergency
 - Scientific research, if researcher meets specific requirements
 - During the course of an <u>audit or evaluation</u> of the **Part 2 program** that provided the treatment



42 C.F.R. Part 2 - Disclosure with patient consent

- Nine (9) required elements for consent, including:
 - How much, what kind, and explicit description of info.
 - Names/entities to which disclosure will be made
 - Purpose of disclosure
 - Patient's right to revoke
 - Date, event, or condition upon which consent expires
- Disclosure itself must be accompanied by notice to recipient that redisclosure is prohibited, absent further consent by **patient**



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42 C.F.R. Part 2 - Changes forthcoming (2023?)

- Required by Section 3221 of CARES Act (2020)
- NPRM published 11/28/2022; comments due 1/31/2023
- More closely aligns Part 2 with Privacy Rule
 - Permits use and disclosure of patient records based on a single patient consent given once for all future uses and disclosures
 - Permits re-disclosure of patient records in any manner permitted by the HIPAA Privacy Rule, with certain exceptions
 - Expands prohibitions on the use and disclosure of patient records in civil, criminal, administrative, and legislative proceedings
- LAPPA

New HHS enforcement authority

42 C.F.R. Part 2 – Decedents' records

- No expiration on protection of decedents' PII (unlike Privacy Rule)
- PII disclosable in two (2) circumstances:
 - PII related to patient's cause of death under laws: (1) requiring the collection of death or other vital statistics or (2) permitting inquiry into the cause of death
 - After consent by personal representative
- Personal rep. =
- (1) executor, administrator, or other personal representative
- (2) spouse, if no (1);
- (3) any responsible member of the patient's family, if no (1) or (2)



42 C.F.R. Part 2- Overdose fatality review (OFR)

• How can an OFR team obtain behavioral health records?







42 C.F.R. Part 2 – Deflection initiatives

- Post-overdose outreach program; mental health co-responder and a CRS
 - Are there any challenges to sharing the OD victim info with regards to 42 CFR Part 2?



https://ptaccollaborative.org/ptacc-suite/



42 C.F.R. Part 2 - Resources

- 42 C.F.R. Part 2 (LII/Cornell Law School)
- Proposed changes to 42 C.F.R. Part 2 (Federal Register)
- Information Sharing Scenarios (COSSUP Resources)
- Information Sharing in Criminal Justice Mental Health Collaborations (BJA)

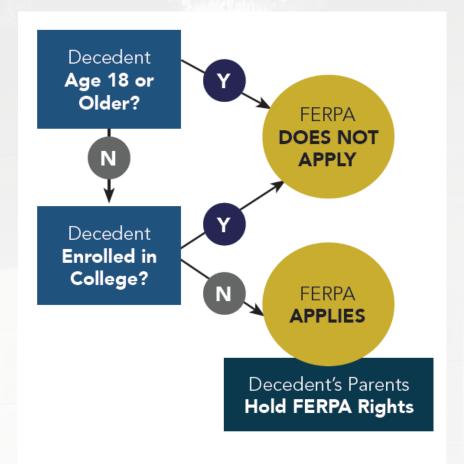


Family Educational Rights and Privacy Act (FERPA)

- Circumstances under which such records may be used and disclosed
- 20 U.S.C. § 1232g; 34 CFR Part 99
- Privacy rights of an "eligible student" lapse upon death
- Did the decedent's privacy rights in the records expire upon death?
- If not, does any individual hold the privacy rights from whom consent to disclose can be obtained?



Family Educational Rights and Privacy Act (FERPA)





Child Abuse Prevention and Treatment Act (CAPTA)

- 42 U.S.C. §§ 5101 to 5116i
- State may share child services records only to:
 - Individuals who are the subject of the report
 - Federal, state, or local governmental entities, that have a need for such information in order to carry out their responsibilities
 - * Child abuse citizen review panels and child fatality review panels
 - Grand jury or court, upon a finding of necessity
 - Other entities or classes of individuals statutorily authorized by the state
 - Public disclosure of the findings or information about cases that resulted in a child fatality or near-fatality

Key issues

- State privacy of health information provisions
- Open meeting and open records laws
- PDMP information
- Criminal justice information
- Access to death certificates
- Educational records (institution-specific)
- Persons to approach for more information



Key issues - State health information privacy laws

- https://www.health.ny.gov/regulations/hipaa/preemption_charts.htm (last revised August 2011)
- N.Y. Public Health Law § 18 ("Access to patient information")
- N.Y. Public Health Law § 18-a ("Disclosure of information")
- N.Y. Public Health Law § 2782 ("Confidentiality and disclosure" of HIV and AIDS related information)



Key issues - Open meeting and open records laws

• N.Y. Public Officers Law §§ 100-111 (open meetings law)

Effective: April 9, 2022

McKinney's Public Officers Law § 103

§ 103. Open meetings and executive sessions

Currentness

(a) Every meeting of a public body shall be open to the general public, except that an executive session of such body may be called and business transacted thereat in accordance with section ninety-five ¹ of this article.



Key issues - Open meeting and open records laws

• N.Y. Public Officers Law §§ 100-111 (open meetings law)

2. "Public body" means any entity, for which a quorum is required in order to conduct public business and which consists of two or more members, performing a governmental function for the state or for an agency or department thereof, or for a public corporation as defined in section sixty-six of the general construction law, or committee or subcommittee or other similar body consisting of members of such public body, or an entity created or appointed to perform a necessary function in the decision-making process for which a quorum is required in order to conduct public business and which consists of two or more members. A necessary function in the decision-making process shall not include the provision of recommendations or guidance which is purely advisory and which does not require further action by the state or agency or department thereof or public corporation as defined in section sixty-six of the general construction law.



Key issues - Open meeting and open records laws

• N.Y. Public Officers Law §§ 100-111 (open meetings law)

Not subject to OML. An advisory committee, task force or commission is not subject to the OML where it possesses no power and exists merely to provide advice and, therefore, is not a "public body" serving a governmental function. See Matter of Hayes v. Chestertown Volunteer Fire Co., Inc., 93 A.D.3d 1117, 941 N.Y.S.2d 734 (3d Dep't 2012) (private, not-for-profit corporation comprised of volunteer firefighters was not subject to OML); Goodson Todman Enterprises Ltd. v. Milan Town Board, 151 A.D.2d 642, 542 N.Y.S.2d 373 (2d Dep't 1989) (town zoning revision committee's function was purely advisory and did not involve exercise of sovereign power); Poughkeepsie Newspaper Division of Gannett Satellite Information Network et al. v. Mayor's Intergovernmental Task Force on New York City Water Supply Needs, 145 A.D.2d 65, 537 N.Y.S.2d 582 (2d Dep't 1989) (task force has no power on its own, and does not serve a governmental function); NYPIRG v. Governor's Advisory Commission, 133 Misc.2d 613, 507 N.Y.S.2d 798 (Sup. Ct. New York Ctv. 1986) (advisory commission is not subject to OML where it merely makes recommendations and was created by executive order); Snyder v. Third Dep't



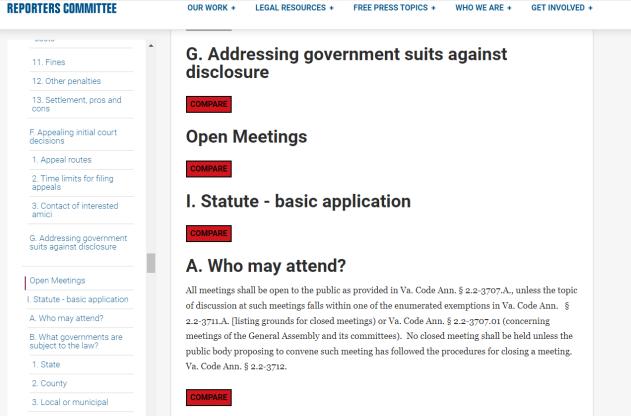
Key issues - Open meeting and open records laws

N.Y. Public Officers Law §§ 84-90 (freedom of information act)



Key issues – Resources

• Open Government Guide (RCFP) – open records and open meetings

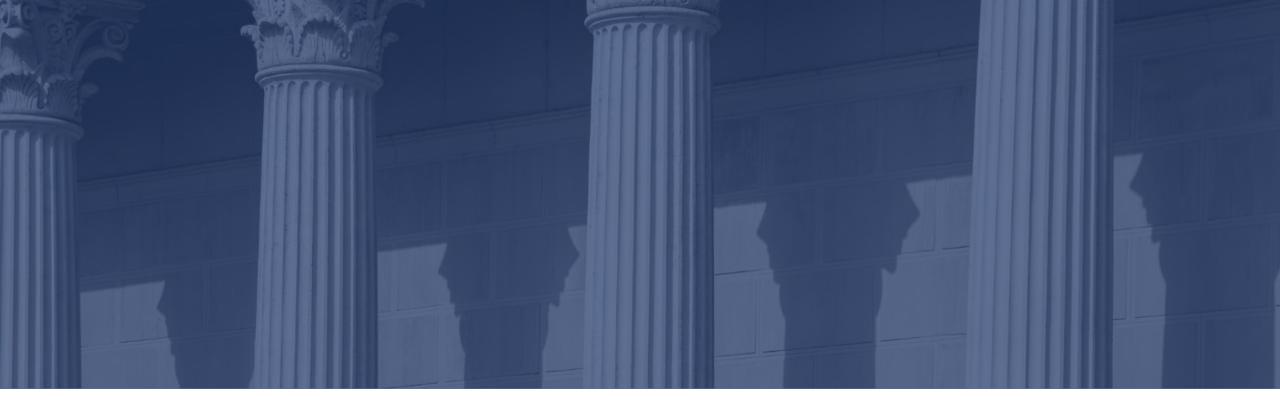




Key issues – Resources

- Open Government Guide (RCFP) open records and open meetings
- OFR Resource Library (COSSUP)
- <u>Deflection Library</u> (COSSUP)





QUESTIONS?

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