

CONFIDENTIALITY

Introduction

Privacy and trust in the doctor-patient relationship are critical components of quality health care and important for patients with psychiatric disorders, particularly for patients with substance use disorders. The stigma that is unfortunately associated with substance use disorders and treatment can cause harm to patients if their protected medical information is inappropriately disclosed. Release of this medical information can have a negative impact on a patient's reputation, career, and important relationships. It can also have serious implications regarding insurance and other legal matters. A renewed emphasis on policies protecting substance use information is needed for several reasons. The development of confidential medical information databases, expansion of computerized medical record keeping, and the increased exchange of information between various organizations, all substantially increase the risk that unauthorized release of confidential patient information may occur. There also have been recent examples of health care and law enforcement organizations exchanging confidential clinical substance use information, without the patient's consent, for a primary purpose of criminal prosecution of the patient. These current events all indicate that AAAP needs to continue to be a strong advocate for the protection of patient medical information from unauthorized release.

Policy Statement

Patients who share confidential substance use clinical information with health care providers must continue to be assured that this information will be protected from unauthorized release. Patients must retain the fundamental authority to decide whether or not their personal medical information is disclosed and must know to whom, for what reason and for what period of time their medical information will be released. Only the minimal information needed should be released and personally identifiable information should be released only when identity protected data is inadequate for the specific purpose. Existing and future federal and state regulations must insure that not only primary recipients, but also all secondary recipients protect the confidential medical information they receive from unauthorized release. Reliable systems must be put in place to track all subsequent secondary releases of the information with audit trails and penalties for all unauthorized releases enforced. Patient consent to release their medical information must always be fully informed, voluntary and non-coerced. The patient's right to revoke their permission to release information must be maintained and there must be a practical way to implement a revoked consent to release medical information. Parental access to the medical records of their children must be carefully scrutinized, the age and condition of the child considered, and when release allowed, limited to essential information. In such cases the clinician's opinion must be considered and the best interests of the child must prevail. Similar considerations must be made when issues of decisional competency to consent to release of medical information are decided. Identifiable patient information must not be released for commercial purposes, marketing, or fund raising.

Background

The basis for this confidentiality policy are the rights and protections recognized by U.S. Courts and the U.S. Congress which have consistently protected patients with substance use disorders through strong federal regulations and court decisions that have specific prohibitions to disclosure of information about either their disorders or their treatment without consent. (Title 42, Code of Federal Regulations, Part 2)

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