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July 9, 2008

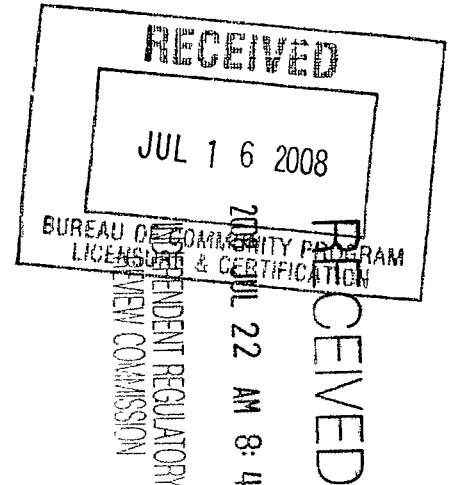
Ms. Janice Stalowski, Director
Bureau of Community Program Licensure
And Certification
Department of Health
132 Kline Plaza, Suite A
Harrisburg, PA 17104

Dear Director Stalowski,

Thank you for the opportunity to review and comment on the Draft Final Rulemaking for 4 Pa. Code § 255.5, Confidentiality of patient records and information.

I find the Draft Final Rulemaking to be troublesome and I respectfully and strenuously object to the content. Some of the reasons are as follows:

- Disclosing information from a patient record to a patient's employer to further the rehabilitation of a patient; or, to a prospective employer who affirmatively expresses that the information is sought to enable the employer to engage the patient as an employee; does nothing more than, in my opinion, place the patient in a double bind situation. There will be obvious financial pressures for some patients to acquiesce to giving consent, whether or not it is in the patient's best interest to do so. Recently I had the opportunity to speak with a patient in York, PA who relayed that his small-business employer had promised over the past year to provide benefits for him and his family. The patient reported that he was now told by his employer that because the patient has sought treatment for addiction it probably meant that the patient would never be able to get insurance coverage benefits.
- The Draft's proposed expansion of information that may be released to government officials and third party payers to obtain benefits or services due to the patient as a result of his drug or



alcohol abuse or dependence creates subjectivity in the decision making process. It expands the release of information that may be used to deny services for a relapsing disease. Are other medical conditions subject to the same review by government officials and third party payers for the patient to obtain benefits or services- such as stressors that may impact the recovery of a candidate for cardiac bypass surgery, or the diabetic patient facing a peripheral neuropathy induced amputation related to impaired coping skills affecting dietary compliance? What are the parameters to be used by third party payers in approving or denying benefits/services related to:

1. The patient's risk level for resuming substance use, abuse or dependence based on patterns of use, relapse history, existing relapse triggers and coping skills to maintain recovery.
2. The patient's social support system, environmental supports and stressors that may impact ongoing recovery.

An additional consideration is the qualifications of the third party payers who receive the expanded information. For example, are the reviewers qualified to interpret and make decisions based on the patient's vital signs, specific medical conditions to include pregnancy, specific medications and laboratory test results?

- Decisions regarding access to care, lengths of stays, and levels of care will be more heavily influenced by payers and case managers if the proposed rule making changes come about. The science, education and art of professionals practicing their specialty in the treatment of substance abuse and dependency deserve a greater voice in this crucial matter, on behalf of the patients they serve.

Thank you once again for the opportunity to review and comment on the Draft Final Rulemaking for 4 Pa. Code § 255.5, Confidentiality of patient records and information. I have attached a copy of my letter from January 10, 2008 in which I expressed support of 4 PA Code §255.5 as it presently stands.

Sincerely,

Roseann H. Mollica

Roseann H. Mollica BSN, RN, BC
Director, Quality and Nursing Services
CRC Health Group Northeast Region Recovery Division

cc: Joseph Procopio, CRC Health Group Regional Vice President-
Northeast Region Recovery Division

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Majority Chairman
Health and Human Services Committee
PA House of Representatives
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Representative George Kenney
Minority Chairman
Health and Human Services Committee
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