FAQ
Provider-Consent Tool

General and Regulatory Information

1. **What is the Consent Tool and why is it needed?**

The Consent Tool allows providers to register patient consent to share substance use disorder (SUD) treatment information protected under 42 CFR Part 2. While sharing of general health information through Rhode Island HIE is based on an "opt-out" model, SUD treatment information requires explicit, documented patient consent due to stricter federal protections.

2. **What is 42 CFR Part 2 and what does it require?**

42 CFR Part 2 is a federal regulation that provides extra privacy protections for SUD treatment information. This regulation:

- Requires explicit patient consent to share SUD treatment data.
- Allows a single consent for all future uses/disclosures for treatment, payment, and health care operations (TPO)
- Allows redisclosure by HIPAA-covered entities in accordance with HIPAA rules (once patient consent has been given).
- Participation is entirely voluntary; patients choose whether or not to give consent.
- Patients can revoke consent at any time.

3. **How does 42 CFR Part 2 differ from standard HIPAA rules?**

Part 2 provides stricter federal confidentiality protections specifically for SUD treatment records and generally requires explicit, written/digital patient consent before records can be shared, even for routine treatment or disclosures.

4. **What changed with the 2024 – 2026 updates to 42 CFR Part 2?**

The updated 42 CFR Part 2 regulations allow a single registered consent to authorize the sharing of all a patient's SUD treatment information covered by Part 2. This means that when a patient provides consent, the consent may apply to treatment records from multiple SUD providers involved in the patient's care, rather than only the provider obtaining the consent.

5. What SUD information is shared when a patient provides consent?

Information that may be shared can include:

- Treatment plans
- Medications
- Laboratory results
- Clinical notes
- Claims information
- Other relevant treatment information

Consent Tool Workflows and Usage

6. Who can use the Consent Tool and how is it accessed?

Access to the Consent Tool is provisioned by your organization's HIE Administrator. The tool can be accessed through the Rhode Island HIE Portal, or directly through your EHR.

- Each organization decides which members of their staff should be provisioned access to use the Consent tool.
- Organizations must ensure that staff who are given access to the Consent tool are properly trained on both the use of the Consent tool and the requirements of 42 CFR Part 2.
- Training materials are posted on rihie.org/for-organizations. Reach out to support@rihie.org if you have questions about staff training.

7. How do I register the patient's consent?

Search for the patient in the Rhode Island HIE or select their record in your EHR.

- When you have found the correct patient, select the Consent option:
  - If viewing from your EHR, the Consent Tool will be listed on the left side of the screen.
  - If viewing from the Rhode Island HIE Portal patient search, the available tools will appear as a pop-up when you click the patient record.
- Explain the consent options and answer any patient questions clearly before registering consent.
- Select the 42 CFR Part 2 SUD form and, after reviewing with the patient and/or their legal guardian, have them sign either electronically or on a paper form.
  - If capturing consent from a signed paper form, the provider must enter the details into the Consent Tool and attest that a signed form is on record.
- The provider completes all necessary attestations and submits the consent electronically from the Consent Tool.

8. **Who can provide or revoke consent on behalf of the patient?**

Parents, legal guardians, or other authorized personal representatives may provide or revoke consent when legally authorized to do so.

9. **What role does the provider play in finalizing the submission of patient consent?**

The provider must register their own legal attestations within the tool, input their name, and submit the consent after the patient (or their legal guardian) has signed.

10. **Does the patient's (or legal guardian's) signature need to be captured digitally?**

The patient or their representative can also sign a paper form and return it to the provider. In this case, the provider will still submit the consent digitally in the consent tool, and before submitting the consent they will attest that a signed paper form is on file.

11. **What are the provider's responsibilities during the Part 2 consent conversation?**

- Every Rhode Island HIE participating organization should have someone on staff who is provisioned access to and trained to use the Consent Tool.
- The provider must explain the scope of data sharing to the patient, educate them on what records are included and who can view them, and their right to revoke consent at any time. The provider should encourage the patient to ask questions and be open and honest in their responses. The patient should be provided with sufficient information (which may also include handouts or links to online resources) to make an informed decision about their Part 2 data.

12. **Does the provider need to retain paper documentation?**

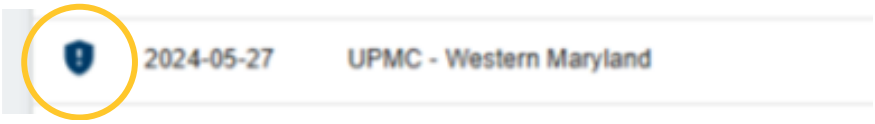
If the patient or their legal representative signs a paper copy of the form, the form must be kept on record, and the provider will attest to this when submitting consent in the Consent Tool.

13. **What happens if the patient does not consent to sharing their SUD data?**

By default, their SUD information will not be shared and will remain masked and hidden from view until a consent is registered.

14. How will providers know if a patient's SUD information is available to view?

When SUD data is available to view for a patient, a blue shield containing a "!" will appear next to their record in the Rhode Island HIE Portal, as shown below.



Consent Management, Expiration, and Revocation

15. When does patient consent captured in the Consent Tool expire?

When submitting the form, patients can designate a specific expiry date, or they can opt for the consent to not expire. If the patient chooses for consent to not expire, they still have the right to change or revoke that at any time.

16. What happens to SUD data already in the system if the patient revokes consent?

When consent is revoked, no future SUD information will be shared through the HIE and previously shared data will no longer be visible to HIE users. You may revoke your consent at any time by asking an authorized provider to log-on to Rhode Island HIE and deactivate the consent registration.

17. Can a patient revoke consent once it has been submitted?

Yes, patients have the right to revoke their consent at any time, for any reason. Upon request, any provider involved in the patient's care can deactivate the patient's consent directly in the Consent Tool. In the Consent Tool, select "Consent History," if multiple consents appear ensure you select the correct one and select "Deactivate."

18. How are providers viewing the data notified that SUD information is subject to Part 2 protections?

When SUD information is viewed, a federal warning notice is displayed stating that the information is protected under 42 CFR Part 2.

19. Can patients track when their information has been viewed in the HIE?

Patients can request an "accounting of disclosures" which shows which providers have accessed their information, and when. Information can be found here: https://www.rihie.org/for-patients/