Emergency Department ED Case Study

The Case:
A 42 y.o. man presents to an emergency room with signs and symptoms highly suggesting of a heart attack. He admits that he has a history of alcohol and drug dependency but is evasive about his recent use. He states he “received treatment” for his drug dependency in the past at a “drug clinic.”

The emergency department treating the patient is part of a comprehensive health information exchange program. They do not receive information from drug and alcohol treatment facilities but (unless the patient has opted out) they do receive information that includes comprehensive medical histories from acute care hospitals and ambulatory practices that would, in the course of collection, disclose treatment in such facilities and the outcome of such treatment. They also receive prescription medication information that may disclose drugs associated with alcohol or drug dependency.

The Hospital has mandatory reporting requirements for public health purposes. Like other states the list is long.¹

In addition, the Hospital participates in the New Dawn Project that collects data on drug-related complications where all charges and cases are audited in emergency departments and medical examiners’ offices.

Questions:

- Can a patient’s “opt out” of the regional exchange process prevent their inclusion into the New Dawn or other reportable disease processes²?
- Do state laws pre-empt any of the federal reporting requirements?
- If a patient has “opted out” of the regional exchange but the ED is obligated to be comprehensive and report the data, should the patient be informed?
- Is participation in DAWN permitted under HIPAA?
- What other regulations apply to such initiatives?
- Must institutions sign data-sharing agreements to participate in this effort?
- What about similar efforts involving pay-for-performance?
- What about registries and other resources that require anonymous data. Must they be handled separately through a data-sharing agreement?

Background

About the New Dawn Project:

New Dawn is a voluntary project that studies all types of drug-related emergency department (ED) visits and medical examiner- or coroner-reported deaths. Dawn field agents review 100% of files but follow collection limitation principles and collect data only on those drugs, events, and other items that are directly relevant to the agenda of the DAWN project. Participation is voluntary. Reporters review charts and submit on-line reports to a commercial vendor. This information is kept in a highly secure web site.