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TO: BSAS LICENSEES, PROVIDERS, AND STAKEHOLDERS

FROM: DEIRDRE CALVERT, DIRECTOR, BUREAU OF SUBSTANCE ADDICTION SERVICES

SUBJECT: UPDATES TO REGULATIONS 105 CMR 164.305 – REQUIREMENTS RELATED TO CENTRAL REGISTRY SYSTEM – OPIOID TREATMENT PROGRAMS

DATE: NOVEMBER 11, 2022

The purpose of this document is to issue guidance to all providers licensed/approved, otherwise referred to as “providers,” by the Massachusetts Department of Public Health’s (DPH) Bureau of Substance Addiction Services (BSAS) regarding compliance with new requirements for the use of the Central Registry System in BSAS’ regulation for *Licensure of Substance Use Disorder Treatment Programs*, 105 CMR 164.000.

BSAS recognizes that each situation has its unique facts and circumstances and encourages stakeholders with specific questions to contact your Regional License Inspector: <https://www.mass.gov/service-details/information-for-licensed-substance-use-disorder-treatment-programs>

Amendments to 105 CMR 164.305 now require all Opioid Treatment Programs (OTP) to participate in the Central Registry System. **The Department has issued a blanket waiver allowing providers 90-days to fully implement the Central Registry System from the date of regulation promulgation.**

This guidance seeks to inform providers of changes to the regulation and point them to particular sections relevant to this topic. BSAS encourages all providers to review the updated regulation in its entirety, which may be found at the following link: <https://www.mass.gov/regulations/105-CMR-16400-licensure-of-substance-abuse-treatment-programs>

Introduction

105 CMR 164.305 now requires all Opioid Treatment Programs (OTPs) to participate in the Central Registry System. The purpose of the Central Registry System is to expedite the admission process by verification of medication and dose, prevent a patient’s simultaneous enrollment in more than one OTP, facilitate disaster response, allow access to treatment during emergencies throughout the State, and

ensure accurate data reporting and dispensing of medication in accordance with state and federal laws and regulations.

Implementation & Training

OTPs are expected to work directly with the Central Registry System vendor, Light House, to ensure the full implementation of the Central Registry System, which includes all requirements in 105 CMR 164.305. For information on accessing the Central Registry System and/or Light House, please contact Opioid Services Coordinator, Michael Gurney (Michael.Gurney@mass.gov) and/or Light House (support@thecentralregistry.com or 626-239-8245).

Each OTP must sign all appropriate agreements between itself and Light House to ensure the confidentiality of the patient information and to prepare for implementation of the Central Registry. OTPs must provide signed patient consent forms to Light House to access patient data. Templates for these forms are available through the Department.

In addition to the Program Director, OTPs must identify two other employees who will have access to and be trained on the use of the Central Registry System. These identified employees must participate in specific user training from Light House and this should be documented in the personnel file. Light House maintains an array of live and recorded trainings (Light House Training) for user support and training. Additionally, general orientation training on the Central Registry must be provided to all staff and documented in the staff's personnel files. The Program Director must timely report any changes related to who can access the Central Registry System.

Policy & Procedures

OTPs must create policies to ensure compliance with all state and federal laws governing the collection of patient identifying information. OTPs may disclose information to other OTPs participating in the Light House Central Registry System, provided that the patient has consented to enrollment in the Central Registry System or has signed a specific authorization to release information.

Upon admission, OTPs must inform all patients of the program's participation in the Central Registry System. The program must obtain the patient's written consent for participation. The Patient Handbook and Patient Orientations must be updated to provide patients education about the Central Registry System. Education of patients must be documented in the patient record.

As a part of the admission process for a new patient, the program must complete a multiple/dual enrollment verification through the Central Registry System. This verification must be documented in the patient record.

OTPs may not deny a patient access to treatment should the patient refuse enrollment in the Central Registry System, however BSAS hopes that all OTPs will encourage, through clinical conversations, participation in the Central Registry System by explaining all of the benefits of participation. These clinical conversations must be documented in the patient record.

All OTPs must create policies and procedures should a patient refuse consent to participate in the Central Registry System. OTPs must develop policies that ensure that the OTP tracks patients that choose not to participate in the Central Registry System. The OTP must issue protocols for dual

enrollment verification, disaster response, and communication for those patients who will not receive the benefit of the Central Registry System disaster management response.

OTPs must document in each patient record that a patient did or did not consent to participate in the Central Registry System. If a patient does not consent, the documentation must include evidence of orienting the patient on how to receive disaster response information and updates.

All Hazard and Emergency Preparedness Planning and Procedures

All OTPs should include the use of the Central Registry System in the All Hazard and Emergency Preparedness Planning and Procedures planning policies to ensure patient access to care, accuracy, and efficiency in dosing services during an emergency.

OTPs must update the All Hazard and Emergency Preparedness Planning and Procedures plan to include the Central Registry System for those who participate in the Central Registry System and patients who decline to participate.

Resources

- [Forms, resources, and regulations related to BSAS-licensed Alcohol & Drug treatment programs](#)
- [Code of Federal Regulations Substance Abuse and Mental Health Services Administration Center for Substance Abuse Treatment 42 Part 8](#)
- [MA Department of Public Health Drug Control Program](#)
- [Drug Enforcement Administration](#)
- [Federal Guidelines for Opioid Treatment Programs](#)
- [SAMHSA TIP 63: Medications for Opioid Use Disorder](#)
- [SAMHSA TIP 34: Disaster Planning Handbook for Behavioral Health Service Programs](#)