alameda county behavioral health

MENTAL HEALTH & SUBSTANCE USE SERVICES

- MEMORANDUM –

DATE: October 10, 2023

TO: Alameda County Behavioral Health (ACBH) Specialty Mental Health Service (SMHS) and Drug Medical Organized Delivery System (DMC-ODS) providers

FROM: Torfeh Rejali, Quality Assurance Division Director

SUBJECT: **Application Programming Interface (API)- New Requirement and CG Enhancements**

The purpose of this memo is to notify providers of a new requirement by the Department of Health Care Services (DHCS), established in BHIN 22-068, for Behavioral Health Plans (i.e. Mental Health Plan and Drug Medi-Cal Organized Delivery System) to implement and maintain secure, standards-based Patient Access and Provider Directory Application Programming Interfaces (APIs). This requirement will allow compliance with the Centers for Medicare and Medicaid Services (CMS) Interoperability and Patient Access Final Rule which seeks to establish beneficiaries as the owners of their health information with the right to direct its transmission to third-party applications.

The first set of DHCS data demonstrating compliance with this requirement is due on July 31, 2025 for Quarter 2, 2025 (4/1/25-6/30/25).

Background

Currently beneficiaries or their legal representatives must submit appropriate forms to obtain a copy of their behavioral health records or have copies sent to another facility. This allows behavioral health providers to review the notes in advance of the release and redact any notes that in their clinical judgement might cause significant harm to the beneficiary or another person prior to release.

With the roll out of API, beneficiaries will have the ability to access their health records in digital form, without the need to make a formal request, for dates of service on and after January 1, 2016. This includes *available* beneficiary demographics/ information, billing and claims, and clinical notes (procedure note, progress note, consultation note, history and physical, discharge summary, assessments, care plans, treatment goals, problems lists), labs and other clinical data[1]

Required DHCS Timelines and Deliverables

March 1, 2024:

Evidence of implementation of Patient Access API requirements to include the following:

- API Policy and Procedure document (to be developed by ACBH)
- Publicly accessible link or web URL where the Patient Access API Documentation is located

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[1] United States Core Data for Interoperability (USCDI) | Interoperability Standards Advisory (ISA) (healthit.gov)

- Link to the BHP's publicly accessible member educational resources

Quarterly deliverables starting Q2 2025 (Data for 4/1/2025-6/30/2025 will be due on July 31, 2025):

- Utilization metrics for the Patient Access API:
  - Total API pass and error rates
  - Count of Unique API Consumers making API requests
  - Count of Third-party Applications registered with the API

ACBH Approach

ACBH has established a phased approach for this implementation. The first phase, starting in October 2023, includes provider communication and training as well as launch of a new *Potential Harm* field in Clinician's Gateway.

Additional information will be shared at each phase, up to the launch of the API Patient Access in 2025, when beneficiaries will be provided with information and log-ins to access their records digitally.

Clinician's Gateway (CG) Potential Harm Field

ACBH has enhanced CG to allow clinicians to restrict access to a note that they believe might cause substantial harm to the patient or another person. The field titled Potential Harm will allow the author of a note to block its release by identifying the specific reason for restriction from a drop-down menu. Additionally, clinical supervisors within agencies can submit a request to ACBH Information Systems to obtain permission to alter the Potential Harm flag in cases where the author of the note is no longer with the agency and the clinical circumstances have changed requiring the note to be restricted or unrestricted.

Restriction of notes is only allowed in certain, established circumstances and should be extremely rare. Additionally, in some cases consumers have the right to request review of the note restriction.

Concise, professional documentation, focused on documenting the minimum necessary information to accomplish the purpose of the note is critical to reducing the need for restriction of notes. Please see the training section of this memo for upcoming trainings on the Potential Harm field and Documentation Best Practices. The Potential Harm field will be launched following the training.

Providers using their own Electronic Health Records (EHR)

If your agency does not utilize Clinician's Gateway, you will need to familiarize yourself with the new requirements and implement API Patient Access and reporting capabilities by the due date. Specifically, please make note of the following ACBH and DHCS requirements related to this initiative:

- Develop functionality to allow digital access to health records dating back to January 2016
- Develop a procedure for restricting notes when needed [2]
- Develop a process for tracking unique beneficiary/legal representatives making API requests

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[2] 45 CFR § 164.524 - Access of individuals to protected health information. | Electronic Code of Federal Regulations (e-CFR) | US Law | LII / Legal Information Institute (cornell.edu), CFR-2011-title45-vol1-sec164-524.pdf (govinfo.gov)

- Develop a process for completing and tracking beneficiary/legal representative requests for review of a note restriction [2]
- Track the following Patient Access API utilization metrics for quarterly reporting to ACBH and/or DHCS starting Q2 2025:
  - Total API pass and error rates
  - Count of Unique API beneficiary/legal representatives making API requests
  - Count of Third-Party Applications registered with the API
  - Count of beneficiary/legal representatives requesting review of a note restriction and outcome of those inquiries

Training

ACBH Quality Assurance will be facilitating the following training programs to support providers with this initiative:

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Application Programming Interface (API) and CG Potential Harm Field
Wednesday October 25, 11:00-12:00

Facilitated by: ACBH Information Services and Quality Assurance

https://attendee.gotowebinar.com/register/7205250763911244117

The training will be recorded and posted on the QA Training page

Documentation Best Practices
Wednesday November 1, 10:00-11:00

Facilitated by: ACBH Quality Assurance

https://attendee.gotowebinar.com/register/9051220836204587096

The training will be recorded and posted on the QA Training page

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Support and Resources

For questions, please contact QATA@acgov.org.