Memo

Date: October 2, 2024

To: Alameda County Behavioral Health Department (ACBHD) Specialty Mental Health Services (SMHS) and Drug Medi-Cal Organized Delivery System Providers

From: Torfeh Rejali, Division Director, Quality Assurance (QA)

Subject: Application Programming Interface (API) Status Update

The purpose of this memo is to provide a status update regarding the API implementation. **The information in this memo applies to ACBHD SMHS and DMC-ODS providers who use Clinician's Gateway (CG) for clinical documentation.**

This is a follow up to ACBHD memo 2024-07 that was published in February 2024.

Background

In BHIN 22-068, titled Interoperability and Patient Access Final Rule, Department of Health Care Services (DHCS) established a requirement for behavioral health plans to implement a secure Patient Access and Provider Directory Application Programming Interface (API) allowing members[1] to access their clinical records dating back to 2016 and ACBHD provider directory using a digital device.

Although ACBHD as the Behavioral Health Plan is required to create this capability for CG, providers with their own Electronic Health Record (EHR) are not required to create their own API.

Status Update

ACBHD has completed building the required API functionality and added a new page to the ACBHD Public website titled Digital Access to Health Information. Details related to using a third-party application to access clinical records in CG and the Provider Directory are published on this page, as well as educational materials for members related to protecting their health information.

At this time, ACBHD is not aware of any third-party applications that can be used to allow access to CG clinical records and ACBHD Provider Directory. Therefore, although the information is posted, members will likely not be able to access the information digitally until a third-party application has been identified.

Once a third-party application is identified, members will reach out to providers directly for their Activation Codes, that are available in CG. Until that time, if this information is requested, please direct members to the Health

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[1] The term "member" includes the member's authorized legal representative

[Records Request](#) page of the ACBHD public website for information on how to request a hardcopy of their clinical records and to the online [Provider Directory](#) for a list of ACBHD providers.

Next Steps

To prepare for this transition, providers are advised to do the following:

- With digital access, unlike hardcopy requests of records, there is not the opportunity to redact any of the records once an Activation Code is generated. Therefore, providers are advised to continue to utilize the CG Potential Harm Field to restrict a note from view if it is believed that the note would cause significant harm to the member or another individual. There are strict rules about note restriction and protocols for appealing those restrictions. Please review the recorded ACBHD training titled *Application Programming Interface (API) and CG Potential Harm Field* on the [QA Training](#) page for more information.

- To minimize the need for note restriction, providers are advised to train their teams on documentation best practices. A recorded ACBHD training titled *Documentation Best Practices* on the [QA Training](#) page provides helpful information and tips.

ACBHD Quality Assurance division will facilitate a training to review the API process in detail in the coming months. Training dates will be shared once they become available.

Other Resources

ACBHD [Interoperability and Patient Access Policy](#)

Support

Providers are invited to join monthly QA Brown Bag meetings where this and other relevant information are discussed. Meeting details and link can be found on the [QA Training page](#).

For questions, please contact QATA@acgov.org.