



SPECIAL TOPIC ASK QM WEBINAR

GUIDELINES FOR PROVIDING HYBRID SERVICE DELIVERY & CLIENT RECORDS, LIMITS OF CONFIDENTIALITY, AND HEALTH INFORMATION EXCHANGE

Presented By the BHRS Quality Management Team
NOVEMBER 17, 2021

TODAY'S TOPICS

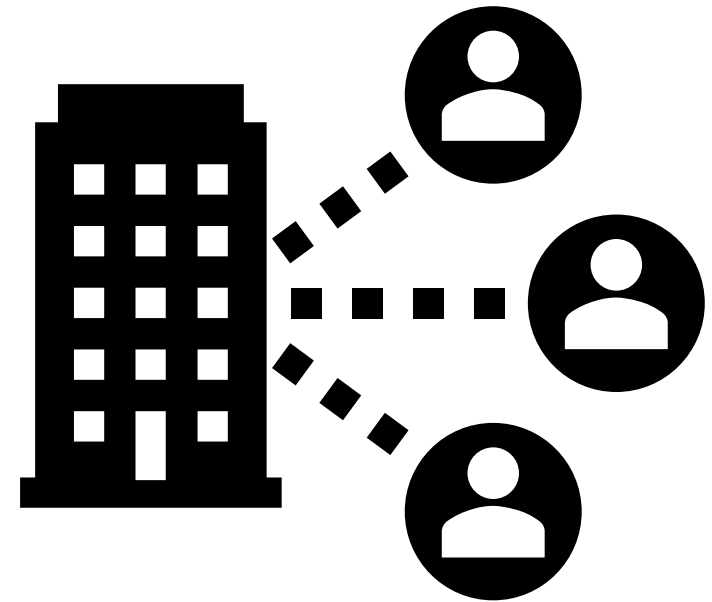
Guidelines for Providing Service In-person and Remotely

Client Records, Limits of Confidentiality, and Health Information Exchange

Informed Consent & Your Role



Guidelines for Providing Service In- person and Remotely



EMAILING/ TEXTING CLIENTS

- May be used to communicate with clients in some cases but should NOT be used as the platform to provide therapy sessions.
- Client consent must be gained in advance of emailing clients. Review risks, limits, and benefits of email.
- It is best for **non-sensitive information, such as to schedule appointments.**
- Use **secure email through your county email address** (include **#sec#** in the subject line of the email to encrypt the email.)
- Follow the guidelines in the **cell phone agreement** regarding appropriate use of cell phone and text messaging with client.



SIGNATURES ON DOCUMENTS



Consents & Tx Plans:

Meet in-person whenever possible.

- When completing consent forms and treatment plans, you should get the client's wet or electronic signature whenever possible.

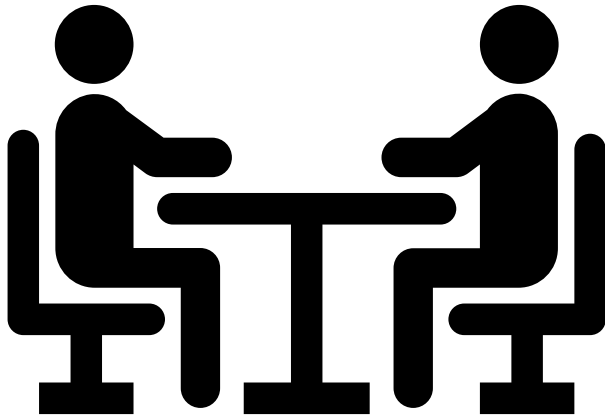
Verbal consent is still OKAY.

- If you are only able to get **verbal consent**, you should still complete the form. Document the client's verbal consent on the form itself AND in a progress note and briefly explain why a signature could not be obtained.

You will NOT need to go back after the PHE (Public Health Emergency) to obtain signatures on treatment plans and consents if you obtained/documented verbal consent during the PHE.

Use the Avatar Consent form if you are an Avatar user.

ASSESSMENTS AND TREATMENT PLANS



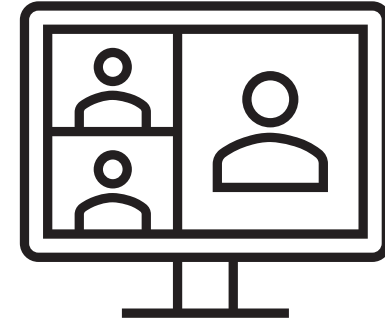
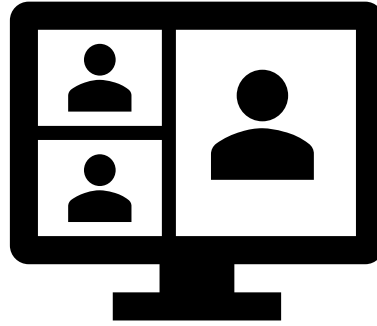
For now, the full assessment may be completed:

- in-person
- via video conferencing
- or over the phone

***Note: This may change. If there is a change, QM will inform you of any changes.

Best practice for assessments is to meet with the client in-person *when possible and clinically appropriate.*

TELEHEALTH PLATFORMS



- For **BHRS Staff**, the only telehealth platforms that will be authorized after December 31, 2021 will be:
 - Microsoft Teams (County account)
 - Doxy.me (County account)
 - Zoom for Healthcare (County account; accounts will be available soon)
- FaceTime will no longer be an approved platform.
- **Contract Agencies** must have a version of their telehealth platform that includes a Business Associates Agreement in their contract.

RESOURCES

Guidelines for Providing Hybrid (In-Person and/or Remote) Service Delivery Documentation Guidance Updated 9.23.21

- replaces the COVID-19 Documentation Guidelines

[Link to Telehealth Resources for Clients](#)

[Consent Forms and Client Consent Form Scripts](#)

Additional Remote Services resource for BHRS Youth staff: Virtual Toolkit - contact etsujii@smcgov.org

Guidelines for Providing Hybrid (In-Person and/or Remote) Service Delivery

Updated 9/23/2021

Support Services

Got a question for QM? Email: HS_BHRS_ASK_QM@smcgov.org

For county staff needing technical assistance with phone or telehealth applications (MS TEAMS, doxy.me, etc.)

- Submit a service request through "Service Now" in OKTA or
- Call (650) 573-3400.

Additional Resources are available at the end of this document.

About this Document

This document is replacing the COVID-19 Documentation Guidelines. Moving forward, please follow the instructions and resources provided in this document as BHRS moves to providing a hybrid of in-person and remote services.

When determining whether or not to see a client in-person or via phone or via telehealth, consult with your supervisor to determine which mode of service delivery is clinically appropriate for your client.

[Documentation Guidelines](#) [Information Specific to Remote Services](#) [Resources and Guides](#)

Information about Travel Time when Working from Home

You **MAY** bill travel time from your home office to your client's home, as long as the distance/time is reasonable.

- For example, if the distance between your home office and your client's home is roughly the same as the distance between your county/agency office and your client's home, you may bill for the time.

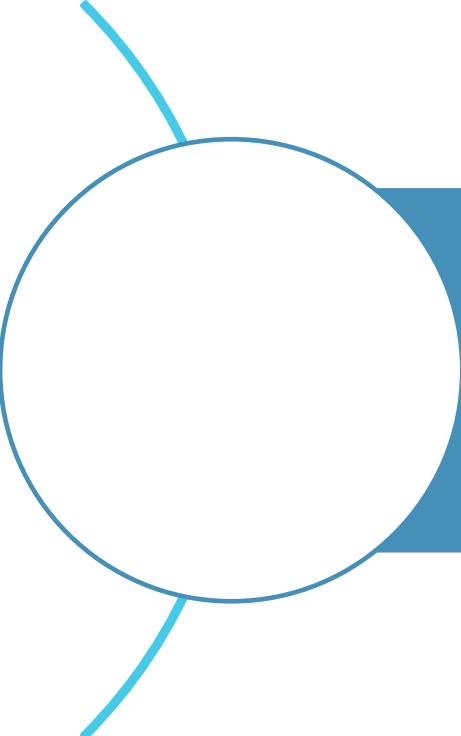

You **CANNOT** bill for travel time from your home office to your main office. This is the case whether or not you are traveling to the main office for administrative tasks (e.g., printing documents, submitting paperwork, etc.) or for providing direct services to a client. In both scenarios, you would not bill for travel time, but could put the travel time in non-billable time.

Emailing/Texting Clients

Email and Text may be used to communication with clients in some cases but should **NOT** be used as the platform to provide therapy sessions.

- It is best to use email and text to communicate non-sensitive information, such as to schedule appointments.
- Use secure email through your county email address (include #sec# in the subject line of the email to encrypt the email.) whenever you email a client, even if you are sending a blank form or links to community resources. This is to ensure that if the client does respond, they are able to do so through the secure server.

Follow the guidelines in the cell phone agreement regarding appropriate use of cell phone and text messaging with client. Phone therapy sessions should be conducted over phone audio, and not via phone text message.



Client Records, Limits of Confidentiality, and Health Information Exchange

LIMITS TO PROTECTED HEALTH INFORMATION

SHARED UNDERSTANDING
OF
CURRENT
INFORMATION
SHARING PRACTICES
AND INFORMED
CONSENT

Circle of Sharing Mental Health Client Information

NO ROI (RELEASE OF INFORMATION CONSENT) IS NEEDED

This is covered by **Informed Treatment Consent: Treatment, Payment, & Operations**



Medical Center EMR
BHRS staff, County Health, Aging & Adult, FH, Correctional Health, Medical Center & Clinics

Soarian® Clinicals

User name
pink1195


Password

Change Password

Login ? Help



Other County Systems
Correctional Health,
jail Bookings



**SMC Connected Care
HIE - Prod**

HIE (Health Information Exchange)
All BHRS staff, All county Health, Aging & Adult, FH, Correctional Health, Medical Center & Clinics

**myAvatar™
Netsmart**

BHRS EMR
People with AVATAR access, some HPSM staff, most BHRS staff, many BHRS contractors, some Medical Center Staff: PES, 3AB, Health Van, some PCP/NP from the clinics, some FH, some correctional health staff.

CURES



**HealthPlan
OF SAN MATEO**
Healthy is for everyone

Medicare



**Outside the green box
NEED CONSENT TO SHARE**

- Family
- Friend
- Probation
- Social Security
- Housing
- Past providers
- Schools
- Education
- Jobs
- Banks
- Courts
- Police (unless 5150 or crime at facility)
- Food bank

**Outside the green box
BHRS WILL SHARE
WITHOUT CONSENT IF
NEEDED**

- Police for 5150 & illegal activity on site
- Mandated Reporting- CPS/APS

BHRS shares Client Protected Health Information regularly with other parts of San Mateo County:

- HPSM – Health Plan of San Mateo
- SMMC – San Mateo Medical Center
- AAS - Aging & Adult Services
- FHS - Family Health
- CHS- Correctional Health Services
- PHPP (WPC/Bridges to Wellness) - Public Health, Policy and Planning

Data is used for:

- Treatment
- Shared understanding for clients that are being served within Health Plan
- Research and Evaluation
- Grant funding (we remove names and any other identifiable information)
- Supporting clients in vulnerable areas
- Identifying outreach efforts
- Auditors

TODAY'S TOPICS



Informed Consent & Your Role

INFORMED CONSENT MEANS EXPLAINING THE LIMITS OF CONFIDENTIALITY

-
- Explaining that the treatment team has a **circle of support staff that we share information** with, to allow for the best care possible. These are trusted people that must protect the information about clients shared with them and are required to follow all the same rules regarding PHI as clinical staff.
 - The process of **explaining the limitations and advantages** of our services, and sharing of information, is **informed consent**.
 - Don't over-promise. **We will not limit needed sharing for billing, operations, mandates, and current treatment.**
 - **It is not appropriate to agree to NOT share information with prescribers.** This is not in the best interest of clients.
 - **Current treating health care providers do not need an ROI to share information.** All current providers with access to the HIE would automatically have access to the client's information that is inputted from these EHRs into the HIE.
 - **Best practice** is to *inform your client of if/when you are in contact with other treatment providers* about your client's care and to ensure that the individual requesting information is who they say they are.

NOTICE OF PRIVACY PRACTICES (NPP)



San Mateo County Health System, Behavioral Health and Recovery Services

NOTICE OF PRIVACY PRACTICES SUMMARY

Behavioral Health and Recovery Services values your privacy and will protect behavioral health information about you or your child. The complete **Notice of Privacy Practices** tells you in detail about how we safeguard your behavioral health information to make sure only the minimum amount of information is used or disclosed to individuals with a legal right to access or read your behavioral health information. PLEASE REVIEW IT CAREFULLY.

"Use" means the sharing and using of information by behavioral health staff.

"Disclosure" is the release of information by us to others outside of Behavioral Health Services.

"Authorization" is you giving us written permission to release your information to you or to other persons.

By law, you have the legal right to:

- Be given this written notice explaining how Behavioral Health and Recovery Services will use and disclose your information
- See your records and get a copy of them, with a few exceptions
- Ask to correct or add to your behavioral health records
- Find out, in writing, where we disclosed your health information
- Authorize the release of your own health information; behavioral health may release information needed for treatment, payment or our own business operations without your authorization

The Notice will tell you:

- How to ask Behavioral Health and Recovery Services about seeing your chart, getting a copy, making changes or releasing your information.
- How we will respond to any of your requests.
- How to make a complaint about the use or disclosure of your Protected Health Information. It will tell you how you may complain to Behavioral Health and that you may also complain to the Secretary of Health and Human Services.

San Mateo Behavioral Health and Recovery Services pledges that we will follow this Notice. It will be posted at all Behavioral Health sites, and if any part of it changes, new notices will be available.

If you have any questions about your privacy rights, please contact:

Office of Consumer and Family Affairs at 1-800-388-5189

- Required for all new clients.
- **Sample Script:** "BHRS is requesting your consent to receive behavioral health services, which may include case management and medication support services (only if you agree to medication support services). Are you agreeing to receive services from BHRS?"

I will provide you with a detailed notice of our privacy practices. Please let me know if you have any questions after you review it.

We are required by law to make sure that behavioral health information that identifies you is kept private. We are required to give you this notice of our legal duties and privacy practices with respect to behavioral health information about you. BHRS will follow the terms of the notice. BHRS will share your information as mandated by law, and for treatment, payment, and our daily health care operations (such as quality review)."

- NPP Policy and Forms: <https://www.smchealth.org/bhrs-doc/notice-privacy-practices-03-02>
- Clients can access the NPP anytime directly from the BHRS [Client and Family Welcome Page](#).

YOUR ACTION IS NEEDED...

To Know

Know the amount of sharing of clients' PHI that occurs.

Understand that many systems and people may have access to clients' PHI for payment, treatment, and operations.

To Inform

Inform your client of the limits to the protection of PHI.

This is true informed consent.

To Understand

ALL PROGRESS NOTE WRITERS:

Understand what amount of detail should and should not be in progress notes and other documents.

Write Progress Notes, NOT Process Notes.

To Know the Future

Client will have access to their charts (including progress notes, assessment, tx plans) in the next few years.

Progress notes will be included in the HIE in the future.

CAN CLIENTS LIMIT THE SHARING OF PHI WITH OTHER SYSTEMS?


EHR	Can Sharing Be Limited
Avatar	<p>BHRS will block a current Avatar user from their chart, the chart of a family member, or friend, from the site that they work at if they are also a client, upon request.</p> <p><u>Staff Request to Block Chart</u></p>
eCW - "eClinical Works"/Sorion	<p>Can we ask SMMC to not include the PHI that we share with them in their progress notes, etc.? No, that is not appropriate. When we share information with providers, they may include this in their charts/progress notes.</p>
HPSM	<p>This information is shared for all clients; there is no way to block this sharing.</p>
CURES	<p>There is no way to block this sharing.</p>
SMC Connected Care - HIE (Health Information Exchange)	<p>The client may request to "opt out".</p> <p><u>Opt Out Form</u></p>
DHCS/Medicare/Private Insurance/other Payors	<p>The client may not agree to billing private insurance by not signing the Assignment of Benefits. (However, this may mean that we cannot serve the client.) Information is still shared with DHCS.</p>

REQUEST RESTRICTIONS

CONFIDENTIAL PATIENT INFORMATION: See California Welfare and Institutions Code Section 5328

San Mateo County Behavioral Health Services

Request for Special Restriction on Use or Disclosure of Protected Health Information



Date _____
Name _____ Date of Birth _____

I understand that San Mateo County Behavioral Health Services may use or disclose my protected health information for the purposes of treatment, payment and health care operations.

I hereby request a restriction on San Mateo County Behavioral Health Service's use or disclosure of my protected health information.

The information I want limited is: _____

I want to limit:

- Mental Health's use of this information.
- Mental Health's disclosure of this information
- Both the use and the disclosure of this information.

I understand that San Mateo County Behavioral Health does not have to agree to my request. I also understand that I have the continuing right to request restrictions on my protected health information when I sign an authorization to release information, say, to a family member.

I understand that San Mateo County Behavioral Health is required to share the information in the following circumstances:

- During a medical emergency if the restricted information is needed to provide emergency, Mental Health Services will tell the recipient not to use or disclose it for any other purposes.
- For certain public health activities.
- For reporting abuse, neglect, domestic violence or other crimes.
- For health agency oversight activities or law enforcement investigation.
- For judicial or administrative proceedings.
- For identifying decedents to coroner and medical examiners or determining a cause of death.
- For certain research activities.
- For workers' compensation programs.
- For uses or disclosures otherwise required by law.

For more information about your privacy rights, see the "Notice of Privacy Practices" available on our website at www.co.sanmateo.ca.us, or at the clinic where you are receiving services OR by sending a written request to San Mateo County Behavioral Health, 225 37th Avenue, San Mateo, CA 94403.

If you believe your privacy rights have been violated, you may file a complaint with Behavioral Health or with the Secretary of the Department of Health and Human Services. To file a complaint with Behavioral Health, contact the Office of Consumer and Family Affairs at 800-388-0101. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

Signature of client or representative _____

If representative, give relationship _____

The client has the right to request a restriction or limitation of the behavioral health information we use or disclose about their treatment.

- BHRS is not required to agree to the request to limit sharing with other providers or for payment.
- BHRS will agree to restrictions regarding sharing with family and friends, and with non-treatment agencies (e.g., educational partners or Probation).
- *Client must make the request in writing.*

BHRS Request Restrictions form can be found here: <https://www.smchealth.org/bhrs-doc/restrictions-use-or-disclosure-protected-health-information-phi-client-request-03-08>

WHAT DO I NEED TO KNOW ABOUT THE HEALTH INFORMATION EXCHANGE (HIE)?

- **BHRS webpage with FAQs about the HIE:** <https://www.smchealth.org/post/faqs>
- **How clients can opt out of the HIE (opt out form is located at the bottom of this page):**
<https://www.smchealth.org/connectedcare>
- **Important information about opting out of the HIE:**
 - Opting out of the HIE does NOT mean that the client is able to **prohibit other treatment providers from accessing their medical records.** Current providers can still obtain medical records through other means without client consent. It just means that they won't be able to access the records through the HIE.
- **What information can be seen in the HIE?**
 - Medications, lab results
 - Appointment dates and provider names
 - Currently, mental health progress notes are NOT included in the HIE

WHAT DO I NEED TO KNOW ABOUT THE HEALTH INFORMATION EXCHANGE (HIE)?

■ What does it mean to “Break the Glass” in the HIE?

- *Break the Glass* means that a provider who did not have access to the client’s files in the HIE accessed the client's HIE records due to an emergency circumstance. (*Break the Glass* may only be used for a medical emergency by PCP/ER.)
- The HIE keeps a record of all access to the client’s records and provides alerts to the administrator when an HIE chart is accessed using the *Break the Glass* feature. You should only access the HIE for clients on your caseload. If you need to access a client’s chart (that is NOT on your caseload) through the HIE , please make sure that it meets *Break the Glass* requirements.

■ Does Avatar have a similar “Break the Glass” feature?

- No, Avatar does not have an automated *Break the Glass* feature, though it does keep a record of who accesses clients' charts.
- If you or the client is aware that a staff person should NOT have access to the client’s record (e.g., client has a family member employed at BHRS), a request to block the chart must be submitted. Please use the “Staff Request to Block Chart” form found here: <https://www.smchealth.org/bhrs-policies/electronic-medical-record-security-and-electronic-signatures-17-01>
- BHRS staff should only access the charts of clients as necessary for treatment, billing, or operations.

WHAT DO I NEED TO KNOW ABOUT ELECTRONIC MEDICAL RECORDS?

All current treating providers (except 42 CFR part 2 providers) may share information with each other without the client's consent. This has always been the case since the inception of HIPAA.

What's different now with the expansion of electronic medical records?

- It is now easier and much faster for providers to share information with each other. Previously, providers often did not know what other treatment providers the client was seeing unless the client provided that information. Now, with the click of a few buttons, providers are able to access this information without needing to ask the client for the contact information of their other treating providers.

What about past treatment providers, or if records are requested from a current treatment provider for a client who is a past BHRS client?

- For past treatment providers, an ROI should be obtained. Be sure to discuss with the client the nature of the request and have them complete an ROI.



Q&A

Q: What if a MH client does not want another currently treating provider to know about their other treatment? (E.g., client is concerned that they will be stigmatized by a medical provider if the medical provider knows they have an underlying mental health or AOD diagnosis.)



A: MH providers cannot agree to not sharing information with other healthcare providers. This may make the client uncomfortable, but it is considered best practice/best care to share information as needed.

This does not mean that you share everything. You may need to have a conversation with the client about what to share. The client can request a restriction, and may opt out of the HIE; however, the provider may still have Avatar access and will have access to many sources of information in other systems.

Mental Health Treatment: Current treatment providers—PCP, Primary Care, MH and any other treatment providers, including their support staff—may share as needed, but may only share what is necessary for treatment.

BHRS WILL NOT AGREE to a request to not communicate with other CURRENT PROVIDERS. This is very important. PLEASE DO NOT AGREE TO THIS. This is especially important for clients taking medications.

Q: I thought that no one could access a client's personal health information without the client's consent to share PHI, and that ALL access to their medical records was blocked from others' access?



A: No, that is not true.

BHRS MH DOES NOT need client consent for:

Mandated reporting - CPS, APS, threat of harm to others, public health. *Applies to both AOD & MH.*

Allowable reporting - 5150s including calling police and/or family in some cases, illegal activity (such as theft) at a BHRS facility. *Applies to both AOD & MH.*

Payment - Billing for services and other billing tasks. *Applies to MH ONLY, NOT AOD.*

Operations - Management oversight, QM, audits, any support staff needed for operations or to provide services, run facilities, etc.). *Applies to both AOD & MH.*

Mental Health Treatment - Any current treatment provider—PCP, Primary Care, AOD, MH and any other treatment providers, including their support staff—may share as needed, but may only share what is necessary for treatment.

BHRS **WILL NOT AGREE** to a request to not communicate with other CURRENT PROVIDERS. This is very important. PLEASE DO NOT AGREE TO THIS. This is especially important for clients taking medications. *MH ONLY (NOT AOD).*

BHRS MH & AOD DO NEED client consent to share with:

Non-treatment agencies like SSI, Probation, Education,
Friends or family members who are not the legal consenting person.



QM Announcements

QM Staffing Changes

Jeannine is leaving current position
12/30/2021 (last day).

WOC QA Manager recruitment is ongoing.
QA Manager Permanent Position will be
posted soon at

<https://Jobs.Smcgov.Org/Healthcare-jobs/>

This is our last planned webinar.
Webinar Schedule – On Hold For 2022.

Documentation changes are coming mid-
2022.

Thank You, any questions?