



KERN HEALTH SYSTEMS POLICY AND PROCEDURES			
Policy Title	Exchanging PHI with MHP and DMC-ODS	Policy #	21.08-P
Policy Owner	Behavioral Health Department	Original Effective Date	1/1/2024
Revision Effective Date		Approval Date	10/15/2024
Line of Business	<input checked="" type="checkbox"/> Medi-Cal <input type="checkbox"/> Medicare		

I. PURPOSE

To define process for complying with State and Federal privacy laws and regulations when exchanging member information between the county Mental Health Plan (MHP) and Drug Medical Organized Delivery System (DMC-ODS).

- A. California Health and Safety Code § 130290 was enacted in 2021 and establishes the creation of the California Health and Human Services Data Exchange Framework and requires certain data sharing among entities as set forth in California Health and Safety Code § 130290(f) on or before January 31, 2024. California Health and Safety Code § 130290 also provides for the California Health and Human Services Agency to encourage the inclusion of county health, public benefit, and social services as part of the Data Exchange Framework. The framework includes this single data sharing agreement and a set of common policies and procedures.
- B. This Agreement is intended to facilitate data exchange between the parties in compliance with all applicable federal, state, and local laws, regulations, and policies. This Agreement sets forth a common set of terms, conditions, and obligations to support secure real time access to, or exchange of, Health and Social Services Information (as defined below) between and among the parties. Nothing in this Agreement is intended to replace or supersede any existing or future agreement between or among the Parties that provides for more extensive data exchange than that required under this Agreement.
- C. This Agreement is not intended nor designed to: (i) mandate or require a specific technology; (ii) create a single entity that exchanges Health and Social Services Information; or (iii) create a single repository of data.

II. POLICY

Kern Health Systems (KHS) will work cooperatively with our partner agencies within the county Mental Health Plan (MHP) and Drug Medical Organized Delivery System (DMC-ODS). KHS will exchange

member information while complying with Federal and State laws and regulations protecting the confidentiality of our members. The member information will be shared with Kern Behavioral Health and Recovery Services (KernBHRS), who is the MHP and DMC-ODS. KHS and KernBHRS will adhere to the executed Data Sharing Agreement.

Data sharing relationships will be supported with a KHS standardized data-sharing agreement with KernBHRS. The agreement will include specifications to ensure compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and all other relevant federal and state regulations. KHS will maintain data sharing relationship with KernBHRS in compliance with HIPAA and other federal and state regulations.

KHS has an established Secure File Transfer Protocol (SFTP) site to facilitate data file exchanges with KernBHRS. KernBHRS will be required to have a SFTP application. KernBHRS will access the KHS SFTP site via a designated address via assigned portal and will use a unique username and password.

KHS has implemented a robust infrastructure of technology and data sharing procedures that will be leveraged for Behavioral Health. The following describes many existing processes that have been modified for Behavioral Health.

III. DEFINITIONS

TERMS	DEFINITIONS
Minimum Necessary:	Ensures Protected Health Information (PHI) is being limited in its use and disclosure and minimizes risk to security of data. Using, requesting and disclosing the minimum amount of information necessary to accomplish the purpose of the request. Personal Information: Any information that identifies or describes an individual, including, but not limited to, name, social security number, physical description, address, phone number, education, financial matters, and medical or employment history. It includes statements made by, or attributed to, the individual.
Personal Information:	Any information that identifies or describes an individual, including, but not limited to, name, social security number, physical description, address, phone number, education, financial matters, and medical or employment history. It includes statements made by, or attributed to, the individual.
Personally Identifiable Information (PII):	Any information about an individual which can be used to distinguish or trace an individual's identity such as name, social security number, date and place of birth, mother's maiden name, and biometric records. This information can be in paper or electronic files and includes, but is not limited to, education records, financial transactions, employment history, criminal records, and medical files.
Protected Health Information (PHI):	Individually identifiable health information that is transmitted or maintained in any form or medium, created or received by a health care provider or health plan, that relates to past, present, and future physical or mental health condition of an individual; provisions of healthcare to an individual; or past, present, and future payment for the provision of healthcare to an individual. Health information, which includes any of the following

	<p>identifiers, is considered PHI and is subject to the regulations contained in the Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 (HIPAA):</p>		
	A. Name (incl. initials)	B. Facsimile number	C. Social Security Number
	D. Date of birth	E. Telephone number	F. Internet (IP) address
	G. Names of relatives	H. Medical record number	I. Web URL
	J. Names of employers	K. Finger or voice prints	L. E-mail address
	M. Photographic images	N. Certificate/license number	O. Any device or serial number
	P. Account number	Q. Health plan beneficiary number	
	R. Address (including street address, City, State and Zip code)		
	S. Any other unique identifying number, characteristic or code		

IV. PROCEDURES

- A. Sharing PHI with KernBHRS for Specialty Mental Health Services (SMHS) and Substance Use Disorder (SUD) treatment for Coordination of Care of Kern Family Healthcare (KFHC) members.
 - 1. KHS will use Electronic Medical Record (EMR) systems and processes capable of tracking Behavioral Health referrals.
 - a. Through the automated data exchange process, KHS process daily referrals between KernBHRS for SMHS, Non-Specialty for Mental Health Service (NSMHS), and SUD.
 - i. Examples of data sharing activities utilized by KHS include, but are not limited to:
 - ii. Member assignment files
 - iii. Encounter and claims data
 - iv. Sharing member physical, behavioral, and administrative, and Social Drivers of Health (SDOH) data
 - v. Reports of performance on quality measures/metrics as requested
 - b. KHS will monitor referrals outcomes between KernBHRS.
 - i. KHS will send and receive monthly referral outcome report for reconciliation on all referrals submitted requesting data to confirm member was linked for treatment (when and where).
 - ii. KHS will provide option for members to complete consent to authorize exchange of PHI specific to SUD treatment with KernBHRS. If KHS is

unable to obtain Release of Information, KHS will contact member to confirm whether treatment was received and track when and where.

B. Managing a Data Sharing Agreement with KernBHRS for Specialty Mental Health Services (SMHS) and Substance Use Disorder (SUD) treatment.

1. KHS, at a minimum, will review Memorandum of Understanding (MOUs) annually for any needed modifications or renewal of responsibilities and obligations outlined within the MOU.
2. KHS will follow requirements in policy 21.07P MOU Requirements between Managed Care Plan (MCP), MHP, DMC-ODS.
3. KHS will maintain monthly meetings with the SUD Administrator for the purpose of ensuring member access to necessary and appropriate physical, mental health, and substance use disorder services.
4. KHS will maintain participation in quarterly meetings with KernBHRS to address policy and practical concerns that may arise between both parties of MOU.

V. ATTACHMENTS

N/A	
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VI. REFERENCES

Reference Type	Specific Reference
Other KHS Policies	Policy 21.07-P MOU Requirements for MCP, MHP, and DMC-ODS.
Choose an item.	
Choose an item.	

VII. REVISION HISTORY

Action	Date	Brief Description of Updates	Author
Created	12/2023	Created for 2024 Operational Readiness (R.0226) – Approved by DHCS on 1/9/2024.	Behavioral Health
Revised			
Retired			

VIII. APPROVALS

Committees Board (if applicable)	Date Reviewed	Date Approved
Choose an item.		

Choose an item.		
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Regulatory Agencies (if applicable)	Date Reviewed	Date Approved
Department of Health Care Services (DHCS)	For 2024 Operational Readiness-R.0226	1/9/2024
Choose an item.		
Choose an item.		

Chief Executive Leadership Approval *		
Title	Signature	Date Approved
Chief Executive Officer		
Chief Medical Officer		
Chief Compliance and Fraud Prevention Officer		
Chief Information Officer		
*Signatures are kept on file for reference but will not be on the published copy		



Policy and Procedure Review

KHS Policy & Procedure: 21.08-P Exchanging PHI with MHP and DMC-ODS

Reason for revision: Created for 2024 Operational Readiness (R.0226) – Approved by DHCS on 1/9/2024.

Director Approval		
Title	Signature	Date Approved
Melinda Santiago Director of Behavioral Health		
Jane MacAdam Director of Compliance		

Date posted to public drive: _____

Date posted to website (“P” policies only): _____