

Q&A

QUESTIONS ASKED ABOUT THE AUTHORIZATION TO SHARE CONFIDENTIAL MEMBER INFORMATION (ASCFI) FORM AND SMARTCARE

Language Access & Form Availability

1. Is the ASCFI Form available in Spanish?

Yes, the Form is available in Spanish on the DHCS website.

2. When will the Spanish version be available in SmartCare?

We are working with Streamline to get the Spanish version into SmartCare as soon as possible. Once we have a clear timeline available, we will share that information with counties.

ASCFI Requirements, Mandates and Validity

3. When the state starts mandating the ASCFI, will not using the AB 133 Form cause issues? Will the mandate be that we need to use the AB 133 Form for people with Medi-Cal coverage?

A forthcoming BHIN will outline the regulatory requirement for using ASCFI. However, this doesn't prevent a county from adopting the Form early. We have confirmed with DHCS that the Non-AB 133 Form can be used for Medi-Cal clients as well as non-Medi-Cal clients.

4. When will counties be required to adopt SmartCare ASCFI?

The English version was rolled out on Feb. 11 in SmartCare. We will be deactivating the Coordinated Care Consent form on March 31. Please note that every county must attest to using the ASCFI Form in SmartCare.

5. How long is the ASCFI form valid?

The ASCFI form is valid for one year after it is signed by the client or legal representative or guardian.

Form Fields and Who Completes the ASCMI

6. On the ASCMI Form, does “agency” refer to the county name or a contracted provider's agency name?

In SmartCare, the “Organization Name” field will auto-populate the county name in this field, as it is saved in the “Agency” table in SmartCare. The information may be edited in SmartCare by the user, if necessary.

7. Is “Organization Name” supposed to be the Behavioral Health Plan, or the organization seeing the person served? For counties that contract out services to CBOs, will they use their organization or leave the default system organization?

CaIMHSA recommends using the Behavioral Health Plan's name, but DHCS and Manatt have both said that using a CBO agency's name is also allowable.

8. Can we turn off the default “Organization Name” field population?

No. We are populating this to make this is as user-friendly as possible. Users are not expected to change the "Organization Name" field, but it remains editable in the situations where something else needs to be entered to match a paper copy or a BHP's policy.

9. Is the ASCMI Form required to be completed only by treatment team members?

Administrative staff explaining the Form to clients can complete and submit the ASCMI Form; it is not exclusive to their treatment team.

10. Is the ASCMI Form locked to a single author, or would other users be allowed to edit it?

The form is locked to a single author and cannot be edited by others.

SmartCare Functionality and Reporting

11. Does this replace the Coordinated Care Consent in SmartCare? Will the ASCMI show up in the consent log?

The ASCMI Form will replace the Coordinated Care Consent. The information will not show up on the Consent list page, nor the Release of Information Log on the Client Information screen.

12. Does this replace the Release of Information?

The ASCMI form will not replace the Release of Information Form.

13. Is there a plan for a list page for ASCMI?

No. The ASCMI will be visible on the Documents (Client) list page, just like any other client document.

14. Once ASCMI is entered in SmartCare, is there an end date (e.g., 12 months)?

Yes, there is an end date to the ASCMI Form. The document expires one year from the date the client/legal representative/guardian signs the document.

15. Is there a report in SmartCare showing clients without ASCMI?

Currently there is no report in SmartCare that will show this. CaIMHSA has taken this request into consideration for the future.

16. Will SmartCare flag if an ASCMI Form expires, or must we track this outside of SmartCare?

The system will not alert users when a consent or authorization has expired or has been revoked. Staff should be cognizant of what authorizations are on file before sharing information.

42 CFR Part 2 & CDAG

17. Which signature drops CDAG rules — the staff or the client's signature?

The CDAG rules drop based on the client/legal representative/guardian's signature.

18. Will SUD CDAG be dropped with the ASCMI consent?

If the ASCMI Form is marked with "yes" for SUD sharing, then CDAG rules for the client will be dropped.

19. What happens in the system after the ASCMI Form expires and there is not a new one on file?

When there is no valid authorization on file, then no sharing of information should occur. Additionally, once the ASCMI Form expires, then the CDAG rules will be reinstated in SmartCare.

20. The current Coordinated Care Consent does not automatically "bring the wall back up" when reaching the one-year expiration date or when set with an end date. Is this able to be addressed with the ASCMI Form in SmartCare, or will this still need to be done manually?

This is a system issue. Please report to the Help Desk if you encounter it.

Revocation and Updating Consent

21. If the Coordinated Care Consent is deactivated, can people still revoke the existing ones to put the CDAG back up?

While both forms have the drop-the-wall / replace-the-wall functionality, once the Coordinated Care Consent is deactivated, the BHP will need to use the ASCMI Form to reactivate the CDAG walls.

22. Once ASCMI Form is available, to revoke an existing Coordinated Care Consent, must an ASCMI Form be completed?

Yes, the client would indicate "no" to sharing their information on the ASCMI Form to revoke the existing Coordinated Care Consent.

23. Does revoking the ASCMI require a hard signature?

The ASCMI revocation form was created by DHCS and does require a signature. The forms can be found at: <https://www.dhcs.ca.gov/CalAIM/Pages/ASCMI-CalAIM.aspx>. If a county chooses to waive that requirement by accepting a client's verbal request, they should still document this via the client signature workflow but choose "Verbally Agreed."

24. In SmartCare, what is the process to update the ASCMI to deny sharing before the revocation of the ASCMI Form is available?

CaIMHSA recommends that BHPs complete a new ASCMI with all sharing preferences marked as "no."

25. If a patient had indicated restricted users on the Coordinated Care Consent, will those parameters be lifted and need to be reestablished?

No. That information was pushed to another table from the Coordinated Care Consent as a way of adding restricted staff. That table is not being impacted. The restrictions for those staff will not be altered.

ASCMI vs ROI and Disclosure

26. Why would we use an ROI if we have blanket ASCMI? What is a sample use case?

The ASCMI is used for sharing health data with multiple care partners, while the ROI is used for a more narrow purpose, such as a single care partner or a single person or entity who is not a care partner. For example, the ROI is used for consent to speak to a family member about the client's care, where consent is required for disclosure.

27. If the member signs an ASCMI and allows sharing, and Kaiser wants to request the member's records from our facility, would an ROI still be needed?

No. The ASCMI acts as the authorization to release that information.

28. If the ASCMI acts as an ROI, how would you know what is being requested and what is being disclosed?

This should be tracked via the disclosure request process. The ASCMI acts as the authorization that allows the disclosure, but the disclosure information should still be documented via the disclosure process.

29. Does a signed ASCMI mean providers will have access to all member information, or is it possible to provide minimum necessary or specifically what's been asked for?

No. The minimum necessary rules still apply.

30. As a "release of information" (ROI) - shouldn't this document require a live signature and not allow a verbal approval?

The ASCMI Form requires a client or guardian's signature. As we cannot remove the "verbal agreement" option specifically for this Form, the SmartCare patient signature window will continue to include all options.

31. ROIs need a signature and are not valid with a verbal consent. Are you saying that verbal consent is accepted with this Form?

No. ASCMI requires a client or guardian's signature, and verbal consent is not accepted in this case.

External Care Partners

32. How does the ASCMI form interact with housing/CES/HMIS?

The ASCMI is intended to support coordination with multiple partners. For example, if a MH program collects the ASCMI Form and the client has indicated “yes” for housing-related information, the housing provider could then look at the database and see that they may share information with the MH program AND would not require the housing partner to collect another ASCMI, thus providing a more efficient process.

33. Do care partners need to have access to SmartCare to access the ASCMI?

No. The ASCMI can be completed on paper or using the PDF versions DHCS has on its website. In the future when the consent management platform is available, users will be able to query the CMP to determine if an ASCMI exists. This does not require SmartCare, as many care providers do not use SmartCare.

Connex and DHCS Consent Management Platform (CMP)

34. Will searching the CMP for existing ASCMI data be available via SmartCare?

Currently, the plan is to use Connex as the mechanism for querying the CMP. Connex will establish an API with the CMP to allow users to query the system.

35. If a client refuses to sign the ASCMI Form, would this keep their information from being shared via Connex?

In the case of mental health information, no—if an ASCMI is not signed, TPO provisions for data sharing remain. In the case of 42 CFR Part 2-protected information, declining to sign the ASCMI or selecting “No” to sharing that information will result in it not being available via Connex.

36. If Connex finds an existing ASCMI, is there a functionality to import that form into the client's SmartCare record? And if so, will it drop the CDAG walls?

Currently, there is no definitive information. CaMHSA is collaborating with the state on design.

37. If there is a more current ASCMI document in the CMP than the one in SmartCare, can the BHP download that file, or would we need to generate a new ASCMI Form for the client to sign?

The CMP has not yet been designed by the state. CaMHSA is currently working on this design with DHCS. The plan would be to use the ASCMI record from the CMP if it is the most recent.

38. Is there a roadmap item to have the CMP pull from Connex integrated directly into SmartCare via some mechanism (e.g., API pull, embedded widget, etc.)?

There are no current plans to directly integrate SmartCare with the CMP, although it is under consideration.

39. Regarding the state's consent management platform, will the information there be pushed down to SmartCare or will people be required to log into Connex or the state's system to see if an existing ASCMI is in play?

ASCOMI Forms stored in the state's CMP will not be "pushed" to downstream systems. Organizations are required to initiate a query to determine if an ASCMI is available.

40. It was indicated that the ASCMI Form will not be considered complete until it is signed by both the provider and the client/guardian. Will there be a pathway for identifying ASCMI Forms that are missing a client/guardian signature, or will they be reflected as complete once signed by the provider? And will ASCMI Forms missing client/guardian signature be blocked from going to the CMP once the CMP is available?

Currently there are no reports reflecting ASCMI Forms that do not have the client/guardian signature. CaMHSA is working with the Streamline on this functionality.

The ASCMI Form is considered complete when the client or guardian signs (the provider is irrelevant). When looking at the client's documents list page, the system shows if a client needs to co-sign, just like other current consents. We will ensure the CMP does not receive any ASCMI documents that are not signed by the client/guardian.

Privacy Practices

41. Is the ASCMI part of the Notice of Privacy Practices?

No. This is not part of the Notice of Privacy Practices.