



Health Care Agency Behavioral Health Services Policies and Procedures	Section Name:	Information Management
	Sub Section:	CalOptima
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	SIGNATURE	DATE APPROVED
Director of Operations Behavioral Health Services	<u>Signature on File</u>	<u>10/19/18</u>

SUBJECT: BHS and CalOptima OneCare/OneCare Connect Information Exchange

PURPOSE:

To establish a policy and procedure in which Protected Health Information (PHI) can be exchanged between the County of Orange Health Care Agency (HCA) Behavioral Health Services (BHS) programs and CalOptima for OneCare/OneCare Connect members receiving services in BHS.

POLICY:

When BHS programs are providing services to Medi-Cal beneficiaries who are CalOptima OneCare/OneCare Connect members, the program(s) shall share information needed to coordinate care with CalOptima. The procedures shall ensure that the confidentiality of medical records is maintained in accordance with State and federal laws and regulations governing the confidentiality of personal or medical information, including mental health information, relating to beneficiaries.

SCOPE:

All Orange County Behavioral Health Services (BHS) clinicians who are providing Specialty Mental Health Services (SMHS) to Medi-Cal beneficiaries who are CalOptima OneCare/OneCare Connect members.

DEFINITIONS:

CalOptima – The entity which is the single county operated health plan for Medi-Cal managed care in Orange County. CalOptima provides for Medi-Cal covered physical health care services and for mental health services to beneficiaries whose mental health related impairment is in the mild to moderate range.

OneCare – A Medicare Advantage (MA) plan operated by CalOptima providing managed care services exclusively to members with dual Medicare and Medi-Cal coverage. When BHS provides Medicare eligible services to these consumers, CalOptima is billed and pays for the Medicare portion rather than billing to Medicare.

OneCare Connect – A joint federal/state Demonstration Program for persons who are dually eligible for benefits under both Medicare and Medi-Cal. The Demonstration Program will provide covered services and coordinate member-centered care. BHS is contracted with CalOptima to participate in the Demonstration Program. When BHS provides Medicare eligible services to these consumers, CalOptima is billed and pays for the Medicare portion rather than billing to Medicare.

REFERENCES:

BHS P&P 01.04.01 CalOptima OneCare/OneCare Connect Referrals

BHS P&P 01.04.02 CalOptima OneCare/OneCare Connect Client Assessment for Specialty Mental Health Services

BHS P&P 01.04.03 OneCare/OneCare Connect Coordination of Care with CalOptima

Title IX, California Code of Regulations (CCR) Sections 1820.205, 1830.205 and 1830.210

PROCEDURES:

- I. The Intake Counselor (IC) providing the initial assessment shall ensure that there is an Authorization to Use and Disclose Protected Health Information (ATD) form signed by the client.
 - A. The CalOptima Release of Information (ROI) form may be provided by the CalOptima’s Managed Behavioral Healthcare Organization (MBHO) if the client was referred through that unit. If so, this form may be accepted by BHS.
 - B. If no CalOptima ROI form accompanies a referral from the CalOptima’s MBHO at the time of referral, or if the client comes to BHS through a route other than referral from CalOptima, then the IC shall have an ATD form signed by the client during the assessment.
 - C. The form shall identify CalOptima and the County of Orange Health Care Agency as the two programs with which information can be shared.
 - D. Identify what types of information to be shared: physical health, mental health, and/or substance abuse information. All should be included whenever possible.
 - E. The form shall be placed in the chart or Electronic Health Record along with the other ATDs.
- II. The BHS staff providing services to the client will ensure that only the minimum information necessary for the purpose of coordination of care is disclosed, so as to protect the client’s privacy to the fullest extent possible.