

SWMBH Operating Policy 10.21

Subject: Use of MDHHS Standard Consent Form (MDHHS-5515)		Accountability: Compliance	Effective Date: 10/1/2015	Pages: 2	
REQUIRED BY: BBA Section _____ PIHP Contract Section <u>Part II(A) Section 7.9.3</u> NCQA/URAC Standard _____ Other <u>2014 PA 129</u>			Last Reviewed Date: 10/4/18	Past Reviewed Dates: 2/26/16 8/26/16 9/6/16 5/17/17	
LINE OF BUSINESS: <input checked="" type="checkbox"/> Specialty Waiver (B/C) <input checked="" type="checkbox"/> 1115 Waiver <input checked="" type="checkbox"/> Healthy Michigan <input checked="" type="checkbox"/> SUD Medicaid <input checked="" type="checkbox"/> SUD Community Grant <input checked="" type="checkbox"/> MI Health Link <input type="checkbox"/> OTHER: _____		APPLICATION: <input checked="" type="checkbox"/> SWMBH Staff and Ops <input checked="" type="checkbox"/> Participant CMHSPs <input checked="" type="checkbox"/> SUD Providers <input checked="" type="checkbox"/> MH / DD providers <input checked="" type="checkbox"/> Other: Entire Provider Network		Last Revised Date: 10/4/18	Past Revised Dates: 8/26/16 9/6/17 5/17/17
Approved: <u>Miles C. Judd</u>			Required Reviewer: Chief Compliance & Privacy Officer		
Date: <u>10-11-18</u>					

I. Purpose

Southwest Michigan Behavioral Health (SWMBH) collects and maintains member protected health information (PHI) that includes personal identifiers, enrollment, eligibility, treatment, and dependent and qualifying event information.

SWMBH is obligated to protect the privacy of PHI in accordance with all applicable State and Federal laws, as well as internal policies and procedures related to privacy and security of PHI. Michigan Public Act 129 of 2014 mandated that the Michigan Department of Health and Human Services (MDHHS) develop a standard release form for exchanging and sharing confidential mental health and substance use disorder information for use by public and private agencies, departments, corporations, or individuals that are involved with treatment of an individual experiencing serious mental illness, serious emotional disturbance, developmental disability, or substance use disorder (form MDHHS-5515). Part II (A) Section 7.9.3 of SWMBH's Prepaid Inpatient Health Plan (PIHP) Contract with MDHHS mandates that SWMBH and its provider network use, accept, and honor the standard release form for the electronic and non-electronic sharing of all behavioral health and substance use disorder (SUD) PHI.

II. Policy

SWMBH will not use or disclose PHI without written authorization except where permitted or required by state and/or federal law(s). In obtaining written authorization for the disclosure of confidential mental health and substance use disorder information for use by all public and private agencies, departments, corporations, or individuals that are involved with treatment of an individual experiencing serious mental illness, serious emotional disturbance, developmental disability, or substance use disorder, SWMBH and its provider network shall honor, accept and use MDHHS-5515, "Permission to Share Behavioral Health Information" (hereafter referred to as "Standard Consent Form"), for the electronic and non-electronic sharing of all behavioral health and SUD information, in

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accordance with PA 129 of 2014, MCL 330.1141a. No other consent forms may be used for such treatment-related disclosures.

When obtaining written authorization for disclosures that do not fall under a Health Insurance Portability and Accountability Act (HIPAA) exception, a HIPAA compliant consent form shall be used.

The Standard Consent Form **must not be used** for a release of information from any person or agency that has provided services for domestic violence, sexual assault or stalking. A separate consent form must be completed with the person or agency that provided those services.

III. Standards and Guidelines

A. None

IV. Definitions

A. Protected Health Information (PHI) – has the meaning given such term in section 160.103 of title 45, Code of Federal Regulations.

V. References

A. PA 129 of 2014, MCL 330.1141a

VI. Attachments

A. MDHHS-5515