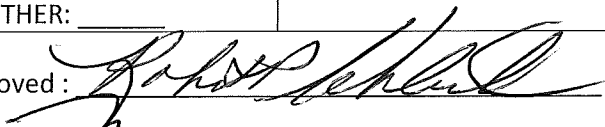


SWMBH Operating Policy 7.7

Subject: SWMBH Portal Access Policy		Accountability: IT Department	Effective Date: 4/11/2016	Pages: 1
REQUIRED BY: BBA Section _____ PIHP Contract Section _____ NCQA/URAC Standard _____ Other _____			Last Reviewed Date: 5/17/16	Past Reviewed Dates: 4/11/16
LINE OF BUSINESS: <input type="checkbox"/> Specialty Waiver (B/C) <input type="checkbox"/> 1115 Waiver <input type="checkbox"/> Healthy Michigan <input type="checkbox"/> SUD Medicaid <input type="checkbox"/> SUD Block Grant <input 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 type="checkbox"/> Other: _____	Last Revised Date:	Past Revised Dates: 4/11/16
Approved:  Date: <u>Aug 25, 2017</u>		Required Reviewer: Chief Information Officer		

I. Purpose

This policy serves to manage and control access to information stored on Southwest Michigan Behavioral Health’s (SWMBH’s) Portal.

II. Policy

Access to the SWMBH Portal shall be managed by SWMBH Information Technology. Employee Access will be granted based on job/role related responsibilities and authorized by respective Senior Leader. Access by non-SWMBH staff shall be limited to business associates and covered entities. Permissions will be requested by EOs or their proxy. Email is a suitable request mechanism.

III. Standards and Guidelines

To ensure suitable access to sensitive and protected information, individuals seeking access to the SWMBH Portal must complete the SWMBH PORTAL USER REQUEST FORM (Attachment A). Requests from external sources should be initiated by an appropriate executive or their designated proxy and must be approved by a SWMBH Senior Leader. For CMHSP users, SWMBH will review accounts annually. For all other users, SWMBH will approve accounts for ninety days at a time. Persons considered “Covered Persons” in the SWMBH operating policy 10.10 shall be required to meet all Conflict Of Interest documentation requirements prior to being granted access.

IV. Definitions


None

V. References

SWMBH Operating Policy 10.10

VI. Attachments

SWMBH 7.7A SWMBH Portal Access Request Form

		<h2 style="margin: 0;">SWMBH PORTAL USER REQUEST FORM</h2>	
Request Type	<input type="text" value="Add new user or change existing access"/>		
Date of Request	Choose request date	End date (optional)*	Choose or leave blank
Name of CMH Employee(s)	Enter name	Employee Email(s)	Enter email
Authorizing CMH Executive:	Enter name		
Requested Access Areas:	<input type="checkbox"/> CMHSP Site (Performance Indicators, Encounter Reports; Contains PHI) <input type="checkbox"/> Regional Teams/Committees (RITC, RUMCP, Compliance Committee, etc.) <input type="checkbox"/> Operations Committee (if applicable) <input type="checkbox"/> SWMBH Board (if applicable)		
Name of staff for executive to delegate future requests (optional)	Delegated Staff Name (optional)		
Notes:			

I agree to notify Southwest Michigan Behavioral Health immediately if the individual named above ends employment or transitions to a position in which access to the SWMBH Portal is no longer necessary for job functions.

For SWMBH use only:		
Authorizing Senior Leader:	Enter name	
New User Notified On:	Choose date	

*** SWMBH will review and confirm access annually.**

Please complete this form and email to: andy.aardema@swmbh.org or fax to: 269-883-6670

