



POLICY & PROCEDURE (P&P) APPROVAL REQUEST FORM

I. P&P INFORMATION

Assigned Policy Name: Electronic Signatures in EHR Systems for County and Contractors

Assigned Policy Number: BHSD 4202

Policy Area(s): Mark All That Apply

- | | |
|---|--|
| <input type="checkbox"/> Plan Administration and Organization | <input type="checkbox"/> Provider Network |
| <input type="checkbox"/> Scope of Services | <input checked="" type="checkbox"/> Documentation Requirements |
| <input type="checkbox"/> Financial Reporting Requirements | <input type="checkbox"/> Coordination and Continuity of Care |
| <input type="checkbox"/> Management Information Systems | <input type="checkbox"/> Beneficiary Rights |
| <input type="checkbox"/> Quality Improvement System | <input type="checkbox"/> Beneficiary Problem Resolution |
| <input type="checkbox"/> Utilization Management Program | <input type="checkbox"/> Program Integrity |
| <input type="checkbox"/> Access and Availability of Services | <input type="checkbox"/> Reporting Requirements |

Submitted by: victor Ibabao Date: 9/24/2019

Policy developed by: Tammy Ramsey and BHSD SUTS Team

Attach P&P Document For Review In this Section [Include Paperclip Icon Here]



II. APPROVAL

Section A: HHS Compliance and County Counsel

HHS Compliance: DocuSigned by: Victoria Phan Date: 9/24/2019

County Counsel: 3527B4B4F12742C...
DocuSigned by: Emily Fedman Date: 9/24/2019
BEDCD44FA6BA42B...

Section B: BHSD Executive Director

BHSD Executive Director: DocuSigned by: Toni Tullys Date: 9/25/2019
AB2AABE6ED30409...

Note - A copy of the Approved P&P Form will be emailed to: BHSD Compliance Unit



Policy & Procedure Number: BHSD # 4202

- BHSD County Staff**
- Contract Providers**
- Specialty Mental Health**
- Specialty Substance Use Treatment Services**

Title: Electronic Signatures in Electronic Health Record Systems for County and Contractors

Approved/Issue Date:	Behavioral Health Services Director:	
Last Review/Revision Date:	Next Review Date:	Inactive Date:

REFERENCE: Department of Alcohol and Drugs Programs (DHCS) (aka Department of Health Care Services) Bulletin 10-01: Electronic Signatures in Electronic Health Record Systems Used by Counties and Providers

Department Health Care Services (DHCS) Standard Agreement Amendment, Substance Use Disorder Prevention and Treatment Block Grant Services (SABG), Exhibit F Privacy and Information Security

DHCS Bulletin 13-05: Elimination of the Department of Alcohol and Drug Programs

Feral Law 15 USC § 7006 Electronic signature
California Civil Code § 1633, (f) and (h) Electronic signature

POLICY: The purpose of this policy is to ensure that both County and Contractor’s electronic health records systems comply with all applicable State and Federal standards when preparing and maintaining client records and files.

Standards for Electronic Signatures in Electronically Signed Records
DHCS approves the use of electronic signatures in electronically signed records as equivalent to a manual signature affixed by hand for financial, program, and medical records audit or program review purposes. This approval extends to all electronically signed records requiring signature under the California Code of Regulations, Title 9, Division

The electronic signature should meet the following requirements:

1. The electronic signature mechanism is
 - a. Unique to the signer,
 - b. Under the signer's sole control
 - c. Capable of being verified
 - d. Linked to the data so that, if the data are changed, the signature is invalidated.
2. Computer systems that utilize electronic signatures comply with the following Certification Commission for Healthcare Information Technology (CCHIT) certification



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criteria or equivalent: Security: Access Control, Security: Audit, and Security: Authentication.

3. Counties maintain an Electronic Signature Agreement (Exhibit 1) for the terms of use of an electronic signature signed by both the individual requesting electronic signature authorization and the County AOD Program Administrator or his/her designee.
4. County Alcohol and Drug Program Administrators complete a County Alcohol and Drug Program Administrator's Electronic Signature Certification form (Exhibit 2), certifying that electronic systems used by the county's alcohol and drug operations, including contract provider systems, meet the standards.
5. The signed Electronic Signature Certification and signed Electronic Signature Agreements from county employees and contract providers, or copies thereof, are available to the DHCS auditor or program reviewer at the time of an audit, licensing, or certification review.

Information Security Considerations

BHSD and contracted providers are responsible for taking appropriate security measures to safeguard the contents of all electronic records and comply with HIPAA, W&C 5328, CMIA Act, California Government Code 6254 and all other applicable State and Federal requirements.

Obtaining Consumer Signatures

In many situations, the substance abuse consumer, or his/her representative, must acknowledge his/her willingness to participate in and accept the treatment plan. In paper-based systems, the consumer, or his/her representative, physically signs a document to that effect. As an alternative to paper, BHSD and providers can use any of the following approaches:

1. Scanning paper consent documents, treatment plans or other medical record documents containing consumer signatures;
2. Capturing signature images from a signature pad
3. Recording biometric information, such as a fingerprint using a fingerprint scanner; or,
4. Entering authenticating information, such as a password or personal identification number (PIN), known only to the consumer or authorized representative.

If a signature is unavailable, an electronically signed explanation must be provided by the County AOD Program Administrator or his/her designee.



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DHCS Audit Requirements for Electronically Signed Records
 Electronic records and electronically signed records may replace paper-based records for purposes of an audit, licensing, or certification review. BHSD and contract providers must conform to the standards for electronic signatures in electronically signed records set forth in this DHCS Bulletin. When BHSD and or State conducts an audit, licensing, or certification review, BHSD and contracted providers must make the following available:

- Physical access to EHR systems
- Adequate computer access to the EHR needed for the audit or review
- System or network access to electronic records such as user IDs and passwords
- Access to printers and capability to print necessary documents
- Technical assistance as requested
- Scanned documents, if needed, that are readable and complete

The above documentation shall be sufficient to ensure that electronically signed records are capable of verification by qualified auditors, analysts, or investigators.

DEFINITIONS:

EHR – Electronic Health Record

Electronic signature means "an electronic sound, symbol, or process, attached to or logically associated with a contract or other record and executed or adopted by a person with the intent to sign the record pursuant to 15 UCS § 7006. Under California law, an electronic signature means an electronic sound, symbol, or process attached to or logically associated with an electronic record and executed or adopted by a person with the intent to sign the electronic record. The use of an electronic signature or digital signature shall have the same force or effect as a manual signature.

Electronically Signed Record means an electronically signed record is a financial, program, or medical record that (1) is required to be signed under California or Federal law, California or Federal regulation, or organizational policy or procedure, and (2) may be requested during an audit by any Federal, State, or local government audit organization or public accountant.



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<u>PROCEDURE</u>	
Responsible Party	Action Required
BHSD SUTS Contractor	Submit on letterhead from Contractor's Electronic Health Vendor verification that electronic signature signatures DHCS Bulletin 10-01.
BHSD Alcohol and Drug Administrator or designee	Review the detailed explanation of how the electronic signature in Contractor's EHR complies with DHCS Bulletin 10-01. If in compliance, approve by signing Exhibit 2: Electronic Signature Certification. Provide copy to Contractor and maintain copy for County.
BHSD County Staff and Contractor Staff	All individual using electronic signatures to sign electronic records in EHR systems must complete Exhibit 1: Electronic Signature Agreement. Individual must complete, sign and send to County Alcohol and Drug Administrator or his/her designee for approval.
BHSD Alcohol and Drug Administrator or designee	Verify that Exhibit 2: Electronic Signature Certification is approved, then approve Exhibit 1: Electronic Signature Agreement by signing. Provide copy to Contractor and maintain copy for County.
Attachments:	Exhibit 1: Electronic Signature Agreement and Exhibit 2: Electronic Signature Certification DHCS Bulletin 10-01: Electronic Signatures in Electronic Health Record Systems Used by Counties and Providers