



7.1.6 CMS INTEROPERABILITY PATIENT ACCESS APPLICATION PROGRAMMING INTERFACE (API)

Issue Date: 09/30/2024

Revision History: Not Applicable

References: DHCS Behavioral Health Information Notice No. 23-032

Policy Owner: Behavioral Health Clinical Informatics Analyst

Director Signature: Signature on File

I. Policy Statement

The purpose of this policy is to establish guidelines and procedures to ensure compliance with the Centers for Medicare and Medicaid Services (CMS) Interoperability Patient Access Application Programming Interface (API). This policy and procedure aim to facilitate seamless data exchange, enhance patient access to health information, and promote interoperability among healthcare systems.

In response to the evolving healthcare landscape and the imperative to enhance patient engagement and data accessibility, Sonoma County Department of Health Services, Behavioral Health Division is committed to adopting the Centers for Medicare & Medicaid Services (CMS) Interoperability Patient Access Application Programming Interface (API). This policy and procedure framework underscores our dedication to upholding the highest standards of data privacy, security, and interoperability as we integrate the CMS Interoperability Patient Access API into our health information technology (IT) infrastructure. By empowering individuals with secure and standardized access to their health information across disparate systems, our organization seeks to contribute to improved patient outcomes, streamlined care coordination, and a more connected and efficient healthcare environment. This comprehensive approach reflects our commitment to quality, patient-centered care and positions us at the forefront of technological advancements in healthcare delivery.

To assist Sonoma County Department of Health Services, Behavioral Health Division with meeting the requirements for CMS patient access, Sonoma County

Department of Health Services, Behavioral Health Division has partnered with the California Mental Health Services Authority (CalMHSA) to implement CalMHSA Connex. CalMHSA Connex is a specialized platform designed to facilitate the seamless and secure sharing of behavioral health information among diverse healthcare entities as well as facilitate patient access to their data. This exchange is tailored to the unique needs of mental health and substance use disorder treatment providers, enabling the confidential transmission of patient records, treatment plans, and outcomes across the behavioral health spectrum. Emphasizing privacy and consent management, CalMHSA Connex ensures that sensitive information is shared only with authorized individuals, fostering collaborative and comprehensive care. CalMHSA Connex aims to play a pivotal role in breaking down silos, enhancing care coordination, and promoting a holistic approach to patient well-being by providing clinicians with timely and comprehensive insights into a patient's health history, ultimately contributing to more informed decision-making and improved outcomes in the realm of mental health and substance use treatment.

II. Scope

This policy applies to all Department of Health Services Behavioral Health Division network providers, including county employed staff, independent contract providers and contracted organizational providers who provide Mental Health Plan (MHP), Drug Medi-Cal (DMC), and Drug Medi-Cal Organized Delivery System (DMC-ODS).

III. Definitions

- a. Authentication: The process of verifying the identity of an individual or system to ensure that access to client/patient information is granted only to authorized entities.
- b. Authorization: Permission granted to individuals or systems to access specific client/patient information based on defined roles and responsibilities.
- c. CalMHSA Connex: A health information exchange operated by CalMHSA catering to the interoperability needs of county behavioral health. CalMHSA Connex acts as an intermediary to facilitate data exchange between disparate parties utilizing industry accepted protocols and standards.
- d. Client/Patient: For the purposes of this document, the term “client/patient” is used interchangeably with “patient” and refers to an individual receiving medical or professional services as outlined herein.
- e. CMS Interoperability Patient Access API: Refers to the application programming interface developed by the Centers for Medicare & Medicaid

Services (CMS) to enable secure and standardized access to client/patient health information, as per CMS guidelines.

- f. Health Information Exchange (HIE): The electronic sharing of health-related information among healthcare organizations, ensuring that patient data is accessible across different systems while maintaining privacy and security.
- g. Interoperability: The ability of different health IT systems to exchange and use client/patient information seamlessly, ensuring data consistency and accuracy across various platforms.
- h. Protected Health Information (PHI): Identifiable health information that is subject to privacy regulations, as defined by the Health Insurance Portability and Accountability Act (HIPAA).

IV. Policy

A. Compliance with CMS Interoperability Patient Access API:

- a. Patient Access API shall be facilitated through the county's subscription to CalMHSA Connex. The CalMHSA Connex provided Patient Access API is designed and implemented to comply with the [CMS Interoperability Patient Access API specifications](#).
- b. CalMHSA Connex provides technology that client/patient data is made available through the API in a standardized and secure format, adhering to [CMS Interoperability Patient Access API specifications](#).
- c. CalMHSA Connex implements a robust authentication and authorization mechanism in alignment with [OpenID Connect Core 1.0](#) to verify the identity of individuals accessing client/patient information through the API.
- d. Information provided through the Patient Access API via CalMHSA Connex will, at a minimum, adhere to the [United States Core Data for Interoperability \(USCDI\) version 1.0.0 and Version 3.0.0](#).
- e. The data Sonoma County Department of Health Services, Behavioral Health Division maintains is available within one business day of receipt or within one business day after a claim is adjudicated or encounter data is received for dates of service on or after January 1, 2016.
- f. Privacy and Security:
- g. CalMHSA Connex will safeguard client/patient data exchanged through the API by ensuring compliance with [CMS Interoperability Patient Access API specifications](#).

- h. CalMHSA Connex will adhere to HIPAA regulations and other relevant privacy laws when handling and transmitting protected health information (PHI).
- i. Clients/patients are responsible for proper vetting and selection of third-party applications. Sonoma County Department of Health Services, Behavioral Health Division nor CalMHSA is responsible, nor makes any claims towards the appropriate and authorized use of data of client's/patient's selected 3rd party application once API is active.
- j. Steps that clients/patients may consider taking to help protect the privacy and security of their health information and the importance of understanding the security and privacy practices of any application to which they entrust their health information can be found in the Sonoma County Department of Health Services, Behavioral Health Division Beneficiary Handbooks.

It is possible that 3rd party applicants are not likely to be HIPAA-covered entities. An overview of which types of organizations or individuals are and are not likely to be HIPAA-covered entities, the oversight responsibilities of the Office for Civil Rights (OCR) and the Federal Trade Commission (FTC), and how to submit a complaint, can be found in the Sonoma County Department of Health Services, Behavioral Health Division Beneficiary Handbook

V. Procedures

A. API Accessibility:

1. CalMHSA Connex will make available a Sonoma County Department of Health Services, Behavioral Health Division-specific API for the purposes of connecting through qualified third-party applications.
2. CalMHSA Connex API documentation and resources can be found at [CalMHSA Connex - California Mental Health Services Authority](#).
3. Clients/patients are free to select a qualified application of their choosing to facilitate the retrieval of their data.
4. Authorized 3rd party API access - Third party applications must adhere to specifications and guidelines of the [CMS Interoperability Patient Access API specifications](#).
 - a. The following minimum technical requirements threshold must be met before 3rd party access can be granted:
 - i. Compliance with HL7 FHIR standard (minimum 4.0.1)

- ii. Compliance with CARIN Consumer Directed Payer Data Exchange Implementation Guide
 - iii. Compliance OAuth 2.0 Protocol
 - iv. Utilization of RESTful API
- b. The following minimum business requirements have been set before 3rd party access can be granted:
 - i. 3rd party application can provide evidence and public disclosure of HIPAA compliance, or comparable information security processes and procedures.
 - ii. 3rd party application makes available publicly, and without restriction, their privacy and data access policy.
 - iii. 3rd party application does NOT participate in the selling or sharing of identifiable information.
- 5. 3rd Party Application API Revocation/Denial - Should 3rd party applications be found participating in suspicious activity or found to not comply with required components, CalMHSA Connex and/or Sonoma County Department of Health Services, Behavioral Health Division may choose to temporarily suspend access pending formal investigation.
 - a. Denial of access will occur when 3rd party application requesters do not meet all the criteria listed above under "Authorized 3rd Party API Access." At the conclusion of the investigation, CalMHSA Connex and/or Sonoma County Department of Health Services, Behavioral Health Division can reinstate API access or complete revoke access.
 - b. Suspicious activity includes, but is not limited to:
 - i. Sudden traffic increase: A sudden and significant increase in network traffic, especially from a single IP address or IP range. For example, 100 requests per second to 500 requests per second.
 - ii. Unusual traffic: A flood of traffic from users who share a behavioral profile, such as device type, geolocation, or web browser version.
 - iii. Excessive spam: An excessive amount of repeated requests
- 6. Third party application providers may reach out to CalMHSA Connex system administrators via [CalMHSA Connex - California Mental Health Services Authority](#) and complete the "Request Authorization" form to establish client/patient authorized access to the given client's/patient's data for the exclusive purpose of client/patient access.

B. Authentication, Authorization, and Security:

1. Align with required authentication and authorization mechanisms as indicated by the [CMS Interoperability Patient Access API specifications](#).
2. CalMHSA Connex will implement encryption protocols to secure client/patient data transmitted through the API.
3. CalMHSA Connex will establish access controls and monitor API usage to detect and respond to any suspicious activities promptly.
4. CalMHSA Connex requires client/patient validation to ensure calls to the API are specific to the correct client/patient, and to prevent unauthorized access. The Process includes:

- a. Assuming 3rd party applicant meets technical and business criteria outlined in the "Authorized 3rd Party API Access" section of this document, CalMHSA will grant the third-party application access to the Patient Access API.
- b. A successful API call requires each patient to be issued a unique client identifier that will be available to the counties via the Connex Portal. The third-party application will not be able to access patient data without the unique identifier.

NOTE: The client identifier is not an authentication process that requires the client/patient to login, but rather a unique code that ensures that the 3rd party application is only able to retrieve a specific client/patient's data and not have the ability to search and retrieve other unrelated data within Connex.

- c. Client/Patient Support:
- d. Clients/patients of Sonoma County Department of Health Services, Behavioral Health Division shall be referred to the respective support of their chosen third-party application for assistance. Third party application vendors can then reach out to CalMHSA Connex system administrators at FHIRAPI@calmhsa.org to troubleshoot any potential issues with the patient access API.
- e. Sonoma County Department of Health Services, Behavioral Health Division Support:
- f. Sonoma County Department of Health Services, Behavioral Health Division end-users may reach out to CalMHSA with any questions or issues at connex@calmhsa.org. In relation to the CMS Patient Access API, clients/patients should NOT be referred to CalMHSA under any

circumstance. Please see section “III. Client/Patient Support” above for additional information.

- g. Regular Audits and Monitoring:
- h. CalMHSA Connex system administrators conduct regular audits of the CMS Interoperability Patient Access API to assess compliance and identify areas for improvement.
- i. At a minimum, CalMHSA Connex uses automated tools such as AWS Shield, AWS WAF, and Cloud Watch that ensure proper security, connectivity, and infrastructure integrity will run continuously.
- j. System Administrator facilitated audits will occur daily to ensure proper functionality and compliance with relevant API standards and regulatory requirements.
- k. The audits include a review of the audit logs and any potential risks that were flagged by the monitoring system.
- l. Ensuring all software related to security and integrity are up to date to prevent misuse of the APIs.
- m. Ensure monitoring tools are properly configured to ensure any potential risk is immediately flagged.
- n. Ensure internal penetration testing has been completed and up to date.
- o. CalMHSA Connex system administrators will monitor API usage and performance to ensure seamless access for clients/patients and troubleshoot any issues promptly.
- p. Sonoma County Department of Health Services, Behavioral Health Division will ensure that data received from its Network Providers and Subcontractors is accurate and complete by verifying the accuracy and timeliness of reported data.
- q. At a minimum, Sonoma County Department of Health Services, Behavioral Health Division will screen the data for completeness, accurate logic, and consistency; and collect service information in standardized formats to the extent feasible and appropriate (42 CFR § 438.242(3)).
- r. County requests for utilization data will be provided with within 7 business days of request.

VI. Forms

None

VII. Attachments

Sonoma County Department of Health Services, Behavioral Health Division
Beneficiary Handbooks, and relevant member education

[Mental Health Beneficiary Handbook \(ca.gov\)](#)

[MHP Beneficiary-Handbook-Spanish \(12.27.23\).pdf \(ca.gov\)](#)