

San Mateo County Behavioral Health & Recovery Services  
**EXCHANGE of INFORMATION: Guide for Sharing**  
 BHRS Policy 03-01, Attachment G added March 13, 2013

The following guide is designed to assist staff members answer the question  
**“May I share this client’s information with the Agency or Person who is asking?”**

**SECTION I** This section applies to **all MH staff members** (working in either an AOD or MH setting), including **AOD staff working as part of a MH team** within BHRS (i.e., billing under a MH treatment program).

<b>When asked for information about a client receiving <u>MENTAL HEALTH</u> services.</b>	
<b>For MH clients/programs: If you are asked to share PHI, other information, or to confirm if the person is a client, by or for</b>	<b>May the Mental Health Provider release this client’s PHI, or talk with the requestor about the client, WITHOUT a signed Consent to Release Information?</b>
<b>Treatment</b> of shared client	<b>Yes</b> , consent is not required for treatment providers.
<b>Payment</b> – for mental health services	<b>Yes</b> , consent is not required for information needed to pay for claimed services.
<b>Operations</b> – QM, Audits	<b>Yes</b> , consent is not required for operations such as QM, audits, approved research.
AOD Agency providing treatment to client.	<b>Yes</b> , may share with AOD agency.
AOD Agency not providing treatment to client.	<b>No</b> , may not share PHI but may provide general consultation.
Attorney/DA	<b>No</b> , may not share without Client Consent. (See BHRS Policy 96-14, Subpoenas...). <u>Note</u> : If there is a Court Order or consent you may share but only after consultation with QM and/or County Counsel.
Access Team or a treatment team from another county	<b>Yes</b> , no consent is required to share client information with other treatment providers.
Community Agency that is providing treatment to client.	<b>Yes</b> , may share PHI without client consent.
Community Agency that is not providing treatment	<b>No</b> , client consent is required to share PHI because these are not treatment providers.
Golden Gate Regional Center (GGRC)	<b>No</b> , client consent is required to share PHI; GGRC is not a covered entity – i.e., is not a treatment provider.
Housing Provider that <b>is also a treatment provider</b>	<b>Yes</b> , may share PHI with treatment provider at a housing facility (Redwood House, Wally’s Place, etc.) or mental health providers located within shelter.
Housing Provider, including B&C operator, that <b>does not provide treatment</b>	<b>No</b> , client consent is required to share PHI with <u>B&amp;C Operator</u> as well as with other general housing providers.
HSA clinical staff	<b>No</b> , client consent is required to share PHI.

When asked for information about a client receiving <u>MENTAL HEALTH</u> services.	
For MH clients/programs: If you are asked to share PHI, other information, or to confirm if the person is a client, by or for	May the Mental Health Provider release this client's PHI, or talk with the requestor about the client, WITHOUT a signed Consent to Release Information?
Jail Correctional/ JV Detention Correctional	<b>No</b> , program staff <u>not assigned to YSC</u> may not share with correctional staff without client consent. <b>Only YSC MH</b> staff may share some information, however this is limited. At YSC, <b>MH</b> staff may share within established protocols.
Jail Health/Juvenile Detention Health	<b>Yes</b> , client consent is not required to share specific medication and treatment information with <i>Medical/Mental Health Staff</i> .
Medical Provider/Hospital/ Primary Care	<b>Yes</b> , client consent is not required to share clinical info about shared cases or during referral but Need-To-Know applies; for example, cardiologist may need to know medications prescribed but not client's complete psychiatric history.
Parole/Probation Officer	<b>No</b> , client consent is required to share client information with officers.
Pathways	<b>No</b> , client consent is required to share client information with court probation staff . <b>Yes</b> , MH staff may share information but only with Pathways staff.
Police	<b>No</b> , client consent is required to share PHI or other information when police make a general inquiry. <b>Yes</b> , no consent is required if BHRS staff requests a welfare check, reports a client who is missing, requests assistance with 5150 or makes an abuse report. That is, MH may share PHI without client consent only under safety-related circumstances listed in the Notice of Privacy Practices.
SMART Team	<b>Yes</b> , client consent is not required to share PHI for 5150 or welfare check.
Social Security Administration	<b>No</b> , client consent is required to share PHI; SSI is not a TPO covered entity.
Social Services- HSA, DFCS	<b>No</b> , if the parent is still the legal guardian, the parent's consent is needed to share information with the court or social worker. <b>Yes</b> , <u>if</u> consent is given through the court <u>but only after</u> you request and receive documentation of the client's legal status.
Teachers, School counselors	<b>No</b> , parent's consent is required to share PHI or other information.

**SECTION II** This section applies to **all MH staff members** (working in either an AOD or MH setting), including **AOD staff working as part of a MH team** within BHRS (i.e., billing under a MH treatment program).

**When asked for information about a client receiving care for  
CO-OCCURRING condition/s.**

<b>Regarding Co-Occurring Clients: IF you are asked to</b>	<b>May the Mental Health Provider release this client's PHI, or talk with the requestor about the client, WITHOUT a signed Consent to Release Information?</b>
Re-disclose AOD Treatment Information <u>received from</u> an AOD Treatment Provider	<b>No</b> , Mental Health & AOD Staff <b>may not</b> re-disclose client information that was received from or shared by an AOD Provider covered under 42 CFR, Part 2 <b>without</b> the client's signed Authorization/Consent.
Re-disclose AOD Treatment Information <u>shared by</u> the Client to an MH Provider	<b>Yes</b> , Mental Health Staff <b>may</b> re-disclose client information received directly from the client <b>without</b> the client's signed Authorization/Consent.
Share the Mental Health Diagnosis given by an MH team or agency provider, including a Substance Abuse Diagnosis	<b>Yes</b> , this is part of the MH treatment.
Share participation of an MH client in a substance abuse group within a mental health program	<b>Yes</b> , this is part of the MH treatment. However, the treatment's focus is primarily mental health, with the substance use always in the context of its relationship to the mental health diagnosis.

### **SECTION III**

This section applies to **all AOD staff members** working in an AOD program.

<b>When asked for information about a client receiving care for <u>ALCOHOL &amp; OTHER DRUGS</u> condition/s.</b>	
<b>Regarding AOD Clients: IF you are asked to share PHI, other information, or to confirm if the person is a client, by or for</b>	<b>May the AOD Provider Release this client's PHI or talk with the requestor about the client WITHOUT signed Consent to Release Information?</b>
Treatment of shared client	<b>No</b> , consent is required for treatment providers.
Payment	<b>No</b> , consent is required for information needed to pay for claimed services.
Operations – QM, Audits, approved research	<b>Yes</b> , consent is not required for QSO <u>operations</u> such as QM, audits, and approved research.
QSO - Qualified Service Organization - BHRS administration (including the Call Center, MIS, QM and the eCC team.)	<b>Yes</b> , client consent is not required; AOD may and should share a client's PHI or other information on an "as needed" basis with any member of the QSO (per contract with BHRS).
AOD Community Agency that is providing treatment to client.	<b>No</b> , client consent is required to share PHI; AOD may listen to, or receive written information but may not share PHI without client consent.
AOD Community Agency not providing treatment to client.	<b>No</b> , client consent is required to share PHI or other information.
Attorney/DA	<b>No</b> , client consent is required to share PHI or other information. (See BHRS Policy 96-14, Subpoenas to Release Records.)

**When asked for information about a client receiving care for  
ALCOHOL & OTHER DRUGS condition/s.**

<b>Regarding AOD Clients: IF you are asked to share PHI, other information, or to confirm if the person is a client, by or for</b>	<b>May the AOD Provider Release this client's PHI or talk with the requestor about the client WITHOUT signed Consent to Release Information?</b>
	<u>Note:</u> IF there is a Court Order or consent you may share <u>but only after</u> consultation with QM and/or County Counsel.
Call Center Team	<b>Yes</b> , client consent is not required to share PHI with Call Center Staff at BHRS – The call center is part of the QSO stated in your contract with the county.
Community Agency that <u>is</u> providing treatment to client.	<b>No</b> , client consent is required to share PHI or other information.
Community Agency that <u>is not</u> providing treatment	<b>No</b> , client consent is required to share PHI or other information.
GGRC	<b>No</b> , client consent is required to share PHI; GGRC is not a covered entity.
Housing Provider that is also a treatment provider	<b>No</b> , client consent is required to share PHI or other information.
Housing Provider, including B&C operator, that does not provide treatment	<b>No</b> , client consent is required to share PHI or other information.
HSA clinical staff	<b>No</b> , client consent is required to share PHI or other information.
Jail Correctional/ JV Detention Correctional	<b>No</b> , client consent is required to share PHI or other information.
Jail Health/Juvenile Detention Health	<b>No</b> , <u>generally</u> client consent is required to share PHI or other information. <b>Yes</b> , <u>only if</u> the client is having a medical emergency. <b>Yes</b> , <u>if</u> the AOD staff is part of the “Assessment Team” at a correctional facility, they do not fall under 42 C.F.R and you may share as needed.
Medical Provider/Hospital/ Primary Care Provider	<b>No</b> , <u>generally</u> client consent is required to share PHI or other information. <b>Yes</b> , <u>only if</u> the client is having a medical emergency.
Parole/Probation Officer	<b>No</b> , client consent is required to share PHI or other information.
Pathways	<b>No</b> , client consent is required to share PHI or other information.
Police	<b>No</b> , client consent is required to share PHI or other information.
SMART Team	<b>No</b> , <u>generally</u> client consent is required to share PHI or other information. <b>Yes</b> , <u>only if</u> the client is having a medical emergency.
Social Security Administration	<b>No</b> , client consent is required to share PHI; SSI is not a TPO covered entity.
Social Services- HSA, DFCS	<b>No</b> , if the parent is still the legal guardian, the parent's consent is needed to share information with the court or social worker. <b>Yes</b> , <u>if</u> consent is given through the court <u>but only after</u> you request and receive documentation of the client's legal status.
Teachers, School counselors	<b>No</b> , parent's consent is required to share PHI or other information.

**NOTE:** Certain BHRS teams (ex., Juvenile Justice) may operate with partner agencies under specific permissive MOU's. Consult with your supervisor when questions about disclosure arise.