Policy Title: Care Coordination  
Policy #: RS - 24

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<td>Kathleen Torella, Director Community Services, Housing, and Community Development</td>
<td>October 1, 2018</td>
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Applies to: ☒ Internal ☐ External

References

- 42 Code of Federal Regulations (CFR) Part 438 – Managed Care
- 42 CFR Part 431- State Organization and General Administration
- Washington Administrative Codes (WAC)
- WAC 246-341-0610 – Clinical Assessment
- WAC 246-341-640 – Clinical – Additional Record Content
- WAC 246-341-0620 - Clinical – Individual Service Plan
- WAC 246-341-0610 – Clinical - Assessment
- 45 CFR Part 160 – Health Insurance Portability and Accountability Act (HIPAA)
- 42 CFR Subpart F 431.300 – Safeguarding Information – Basis and Purpose
- 42 CFR Subpart F 431.301 - Safeguarding Information- State Plan Requirements
- 42 CFR Subpart F 431.302 - Safeguarding Information – Purpose Directly Related to State Plan Administration
- 42 CFR Part 2 – Confidentiality of Substance use Disorder (SUD) Patient Records

Scope

The Spokane County Behavioral Health Organization (SCRBHO) and its network providers.

1. Purpose

1.1. The SCRBHO values the Individual and his or her right to self-determination. The SCRBHO and its network providers shall provide a full range of services designed from the perspective of hope, recovery and resiliency. This perspective is based on a person-driven behavioral health system of care and a recovery and resiliency model focusing on strength-based concepts, and the provision of responsive and effective services throughout the system of care.

1.2. Individuals enrolled in SCRBHO-funded behavioral health services may present with complex behavioral and physical health needs which require coordination of services between contracted providers and other systems of care, including primary health care. The need for coordination of care may occur at any time the Individual is enrolled.

1.3. The SCRBHO and its network of Behavioral Health Agency (BHA) providers shall coordinate healthcare services for enrolled individuals to ensure ongoing sources
of care appropriate to the Individual's needs are identified and accessed and care is taken to prevent duplication of activities among service providers to the widest extent possible. The SCRBHO and its network providers shall ensure that in the process of coordinating care each Individual's privacy is protected in accordance with the privacy requirements of HIPAA when applicable.

2. Definitions

2.1. Care Coordination: the deliberate organization of care activities between two or more providers/agencies involved in an Individual's care to facilitate appropriate quality services. Organizing and coordinating care involves marshaling providers, community partners, and resources needed to carry out all required care activities, which is often managed by the exchange of information among providers responsible for different aspects of the Individual's care. Care coordination is intended to maximize the value of services delivered to individuals to effectively achieve the goals of treatment and care.

2.2. Special Healthcare Needs: include any physical, developmental, mental, sensory, behavioral, cognitive, or emotional impairment or limiting condition that requires medical management, healthcare intervention, and/or use of specialized services or programs. The condition may be congenital or developmental, or acquired through disease, trauma or environmental cause and may impose limitations in performing daily self-maintenance activities or substantial limitations in a major life activity.

2.3. Primary Healthcare Provider: a health care provider who has the responsibility for supervising, coordinating, and providing primary healthcare to an enrolled individual. Primary Healthcare Providers include, but are not limited to pediatricians, family practitioners, general practitioners, internists, naturopathic physicians, medical residents (under the supervision of a physician), or Advanced Registered Nurse Practitioner (ARNP).

3. Policy

3.1. The SCRBHO and its network providers shall:

3.1.1. Ensure that each enrolled Individual has access to a primary healthcare provider appropriate to his/her needs. The BHA provider must coordinate care with the primary healthcare provider and managed care organization (MCO) as needed and ensure complex medical needs are tracked through the individual service plan and documented in clinical progress notes.

3.1.1.1. Ensure that an appropriate referral is made to a physical primary healthcare provider when there is a suspected or identified physical healthcare problem. The provider will coordinate with the PCP and any (MCO) serving the enrolled Individual. The Individual's service plan will identify any medical concerns and plans to address them.

3.1.2. Each enrolled Individual is assessed by the appropriate credentialed professional to identify any ongoing special conditions that may require a special course of treatment or regular care monitoring. The Individual's
service plan will be developed with the Individual, in consultation with any specialist and incorporate the Individual’s special healthcare needs. The Individual should have direct access to specialists.

3.1.3. Each Individual’s healthcare needs will be communicated with other service providers within the scope of a signed release of information or applicable law to prevent duplication of activities.

3.1.4. Ensure that there is coordination with other service delivery systems responsible for meeting the identified needs of an individual.

3.2. The SCRBHO’s contracted BHAs shall ensure that in the process of coordinating care, each Individual’s privacy is protected in accordance with the privacy requirements detailed in HIPAA when applicable.

3.2.1. The BHA will follow restrictions on disclosure of Individual’s information, security for written records and disposition of records for discontinued programs.

3.2.2. The BHA will document the purpose and circumstances of disclosure when coordinating healthcare services for all Individuals regardless of consent.

3.2.3. The BHA will notify enrollees of the circumstances in which disclosure is permitted without the Individual’s consent.

3.3. The SCRBHO and its network providers will ensure information exchanged between the SCRBHO and the BHA is only to the extent necessary to assist in the valid administrative needs of the program receiving information and is adequately stored and protected against unauthorized disclosure.

3.4. The SCRBHO shall monitor its network of BHAs care coordination and other healthcare services furnished to Individuals and ensure that confidentiality of each Individual’s healthcare and/or drug and alcohol records, as well as disclosure are followed.

4. Procedures/Mechanisms

4.1. The BHA shall document screening, assessments, referrals and care coordination for each Individual’s physical needs, medical needs, special healthcare needs, or other needs in the clinical record to include intakes/assessments, individual service plans, and progress notes.

4.2. The SCRBHO and network of BHAs will ensure that in the process of coordinating care, each Individual’s privacy is protected in accordance with the privacy requirements detailed in HIPAA (45 CFR Part 160), 42 CFR Subpart F 431.300, 431.301, and 431.302 and 42 CFR Part 2, when applicable, in compliance with the SCRBHO’s and BHA’s confidentiality policies.

4.3. The SCRBHO and its network providers will ensure information exchanged between the BHO and the BHA is only to the extent necessary to assist in the valid administrative needs of the program receiving information and is adequately stored and protected against unauthorized disclosure in accordance with the SCRBHO’s and BHA’s confidentiality policies.

4.4. The SCRBHO shall monitor its network of Behavior BHA’s care coordination and other healthcare services furnished to Individuals and ensure that confidentiality
of Individual's healthcare and drug and alcohol records, when applicable, as well as disclosure are followed in accordance with the SCRBHO Quality Management (QM) – 8 Program Monitoring, Management Information System (MIS) - 57 Confidential Information, and MIS – 58 Mobile Health Information Organization policies.

5. Monitoring

5.1. The SCRBHO will monitor the provider's corresponding policy through the annual contracted provider monitoring with the appropriate recommendations, findings, or corrective actions required in performance improvement projects.