POLICY TITLE:	MDHHS STANDARD CONSENT TO SHARE	POLICY # 9.14	REVIEW DATES	
Topic Area:	**CORPORATE COMPLIANCE**	**ISSUED BY:**	7/21/23	3/1/26
Applies to:	Lakeshore Regional Entity (LRE) Staff and Operations			
Developed and Maintained by:	CEO and Designee	**APPROVED BY:** Chief Executive Officer		
Supersedes	N/A	**Effective Date:** July 22, 2022	**Revised Date:** March 1, 2026	

I. PURPOSE

To ensure that LRE complies with the Michigan Department of Health and Human Services (MDHHS), Medicaid Managed Specialty Supports and Services Contract regarding the use and acceptance of the current MDHHS Consent to Share Behavioral Health Information Form. Michigan Public Act 129 of 2014 mandated that the Michigan Department of Health and Human Services (MDHHS) develop a standard release form for exchanging and sharing confidential mental health and substance use disorder information for use by public and private agencies, departments, corporations, or individuals that are involved with treatment of an individual experiencing serious mental illness, serious emotional disturbance, developmental disability, or substance use disorder.

II. POLICY

The Lakeshore Regional Entity (LRE) delegates the responsibility to the Member Community Mental Health Services Program (CMHSP) and Provider Network for obtaining consents to share information such as mental health records or information on treatment or referrals for alcohol and substance use services. The consent form is to be utilized for all electronic and non-electronic Health Information Exchange environments. This would include hard copies of records that are passed from one provider to another. Member CMHSP and SUD Providers will utilize, accept, and honor the Michigan Department of Health and Human Services (MDHHS) standard consent form that was created by MDHHS under Public Act 129 of 2014 and revised under Section 3221 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020 (MDHHS-5515 Consent to Share Behavioral Health Information). LRE will not use or disclose protected health information (PHI) without written authorization except were permitted or required by state and/or federal law(s).

A. Sharing Protected Health Information NOT Requiring a Signed Consent:

1. Health Insurance Portability and Accountability Act (HIPAA) and the Michigan Mental Health Code (under Public Act 559 of 2016) allows for the sharing of

mental health records for the purposes of treatment, payment, and healthcare operations.

2. Sharing information for Substance Use Service under the following conditions (42 CFR- Part 2; Subpart D and E):
    a. Medical Emergencies
    b. Research
    c. Audit and Evaluation
    d. Court Ordered

B. Sharing Protected Health Information that DOES Require a Signed Consent:
    1. Behavioral Health (including mental health services, services for persons with Intellectual, Developmental Disabilities, and substance use disorder services for purposes other than payment, treatment, and healthcare operations.
    2. Treatment, payment, and business operations related to services delivered to persons receiving substance use services (one-time consent).
    3. Substance use treatment records, or testimony relaying the content of such records may not be used or disclosed in any civil, administrative, criminal, or legislative proceedings against a person receiving substance use treatment services without their specific written permission or a court order authorizing the use or disclosure. A court order for this purpose must be accompanied by a subpoena or similar legal mandate compelling the disclosure.

C. MDHHS Standard Consent Form CANNOT be used for the following:
    1. To share psychotherapy notes (as defined by federal law - 45 CFR164.501)
    2. Release of information pertaining to HIV infection or acquired immunodeficiency syndrome (unless by court order or subpoena as defined in the Public Health Code – Section 333.5131)
    3. For a release from any person or agency that has provided services for domestic violence, sexual assault, stalking, or other crimes.

III. APPLICABILITY AND RESPONSIBILITY

This policy applies to Lakeshore Regional Entity (LRE) staff and operations

IV. MONITORING AND REVIEW

The CEO and designee will review this policy on an annual basis.

V. DEFINITIONS

Care Coordination: A set of activities designed to ensure needed, appropriate, and cost-effective care for beneficiaries. As a component of overall care management, care coordination activities focus on ensuring timely information, communication, and collaboration across a care team and between Responsible Plans. Major priorities for care coordination in the context of a care management plan include:

- Outreach and contacts/communication to support patient engagement,
- Conducting screening, record review and documentation as part of Evaluation and Assessment,

- Tracking and facilitating follow up on lab tests and referrals,
- Care Planning,
- Managing transitions of care activities to support continuity of care,
- Address social supports and making linkages to services addressing housing, food, etc., and
- Monitoring, Reporting and Documentation.

CMHSP: Community Mental Health Service Programs

Consent: A written agreement executed by a recipient, a minor recipient's parent, or a recipient's legal representative with authority to execute a consent, or a verbal agreement of a recipient that is witnessed and documented by an individual other than the individual providing treatment.

Contractor: Medicaid Health Plans and Prepaid Inpatient Health Plans

DHHS: Department of Health and Human Services

MDHHS: Michigan Department of Health and Human Services

Network Payment: Activities undertaken by (1) A health plan to obtain premiums or to determine or fulfill its responsibility for coverage and provision of benefits under the health plan; or (2) A health care provider or health plan to provide reimbursement for the provision of health care.

PIHP: Prepaid Inpatient Health Plan

Responsible Plan: Contractors with responsibility for Medicaid beneficiaries within the shared service area

SUD: Substance Use Disorder

Treatment: The provision, coordination, or management of health care and related services by one or more health care providers, including the coordination or management of health care by a health care provider with a third party; consultation between health care providers relating to a patient; or referral of a patient for health care from one health care provider to another.

VI. RELATED POLICIES AND PROCEDURES

- Lakeshore Regional Entity Compliance Plan
- Compliance Reporting Responsibility Procedure

VII. REFERENCES/LEGAL AUTHORITY

- Michigan Medicaid Managed Special Supports and Service Contract
- Michigan Mental Health Code, Sections 330-1261, 330-1262 and 330-1263

VIII. ATTACHMENTS:

- MDHHS-5515 Consent to Share Behavioral Health Information

- Background Information on MDHHS-5515
- Behavioral Health Consent Form Handout
- Frequently Asked Questions for Michigan Residents About MDHHS-5515
- Frequently Asked Questions for Providers and Other Organizations about MDHHS-5515

IX. CHANGE LOG:

Date of Change	Description of Change	Responsible Party
7/22/2022	New Policy	Chief Compliance Officer
7/22/2023	Annual Review	CEO and Designee
3/1/2026	Updated policy based upon revisions to 42 CFR, part 2 and MDHHS-5515 form	CEO and Designee