



SANTA CRUZ COUNTY
Behavioral Health Services

POLICIES AND PROCEDURE MANUAL



**Subject: Application Programming Interface (API)
Updates to Provider Directory for MHP & DMC-ODS**

Policy Number: 4307
Reference to BHIN No. 22-068

Date Effective: 3/1/2024

Pages: 3

Replaces: N/A

**Responsible for Updating:
Information Technology (IT) &
BH Administration**

Approval: DocuSigned by:
Tiffany Cantrell-Warren
89088AE6B9B64AF
Behavioral Health Director

2/29/2024

Date

BACKGROUND:

In May 2020, CMS finalized the Interoperability and Patient Access final rule (CMS Interoperability Rule), which seeks to establish beneficiaries as the owners of their health information with the right to direct its transmission to third-party applications.¹² CMS and the Office of the National Coordinator for Health Information Technology have established a series of data exchange standards that govern such specific transactions.³

Assembly Bill (AB) 133 (Committee on Budget, Chapter 143, Statutes of 2021) implements various components of the CalAIM initiative, including those components in Welfare and Institutions Code (W&I) section 14184.100, et seq., and Health and Safety Code section 130290 to implement the California Health and Human Services Data Exchange Framework, including the CMS Interoperability Rule. The Department of Health Care Services is authorized to develop and implement Article 5.51 of the W&I Code and the requirements of the California Health and Human Services Data Exchange Framework.⁴ This Santa Cruz County Behavioral Health policy supports this implementation.

SCOPE:

This policy applies to all IT staff, vendors, and partners involved in the development, maintenance, and management of the Patient Access and Provider Directory APIs at Santa Cruz County Behavioral Health.

¹ [85 Federal Register 25510-25640.](#)

² Section 4003 of the Office of the National Coordinator for Health Information Technology 21st Century [Cures Act](#) defines "Interoperability" as health information technology that (1) enables the secure exchange and use of electronic health information without special effort on the part of the user; (2) allows for complete access, exchange, and use of all electronically accessible health information for authorized use under applicable state or federal law; and (3) does not constitute information blocking as defined in section 3022(a) of the Public Health Service Act.

³ The data exchange standards for the [Patient Access Application Programming Interface](#); [CARIN Implementation Guide](#); [Payer Data Exchange for US Drug Formulary](#); [Provider Directory Application Programming Interface](#).

⁴ [W&I section 14184.102\(d\)](#); [HSC section 130290\(j\)](#).

PURPOSE:

The purpose of this policy is to define a Provider Directory Application Programming Interface (API) and provide information regarding the maintenance of the Provider Directory API.

DEFINITIONS:

1. **Provider Directory Application Programming Interface (API):** The provider directory is compliant with 42 CFR section 431.70, is publicly accessible and standards-based and contains all the information regarding Santa Cruz County Behavioral Health Plan's providers, including contracted providers. The directory allows users to view providers within the BHS network and allows them to contact providers as desired.

POLICY / PROCEDURES:**1) Information Collected in the Provider Directory:**

The following information is included for every provider:

- a) Name of provider, medical group/foundation, independent physician/provider associations, or site as well as any group affiliation;
- b) National Provider Identifier number;
- c) Street address(es);
- d) All telephone numbers associated with the practice site;
- e) Website URL for each service location or physician provider, as appropriate;
- f) Specialty, as applicable;
- g) Hours and days when each service location is open, including the availability of evening and/or weekend hours;
- h) Services and benefits available;
- i) Whether the provider will accept new beneficiaries;
- j) Cultural and linguistic capabilities, including whether non-English languages and American Sign Language are offered by the provider or a skilled medical interpreter at the provider's office, and if the provider has completed cultural competence training;
- k) Whether the provider's office/facility has accommodations for people with physical disabilities, including offices, exam room(s), and equipment; and
- l) Telephone number to call the 24/7 access line.

2) How is the provider directory updated in myAvatar?

- a) Information is entered via the X12 274 Healthcare Provider Information Set. This information is used to transmit, update, and query a provider database. Data will be available as soon as it is entered into the 274 Provider Directory Definition database tables via a form within the Behavioral Health Electronic Health Record – myAvatar via a File Import. Provider data within our 274 tables is updated each month on the 23rd or the next following business day. A log of the updates is maintained within our myAvatar database.
- b) The Provider Directory API is updated no later than 30 calendar days after the BHP receives the provider information, or is notified of a change.

3) How is the Provider Directory Data accessed?

Santa Cruz Behavioral Health in partnership with our electronic health record (EHR) vendor, Netsmart, maintains a Provider Directory Application Programming Interface (API) that can be accessed by anyone at any time. More information regarding this API is available at: [Provider Directory \(santacruzhealth.org\)](http://ProviderDirectory(santacruzhealth.org)). On this site you will find an online printable provider directory that comes from the same database that stores all our

provider data. Also, you will find a simple search engine that accepts parameters and returns provider information.

PRIOR VERSIONS: N/A

REFERENCES: 42 CFR section 431.70

FORMS/ATTACHMENTS: None