

Department of Health Services
Timothy W. Lutz
Director



Divisions
Administration
Behavioral Health
Primary Health
Public Health

County of Sacramento

INFORMATION LETTER

Date: March 24, 2026

To: All County-Operated Behavioral Health Providers
All Contracted Behavioral Health Providers

From: Shelly Kunker, PsyD LMFT
Health Program Manager, Quality Improvement

Subject: Implementation of Authorization to Share Confidential Member Information (ASCFI) Form in SmartCare

Action Needed: Forward this notice to appropriate leadership, quality management, compliance, health information management, and direct service staff within your organization.

The Authorization to Share Confidential Member Information (ASCFI) is a standardized multi-provider authorization form developed by DHCS to document a member's consent for sharing health and social service information among care partners. This form meets the confidentiality requirements under HIPAA and 42 CFR Part 2 and replaces the Coordinated Care Consent (CCC) in SmartCare that will be sunset on March 31, 2026. Legislation AB133 requires the development of a mechanism that allows the use of Health Information Exchanges (HIEs) across our system of care, external health care entities, and housing partners. The purpose is to improve outcomes for Medi-Cal beneficiaries and address the real concern that current privacy laws—while critical—can unintentionally create barriers that negatively impact large populations. These barriers often limit our ability to coordinate care, link individuals to necessary supports such as housing, or make fully informed medical decisions.

The ASCFI form informs members of their right to opt out of these beneficial health information exchanges. If a member opts out, their information will not be shared through the HIE, even when a triggering or significant event occurs that would otherwise allow access to support their care.

Purpose and Goals

ASCFI was created to:

- Promote coordinated care by standardizing how consent is obtained and managed.
- Reduce barriers caused by complex privacy rules, outdated systems, paper-based forms, and fragmented data exchange.
- Support CalAIM programs by enabling secure, real-time data sharing between authorized **care partners**.
- Improve interoperability across electronic health record (EHR) systems

Care Partners:

- Primary Care physicians
- Mental Health Specialists
- Substance Use Prevention & Treatment providers
- Community-based organizations
- Correctional facility providers and case managers
- Health insurance plans, including Medi-Cal managed care plans and behavioral health plans
- Qualified health information organizations
- County health and human service agencies
- State health and human service agencies

Care Partners **DO NOT** include:

- Employers
- School District Administration
- Courts & Criminal Investigations
- Other third parties

Effective April 1, 2026, the ASCFI form in SmartCare must be implemented as follows:

- The ASCFI must be completed for every member at their next scheduled session on or after April 1, 2026 as part of the standard consent and information sharing process.
- The form must be reviewed with the member and/or caregivers. Each section should be discussed as there are sensitive areas like SUD (42 C.F.R. Part 2), LPS mental health, HIV, genetic data, and housing data that require explicit consent.
- This document replaces the Coordinated Care Consent already within SmartCare. Existing Coordinated Care Consents will continue to govern in-SmartCare data sharing until an ASCFI is created for that member and the **Coordinated Care Consent includes an end date**.
- The English version will be available in SmartCare as of April 1, 2026. The form will be translated into threshold languages and made available on the BHS website. Threshold language versions must be scanned into SmartCare, and the Clinician needs to sign the electronic

version indicating the Member signed the paper document. The Member is only required to sign the form in their primary language.

- Paper versions should be scanned into the *Consent To Treat* Scanned Document folder in SmartCare.
- Like any consent, the Member may revoke this at any time.
- The ASCMI must be completed annually.

When initiating ASCMI consent with members, please use the use the:

- Sacramento County MH NPI - 1043386659
- Sacramento County SUPT NPI -1275604977
- Sacramento County Tax ID - 94-6000529

CalMHSA guidance:

<https://2023.calmhsa.org/ascmi/>
[ASCOMI Form Webinar and Resources - 2023 CalMHSA](#)

Training links:

[ASCOMI Form Training Webinar - 2023 CalMHSA](#)

[ASCOMI-CalAIM](#)

[Authorization to Share Confidential Member Information \(ASCOMI\) Form: Non-AB 133](#)

Quality Management will be updating Documentation Training materials to reflect these changes. Please direct questions to

QMInformation@saccounty.gov

This and all notices can be found at:

<https://dhs.saccounty.gov/BHS/Pages/Provider-Notices.aspx>