

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

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**ADP BULLETIN**

Title: Implementation of Drug Medi-Cal Electronic Explanation of Balances		Issue Date: 10-11-02	Issue No. 02-20
Deputy Director Approval (signed by) JESSE A. McGUINN, M.S.W. Program Operations Division		Expiration Date: Until Notified	Supersedes Bulletin/ADP Letter No.
Function: [x] Information Management [] Quality Assurance [] Service Delivery [x] Fiscal [] Administration			

PURPOSE

This bulletin provides information to counties and direct providers regarding the availability of the Department of Alcohol and Drug Programs' (ADP) Drug Medi-Cal (DMC) electronic Explanation of Balances (**e-EOB**) data files through the California Department of Mental Health's (DMH) Information Technology Web Services (ITWS).

DISCUSSION

In response to county and provider requests for the State to automate the distribution of DMC EOB information, the Department has entered into an agreement with DMH to make data from the Department's DMC **e-EOB** files available online through the DMH ITWS (www.dmh.ca.gov). With the DMH ITWS, counties and direct providers can now download data from the DMC **e-EOB** files. In order to have access to the Department's DMC **e-EOB**, you must be enrolled on the DMH ITWS. The system security, confidentiality, ADP and DMH contacts, and operational instructions (Exhibit A) for the DMC **e-EOB** are discussed in this bulletin.

Access to the DMC **e-EOB** requires that an identifiable single source of contact between the Department and the county, and the Department and the direct provider be established to ensure that client confidentiality is maintained. As part of the process for gaining access to the DMC **e-EOB** data, users are required to submit a request to ADP signed by the County Alcohol and Drug Program Administrator or his/her designee. If you are a direct provider, the Executive Officer or his/her designee must sign and submit the request.



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ADP is requiring that each County Alcohol and Drug Program Administrator or if a direct provider, the Executive Officer, identify a primary and secondary source of contact with whom ADP and DMH staff may correspond on questions and policies related to the DMC e-EOB data transmission protocol. These contacts will also be required to approve enrollment requests for access to DMH ITWS and to ADP data.

Security

To protect client information, the ITWS has five security levels including server certificates, user ID and password, SSL-128 bit encryption, and WINZip or PKZip, a compression utility that includes a password to unzip the file. Counties/direct providers using the DMH ITWS must have Internet Explorer (version 5.5 sp 2 or greater) Web browsers that support 128-bit encryption.

Confidentiality

Federal regulations require that any alcohol and drug patient information remain confidential. Counties and providers are reminded that the e-EOB data contains alcohol and drug patient information that must be kept confidential. All users of the DMC e-EOB must ensure that this requirement is met. Therefore, all designated approvers will be required to certify that they have reviewed the confidentiality requirement (see [Exhibit B](#)). The confidentiality provision is also located on ADP's Web site at www.adp.ca.gov.

REFERENCES

None

HISTORY

None

QUESTIONS/MAINTENANCE

ITWS General Support (IT Help Desk) and Enrollment/Connecting support at DMH and ADP programmatic support contacts are located on the DMH ITWS Web site at <https://mhitws.cahwnet.gov>.

Counties, direct providers, and vendors can contact DMH about ITWS general support and user enrollment at (916) 654-3117 or e-mail to itws@dmhhq.state.ca.us.

For questions regarding this bulletin and the DMC e-EOB, please contact your Fiscal Management and Accountability Branch Analyst at (916) 323-2043. Questions may also be submitted electronically by e-mail to dmcinv@adp.state.ca.us.

EXHIBITS

Exhibit A: [Drug Medi-Cal Electronic Explanation of Balances Operational Instructions](#)

Exhibit B: [Confidentiality Statement for Drug Medi-Cal Patient Data](#)

Exhibit C: [County/Direct Provider Approver Certification](#)

Exhibit D: [Vendor Approver Certification](#)

Exhibit E: [County/Direct Provider User Cancellation](#)

DISTRIBUTION

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Drug Medi-Cal Providers

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Direct Contract Providers

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