

Crisis Planning

Client Information Release Authorization

During emergencies, an Agency may elect to grant Credible authorization to access the medical records of their clients, and to provide information via telephone to designated representatives of the Agency. In addition, the Agency may grant Credible the right to generate and transmit Continuity of Care Documents (CCDs) to designated healthcare facilities.

To request either or both services, please designate up to three (3) currently active Agency employees by completing the form below.

Please note: Credible will collect and release this information at the behest of and under the direction of the Agency. The Agency remains solely responsible for insuring the proper release of this information via their appointed Designees.

Crisis Services Provided

If desired, Credible will provide the following services to Agencies via Agency Designees. Please check and initial each service the Agency wishes to enable.

- ☐ **_____ Data Access Service:** For authorized and designated Agency Designees, Credible will allow the Agency to call Credible and request information regarding a specific client. Credible will retrieve the client record and provide Designee with information from that client record. Credible will provide this at no charge for a period of seven (7) days from the Crisis Activation Date.
- ☐ **_____ Continuity of Care:** Credible can be instructed by the Designees to release client information, on an individual client basis, from your Domain to other healthcare facilities for the explicit purpose of ensuring continuity of care. This release will be limited only to information specified by the Agency Designees and will be transmitted via fax or Continuity of Care Document directly to the designated healthcare facility. Credible will provide this at no charge for a period of fourteen (14) days from Crisis Activation Date.

Security Protocols

To verify the identity of an Agency designee, Credible will require them to provide their date of birth and the last four digits of their social security number. Please review these protocols with the designees in advance.

Agency Designees

Please complete this form fully, providing all required information for up to three (3) currently active Agency employees. **Important Note:** The employees listed **must** have their Date of Birth and Social Security Number completed in their Employee Profile.

Designee 1

Employee Name: _____

Credible Username: _____

Service Requests Permitted by this Designee: ☐ Data Access Service ☐ Continuity of Care

Date of Birth: ____/____/____ • Last 4 SSN: ____ ____ ____ ____

Designee 2

Employee Name: _____

Credible Username: _____

Service Requests Permitted by this Designee: ☐ Data Access Service ☐ Continuity of Care

Date of Birth: ____/____/____ • Last 4 SSN: ____ ____ ____ ____

Designee 3

Employee Name: _____

Credible Username: _____

Service Requests Permitted by this Designee: ☐ Data Access Service ☐ Continuity of Care

Date of Birth: ____/____/____ • Last 4 SSN: ____ ____ ____ ____

Crisis Status Activation

These services are only available during an emergency for the Agency. To enable Crisis status for an Agency, please notify Credible by following the steps outlined below. The date of notification will be the Crisis Activation Date.

1. Create a task ticket.
2. The **Short Summary** must begin with "Crisis Status Activation", a space, and then your Agency's Domain Name. For example, "Crisis Status Activation ABCDEF".
3. Set **Priority** to "2".
4. For **Area/Section**, select "Other".
5. Under **Details**, state "Please activate Crisis Status for..." and your Agency's name.
6. Submit the task ticket.

Authorization

By your signature below you authorize Credible Behavioral Health, Inc., to access individual health records of your Agency's clients, and to provide the information retrieved to the Designees listed above, or to healthcare providers specified by the Designees.

Signature (CEO/ED): _____ Date: _____