

Provider Bulletin

Molina Healthcare of California

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Medi-Cal Managed Care Plan Responsibilities for Behavioral Health Data-Sharing – APL 26-004

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to the Medi-Cal line of business.

This notification is based on [All-Plan Letter \(APL\) 26-004](#), which can be found in full on the [Department of Health Care Services \(DHCS\) website](#).

What you need to know:

BACKGROUND

DHCS issued APL 26-004 as requirements for behavioral health data sharing across the Medi-Cal delivery system have been spread across multiple sources (e.g., state/federal laws and regulations, BHINs/APLs, policy memos, and contracts), creating the need for clearer, consolidated direction.

Medi-Cal managed care plans must support real-time exchange of members' behavioral health information with other Medi-Cal entities to improve care coordination and decision-making.

POLICY

Data Sharing Requirements

MHC will implement data-sharing practices consistent with federal and state laws, including adherence to HIPAA minimum standards. These requirements build on existing care coordination frameworks, such as the Federal Interoperability Rules and No Wrong Door policy.

MHC will be able to exchange referrals, including protected and personally identifiable information, with county behavioral health and Drug Medi-Cal programs. This includes identifying and referring members for substance use disorder treatment, with processes defined through required memoranda of understanding between all parties.

Provider Action

- Participate in data sharing and care coordination
- Support real-time data exchange
- Exchange referral information
- Share and receive ADT notifications
- Maintain electronic data exchange capabilities
- Collaborate through MOUs and agreements
- Comply with consent requirements
- Provide data for reporting and oversight
- Support member roster and data accuracy processes
- Comply with applicable privacy and security laws

What if you need assistance?

If you have any questions regarding the notification, please contact your [Molina Provider Relations Representative](#).



Real Time Data Sharing Requirements

MHC will implement policies to support bidirectional, real-time data sharing in compliance with state and federal care coordination requirements. “Real time” means exchanging the minimum necessary member information as soon as it becomes available, without delay, to support care coordination, referrals, and care transitions.

This includes sharing key data elements such as demographics, service information, diagnoses, medications, and lab results in standardized formats. State guidance aligns all entities under a common definition of timely data exchange to ensure consistent and effective coordination of care.

Memorandum of Understanding Requirements

MHC will establish memoranda of understanding (MOUs) with behavioral health plans and Drug Medi-Cal counties to support coordinated care for members. These agreements will include policies and procedures for real-time data sharing to ensure continuity of care.

Admission, Discharge, and Transfer Event Notifications

MHC will include policies in their agreements with behavioral health plans and Drug Medi-Cal counties to enable real-time sharing and receipt of admission, discharge, and transfer (ADT) event notifications for shared members. MHC will also require to exchange ADT notifications in real time with network providers that maintain electronic systems, including hospitals and other inpatient or residential facilities. These requirements extend to additional facility types beyond federal mandates to support comprehensive care coordination.

Sharing Member Rosters

MHC will share up-to-date member rosters with behavioral health plans, Drug Medi-Cal counties, and other entities at least monthly to support real-time exchange of admission, discharge, and transfer (ADT) notifications. These entities are also required to provide their member rosters to MHC to enable bidirectional data sharing.

This process ensures all parties can accurately send and receive ADT notifications when events occur, and may be facilitated through intermediaries such as health information exchange organizations or technology vendors.

Compliance with Consent Requirements and Adoption of a Standardized Consent Form

In most cases, member consent is not required to share health and social services information for treatment, payment, and health care operations under HIPAA and applicable state law. However, when consent is required, such as for certain substance use disorder or sensitive information, plans and providers must use compliant authorization forms.

To standardize this process, DHCS requires adoption of a single statewide consent form (ASCFI) to support consistent data sharing and care coordination. Members retain the right to revoke consent at any time, and plans must have systems in place to manage, store, and honor these consent preferences.

Data Sharing for Required State and Federal Reporting and Assessments

MHC will share necessary member and encounter data with behavioral health plans to support required state and federal reporting, quality measurement, and oversight activities. This includes data used for accountability reporting, performance measures, external quality review, and population health assessments.

Behavioral health plans and Drug Medi-Cal counties must also share corresponding data MHC to meet these obligations. Unlike care coordination activities, data sharing for reporting purposes is not required to occur in real time but must still be complete and compliant with applicable laws.

Compliance, Oversight, and Monitoring:

MHC will implement or update data-sharing policies to comply with this APL by April 1, 2026, and adopt the standardized consent form (ASCFI) by January 1, 2027.

Beginning January 1, 2027, DHCS will conduct monitoring and enforcement, including audits, corrective actions, and potential sanctions for noncompliance. Data exchange requirements will be incorporated into ongoing oversight activities to ensure continued compliance.