



Electronic Signature Request Checklist

Contract Agency Name: _____

Request Date: _____

_____, hereby attests that its software, _____
complies with the standards set forth by San Bernardino County Department of Behavioral Health (DBH).
This letter certifies that _____ complies with the following state and federal
laws, regulations or standards as required for electronic signatures (e-signature): (check all applicable)

- CA Government Code, Section 16.5
- Title 9 of the CA Code of Regulations, Division 1
- Title 2 of the CA Code of Regulations, Sections 22000-22005
- California Information Practices Act (CA Civil Code Section 1798 et seq.)
- Certification Commission for Healthcare Information Technology (CCHIT) certification criteria (version 2007 or newer) or equivalent: *Security: Access Control, Security: Audit, and Security: Authentication*
- The Confidentiality of Medical Information Act (CIMA) (CA Civil Code Section 56 et seq.)
- CA Government Code, Section 6254 Welfare and Institutions Code, Section 5328
- Title 21 of the Code of Federal Regulations, Part 11 et al.
- Electronic Signatures in Global and National Commerce Act of 2000 Health Information Portability and Accountability Act (HIPAA) privacy and security
- Applicable Security requirements of Title 45 of the Code of Federal Regulations
- Privacy requirements of Title 42 of the Code of Federal Regulations, Part 2 Compliance
- with all other applicable state and federal laws and regulations

Additionally, _____ attests it has complied and will continue to
comply, if required, with the following actions pertaining to _____ implementing
and maintaining the use of e-signatures for contracts with DBH:

- Maintain documentation demonstrating the development, implementation and maintenance of appropriate security measures that include, at minimum, the requirements and implementation features of those measures
- Maintain necessary documentation to demonstrate that security measures have been periodically reviewed, validated, updated and kept current
- Conform to county, state and federal laws and regulations regarding e- signature
- Complete annual submission of the Electronic Signature Certification attesting to compliance with the above stated regulations
- Complete annual submission of the Electronic Signature Agreement signed by individual providers requesting e-signature authorization and agreement of the provider to adhere to the terms of the use of an e-signature

- Utilize any of the following approaches to obtain client signatures:
 - Scan paper documents, treatment plans or other medical record documents containing client signatures;
 - Capture signature images from a signature pad;
 - Record biometric information such as a fingerprint using a fingerprint scanner; or,
 - Enter authenticating information known only to the client or authorized representative such as a password or personal identification number
 - For ADS Contractors, if client signature is unavailable, Contract Agency ADS Program Administrator or designee must provide an electronically signed explanation why signature not available
- Provide physical access to electronic health record (EHR) when DBH or State agencies conduct audits and reviews
- Provide computer access to the EHRs needed for an audit and review, including written procedures describing how to access the records
- Provide access, system or network, to EHRs, e.g. provide user IDs and passwords for DBH and State auditors
- Provide access to printers and capability to print necessary documents
- Provide access to scanned documents, if needed, which are readable and complete
- Ensure the electronic signature mechanism is:
 - Unique to the signer;
 - Under the signer's sole control;
 - Capable of being verified; and
 - Linked to the data so that, if the data is changed, the signature is invalidated.
- Provide technical assistance to DBH and State auditors as needed

Printed Name

Authorized Signature