

ConsentLink electronic consent management FAQ

What is ConsentLink?

ConsentLink is a free, voluntary electronic consent management (ECM) cloud-based software solution developed by the Washington State Health Care Authority (HCA). This system houses digital consent forms to share sensitive data such as substance use disorder (SUD), research, and sexually transmitted infection data. It is not intended to store HIPAA general consents for treatment.

ConsentLink is meant to replace paper-based consents or integrate with current electronic consent practices by enabling data exchange compliant with 42 CFR Part 2 and other relevant statutes.

ConsentLink reduces the time it takes to send and receive consent forms. The goal is to facilitate timely and efficient data exchange to foster whole person care, especially for marginalized populations.

Watch a demonstration of ConsentLink.

Contact [the ConsentLink team](#) to learn more and to start onboarding.

Who can use ConsentLink?

ConsentLink is currently available to providers who:

- Provide services to Apple Health (Medicaid) clients.
- Use HIPAA or 42 CFR Part 2-compliant consent forms.
- Are based in Washington State.

The system is not available for client use.

Do both sending and receiving providers need to register with ConsentLink to use it?

No. Digital forms are accessible with features that streamline workflows, such as:

- Optical character recognition for scanning paper-based consents
- Consent expiration reporting and other use analytics
- Customizable role-based access

HCA can help you configure ConsentLink for your organization's needs.

Can I see which providers use ConsentLink?

A provider sending a consent form can search for a provider receiving the consent form based on a prepopulated list of users.

Can I use ConsentLink to collect consent to treat and signed privacy forms?

ConsentLink currently supports consent form templates related to the exchange of sensitive client health data. These include consent forms compliant with HIPAA and 42 CFR Part 2 which are comprised of the [required elements for written consent](#) and include the legal data use verbiage.

Future phases will expand support for other consents, including:

- Tribal services
- Genetic testing
- Advance directives
- Social determinants of health

Data exchange, client referrals, and other follow-ups after an encounter with the [988 crisis line](#) are also planned to integrate with ConsentLink.

Can I use ConsentLink to exchange data?

ConsentLink only manages digital consent forms. Providers will continue current processes to exchange client data, such as sending patient files via secure email, US mail, and direct data exchange.

Is ConsentLink secure?

ConsentLink complies with all state, federal, and industry-standard security protocols and laws. The system completed a security design review by the Washington State Office of Cyber Security. It also completed a certification process by the Centers for Medicare and Medicaid Services (CMS) and meets all federal security requirements.

ConsentLink supports single sign-on via security assertion markup language (SAML).

Does ConsentLink follow federal standards and guidelines?

Yes. HCA follows the Substance Abuse and Mental Health Services Administration (SAMHSA) substance use confidentiality regulations and the Office of the National Coordinator (ONC) for health information technology trusted exchange framework and common agreement.

Are consents deleted automatically after they expire?

Consents are deactivated after they expire. Retention policies follow applicable state and federal law.

Yes, HCA follows SAMHSA's substance abuse confidentiality regulations as well as the Office of the National Coordinator for health information technology Trusted Exchange Framework and Common Agreement trusted exchange framework and common agreement.

Is HCA aware of the proposed changes for 42 CFR Part 2 published in the November 2022 notice of proposed rulemaking (NPRM)?

Yes, HCA is aware of the NPRM. HCA submitted formal comments from the agency to CMS during the public comment phase. In addition, the HCA is updating the consent to coordinate form to meet new requirements.

Will the consents be blanket consents, or will they be on a provider-to-provider basis?

Consents will follow 42 CFR Part 2 rules which allows for a general designation. HCA can add more granular provider-to-provider consents based on future use cases and user need.

Does ConsentLink sit on top of or integrate into the provider electronic health record system?

ConsentLink is accessible via Secure Access Washington (SAW) outside of an EHR. Later phases of the project may introduce interoperability with EHR systems.

Will consents be available in multiple languages?

HCA's baseline solution is in English, but in expanded phases we plan to add other languages. **Contact the ECM team** for other language recommendations.

What does the consent form look like?

HCA can help you configure your organization's form in ConsentLink during onboarding. HCA also has a template consent form available.

Is there an audit log that shows user actions?

Yes. ConsentLink has customizable roles and reports, allowing specific staff members to view actions taken.

Can I send secure emails or secure faxes through ConsentLink?

No. Future phases of ConsentLink may be interoperable with EHRs where these features are available.