

INSTRUCTIONS (INTERNAL USE ONLY)

Re: County of Riverside Authorization for Use and/or Disclosure of Patient Health Information

Riverside County staff with job functions that include providing the above-referenced Authorization Form to the patient or patient's legal representative shall review these instructions.

1. **Purpose:** The Authorization Form can only be used when the requested use or disclosure of the patient's health information is for the following purposes:

- (1) To provide and coordinate the patient's health care treatment and services, and
- (2) To improve the quality of health care that the patient receives.

The Authorization Form **cannot** be used for any other purpose(s).

2. **Health Care Provider / Organization:** Since the release of health information pursuant to this Authorization is for the purpose of health care treatment and services, the person / entity designated in the Authorization to release and/or receive the patient's health information must be a Health Care Provider / Organization.

3. **Copy to Patient:** When the Authorization has been requested by Riverside County for its own uses and disclosures, Riverside County must provide the patient with a copy of the Authorization.

4. **Psychotherapy Notes:** The Authorization Form cannot be used to release psychotherapy notes. A separate authorization is required for the release of psychotherapy notes.

“Psychotherapy notes” means notes recorded (in any medium) by a health care provider who is a mental health professional documenting or analyzing the contents of conversation during a private counseling session or a group, joint, or family counseling session and that are separated from the rest of the individual's medical record. Psychotherapy notes excludes medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of treatment furnished, results of clinical tests, and any summary of the following items: Diagnosis, functional status, the treatment plan, symptoms, prognosis, and progress to date. (45 C.F.R. § 164.501)

5. **Mental Health Treatment Information, HIV Test Results, Alcohol / Drug Treatment Information:**

Riverside County must not release mental health treatment information, HIV test results and/or alcohol or drug treatment information, unless specifically authorized by the patient or patient's legal representative (i.e. the appropriate box(es) are checked with initials provided).

6. **Revocation:** The manner of revocation is **not** limited to written request since LPS patients and patients of federally funded Substance Abuse Programs may revoke their authorization verbally.

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7. **Riverside County Substance Abuse Program:** When a Riverside County substance abuse program releases alcohol / drug treatment information pursuant to the Authorization Form, the information disclosed must be accompanied by the following written Legal Notice pursuant to 42 CFR 2.32:

LEGAL NOTICE REGARDING PROHIBITION ON REDISCLOSURE

This information has been disclosed to you from records protected by Federal confidentiality rules (42 CFR part 2). The Federal rules prohibit you from making further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient. (42 C.F.R. § 2.32)

8. **LPS Patients (Either Voluntary or Involuntary Recipients of Services):**

LPS information or records may be disclosed in communications between qualified professional persons in the provision of services or appropriate referrals, or in the course of conservatorship proceedings. [Cal. Welf. & Inst. Code § 5328(a)]

Consent Required. However, the consent of the LPS patient (or his/her guardian or conservator) must be obtained before LPS information or records may be disclosed by a professional person employed by a facility to a professional person not employed by the facility who does not have the medical or responsibility for the patient's care.

Approval Required. When the LPS patient designates persons to whom information or records may be released, the approval of the physician, licensed psychologist, social worker with a master's degree in social work, or licensed marriage and family therapist, who is in charge of the patient is required.

Note. LPS Act does not compel physician, licensed psychologist, social worker with a master's degree in social work, or licensed marriage and family therapist, nurse, attorney, or other professional person to reveal information that has been given to him/her in confidence by members of a patient's family. [Cal. Welf. & Inst. Code § 5328(a) and (b)]