

AUTHORIZATION FOR DISCLOSURE OF MY SUBSTANCE USE INFORMATION TREATMENT & CARE COORDINATION (FORM 2)

Section 1. Client Information

First Name: _____ Last Name: _____ Middle Name: _____

ACBH Client ID # (optional): _____ Date of Birth: _____

Section 2. Authorization to Disclose My Information, Purposes of Disclosure, & Organizations Receiving My Information

By signing this form, I authorize the individual(s) or organization(s) in **Section 3** to disclose my information described in **Section 4** to the providers within the Alameda County Behavioral Health Care Services (ACBH) Substance Use Disorder Continuum of Care and/or Mental Health Systems of Care listed in the **Appendix** to provide **treatment and/or care coordination**.

For example, this allows a substance use provider to consult with my mental health counselor to improve my treatment plan or for ACBH to coordinate my connection to housing services or public benefits.

Section 3. Names or Types of Individual or Organizations Disclosing My Information

I authorize the following organizations to disclose my information (check selected):

- Alameda County Behavioral Health Care Services (ACBH)
- Any past, present, or future treating substance use disorder provider within the ACBH Network (for example, my substance use counselor)
- Other (write name) _____

Section 4. My Substance Use Information to Be Disclosed

I authorize the following **substance use** information to be disclosed (check below):

- | | |
|---|--|
| <input type="checkbox"/> ALL information listed here | <input type="checkbox"/> Progress notes |
| <input type="checkbox"/> Service history | <input type="checkbox"/> Discharge plans / summary |
| <input type="checkbox"/> Assessment information/
diagnosis | <input type="checkbox"/> Drug and lab test results |
| <input type="checkbox"/> Treatment plans | <input type="checkbox"/> Other (describe): _____ |
| <input type="checkbox"/> Medications | _____ |

AUTHORIZATION FOR DISCLOSURE OF MY SUBSTANCE USE INFORMATION TREATMENT & CARE COORDINATION (FORM 2)

Section 5. Expiration of Authorization

This authorization will expire two (2) years after the date of my signature on this form, unless I write in another date or event here: _____.

Section 6. My Rights

- I do not have to sign this authorization form. However, I recognize that if I do not sign this authorization form, this may limit my provider's ability to serve me or coordinate my care because they would not be able to discuss my substance use needs or services with other organizations.
- I may revoke this authorization at any time by contacting one of my providers listed on **Page 3** verbally or in writing, except to the extent an organization has already relied on this authorization to disclose my information.
- I have the right to receive a copy of this authorization form.

Section 7. Redisclosure of My Information

A strict federal law that protects substance use information (42 C.F.R. Part 2) prohibits redisclosure of my substance use information unless I specifically authorize in writing or the federal law allows the redisclosure.

Section 8. Signature

At least one of the following below must be signed and dated to complete this form.

Client signature: _____ Date: _____

Legal representative signature: _____ Date: _____

If signed by a legal representative, the person signing must be authorized to sign this form on behalf of the client and present documentation demonstrating that authorization. Please describe the authority to sign on behalf of the client:

AUTHORIZATION FOR DISCLOSURE OF MY SUBSTANCE USE INFORMATION TREATMENT & CARE COORDINATION (FORM 2)

APPENDIX*

ACBH SUBSTANCE USE DISORDER CONTINUUM OF CARE PROVIDERS

(*Appendix Revised 07/07/21)

- Addiction Research and Treatment, Inc.
- Advent Group Ministries
- Aegis
- Alameda Health System
- BAART Behavioral Health Services
- Berkeley Addiction Treatment Services (BATS)
- Bi-Bett Corporation
- Carnales Unidos Reformando Adictos, dba C.U.R.A
- Center Point, Inc.
- City of Fremont - Human Services Department, Youth & Family Services
- Davis & Associates Communications Inc (D & A Communications)
- Eden Youth and Family Center
- Filipino Advocates for Justice
- Healthright 360
- Horizon Services, Inc.
- Humanistic Alternatives to Addiction Research and Treatment, Inc., dba H.A.A.R.T
- Lifeline Treatment
- Lifelong/East Bay Community Recovery Project (EBCRP)
- Magnolia Women's Recovery Programs, Inc.
- New Bridge Foundation, Inc.
- Options Recovery Services
- Roots Community Health Center
- Second Chance, Inc.
- Senior Support Center of the Tri-Valley
- St. Mary's Center
- Successful Alternatives for Addiction and Counseling Services (S.A.A.C.S.)
- The Alliance for Community Wellness, dba La Familia Counseling Service
- The West Oakland Health Council - OTP

AUTHORIZATION FOR DISCLOSURE OF MY SUBSTANCE USE INFORMATION TREATMENT & CARE COORDINATION (FORM 2)

ACBH MENTAL HEALTH SYSTEMS OF CARE PROVIDERS

(*Appendix Revised 07/07/21)

- A Better Way
- Abode Services - Primary, Housing, FSP & IHOT
- Afghan Coalition
- Alameda County Homeless Action Center (ACHAC)
- Alameda County Network of Mental Health Clients
- Alameda Family Services
- Alameda Health System
- Alta Bates Summit
- Alternative Family Services
- Amazing Grace Care Home
- Asian Health Services
- Axis Community Health
- Bay Area Community Health (BACH)
(formerly Tri-City Health Center)
- Bay Area Community Resources
- Bay Area Community Services, Inc. - Primary & FSP
- Bay Area Legal Aid
- Beats, Rhymes and Life
- Berkeley Place, Inc.
- Berkeley Therapy Institute
- Berkeley Youth Alternatives
- Bonita House, Inc.
- Brighter Beginnings
- Building Opportunities for Self Sufficiency
- California Psychiatric Transitions, Inc.
- Castlewood West, dba Alsana
- Catholic Charities of the Archdiocese of San Francisco, dba St. Vincent's School for Boys
- Catholic Charities of the East Bay
- Center for Empowering Refugees and Immigrants (CERI)
- Center for Independent Living
- Charis Youth Center
- Child Therapy Institute of Marin
- Children's Health Council, Inc.
- Children's Hospital Oakland, UCSF Benioff
- Cielo House, Inc.
- City of Berkeley
- City of Fremont - Human Services Department, Youth & Family Services
- Community Association for Preschool Education(CAPE)
- Community Health for Asian Americans
- Crestwood Behavioral Health, Inc.
- Crisis Support Services of Alameda County
- Davis Street Community Center
- Discovery Practice Management Inc., dba Center for Discovery
- Diversity in Health Training Institute
- Earth Circles Counseling
- East Bay Agency for Children (EBAC)
- East Oakland Community Project
- Edgewood Center for Children and Families
- Ever Well Health Systems, LLC
- Family Paths, Inc.
- Family Service & Community Resource, dba Family Service of San Leandro
- Family Support Services
- Felton Institute (formerly Family Services Agency of SF)
- Filipino Advocates for Justice
- Fred Finch Youth Center - Primary, FSP & STRTP
- Fruitvale Healthcare Center
- Fulton Care LLC
- Girl's Inc. of Alameda County
- Grand Lake Homes
- Great Expectation Residential Care Home
- Greater New Beginnings
- Health & Human Resource Education Center
- Healthy Teen Project
- Hiawatha Harris MD, Inc. dba Pathways to Wellness
- HLB LLC dba, Rose Garden Vista
- International Rescue Committee
- Jewish Family & Community Services East Bay
- Koobamo dba Good Shepherd Vista
- Korean Community Center of the East Bay
- La Cheim
- La Clinica de la Raza
- Lake Merritt Care Home
- Lifelong/East Bay Community Recovery Project (EBCRP)
- Lincoln - Primary & CESDC
- Maria's Board & Care Home

AUTHORIZATION FOR DISCLOSURE OF MY SUBSTANCE USE INFORMATION TREATMENT & CARE COORDINATION (FORM 2)

- McClure Care Home, Countrywide Family Care Inc.
- Medical Hill Rehabilitation Center, LLC
- Mental Health Association of Alameda County
- Millie's Youth Services
- Mountain Valley Child Family Services (formerly Milhous Children's Services, Inc.)
- Multi-Lingual Counseling, Inc.
- Native American Health Center, Inc
- New Horizons Home for the Aged, Inc.
- Oakland Unified School District - ERMHS
- Our Safe Haven
- Pacific Center for Human Growth
- Parkview Health Care (Mariner's Health Care)
- Partnership for Trauma Recovery
- Payton House Board & Care Home
- PEERS Envisioning & Engaging in Recovery Services
- Phillips Academy
- Pleasant Hill Manor
- Portia Bell Hume Behavioral Health and Training Center
- Psynergy Programs, Inc.
- Quest for Success dba, Quest Programs Inc.
- R.E.F.U.G.E., The
- Restorative Justice for Oakland Youth (RJOY)
- Richmond Area Multi-Services
- Rite of Passage
- Roots Community Health Center
- Royal Colony View Place LLC dba, Royal Colony in Berkeley
- Satellite Affordable Housing Associates
- Seneca Family of Agencies - Primary, CESDC & FSP
- Sierra Vista Child and Family Services
- St. Francis Extended Care, Inc.
- St. Mary's Center
- Star View Adolescent Center, Inc.
- STARS
- Summitview Child and Family Services, Inc.
- Sunny Hill Services, dba Side by Side
- Sutter Center for Psychiatry (merged w/Alta Bates)
- Telecare Corporation
- The Alliance for Community Wellness, dba La Familia Counseling Service
- The Help Group Child and Family Services Center
- The West Oakland Health Council
- The Wright Institute Clinic
- Thomas-Adams Residential Care Facility, Inc.
- Through the Looking Glass
- Tia Maria's Family Home
- Tiburcio Vasquez Health Center
- TLC Child & Family Services
- T & T's House of Champions Inc
- Tri-Cities Community Development
- Tri-Valley Haven
- Unity Care Group, Inc.
- Victor Community Support Services
- Victor Treatment Centers, Inc.
- Vista Del Mar Child and Family Services
- WestCoast Children's Clinic
- Wings of Love Group Home, Inc.
- Youth Homes, Inc.
- Youth Uprising