



393 Center Pointe Circle, Suite 1415
Altamonte Springs, FL 32701
407-834-0942

CONSENT TO RELEASE CONFIDENTIAL INFORMATION

Client's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ DOB: _____

I, _____, authorize Hope for Tomorrow Mental Health Services to:
 (send) (receive) the following (to) (from):

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

By the following means: Verbal Fax Electronic (if unchecked, all will be inferred)

A SEPARATE AUTHORIZATION, AS DEFINED BY HIPAA, IS REQUIRED FOR *PSYCHOTHERAPY NOTES.

- Admission/Discharge Letter(s) to PCP for coordination of care
- Treatment/Service plans Medical reports
- Progress/Summary reports Bio-Psychosocial Assessment
- Other, specify _____

The above information will be used for the following purposes:

- Planning or Continuing appropriate treatment or program
- Determining eligibility for benefits or program
- Case review Updating files
- Other (specify) _____

I understand that this information may be protected by Title 42 (Code of Federal Rules of Privacy of Individually Identifiable Health Information, Parts 160 and 164) and Title 45 (Federal Rules of Confidentiality of Alcohol and Drug Abuse Patient Records, Chapter 1, Part 2), plus applicable state laws. I further understand the information disclosed to the recipient may not be protected under these guidelines if they are not a health care provider covered by state or federal rules.

I understand that this authorization is voluntary, and I may revoke this consent at any time by providing written notice, and after 1 year this consent automatically expires. I have been informed what information will be given, its purpose, and who will receive the information. I understand that I have a right to receive a copy of this authorization. I understand that I have a right to refuse to sign this authorization.

Client's Signature: _____ Date: ____/____/____

Parent/legal guardian (if applicable)
Signature: _____ Date: ____/____/____