

**Santa Fe Recovery Center  
Policies and Procedures**

Policy Number: 1.5

Effective Date:  
May 16, 2005

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March 2024

**Policy and Procedure: Confidential Client Document Disclosures - Release of Records**

**Purpose:**

To provide a confidential, appropriate, and secure method for the release of Santa Fe Recovery Center (“SFRC”) clients’ records.

**Policy:**

SFRC releases client records or information to clients or to requested providers, following a client’s written request and with a properly signed and compliant Release of Information Form, following appropriate procedures that ensure confidentiality of information contained in such records.

**Staff Responsible for the Implementation of This Policy and Procedure (in part or in whole) Include:**  
**Chief Executive Officer, Chief Administrative Officer, Chief Clinical Officer**

**Procedure:**

SFRC responds to all reasonable requests for confidential information concerning clients and the agency that comply with legal and regulatory guidelines for release of information and the *Notice of Privacy Practices & Confidentiality of Alcohol and Drug Abuse Patient Records* distributed to all clients at admission.

1. All requests for confidential information concerning a client are submitted in writing. Documents are compiled and the CCO or designated licensed counselor or therapist reviews the requested documentation to determine whether there is anything in the records that would likely be psychologically damaging to the client.
2. Requests for confidential health information subject to this policy include individuals and entities associated with the client e.g., family, friends, legal advisors, and medical providers (“Individuals”).
3. The agency is not obligated to provide documentation or other information it considers proprietary regarding its programs or operations, that is not directly related to a client’s treatment or could be potentially harmful to a client, or that may compromise the confidentiality of other clients in treatment.
4. Client records are protected under the Federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records 42 C.F.R. Part 2. and any information that identifies the client as a patient/client in an alcohol or other drug abuse program cannot be disclosed without a client’s written consent except in limited circumstances as provided for in these regulations.

Client records are also currently protected under the Federal privacy regulations within the Health Insurance Portability and Accountability Act HIPAA 45 C.F.R. Parts 160 & 164. Client health information must be specified in writing in order to be disclosed pursuant to this authorization.

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The recipient of the information may re-disclose the information and it may no longer be protected by the HIPAA privacy law. The Federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records 42 C.F.R. Part 2. noted above, however, will continue to protect the confidentiality of information that identifies the client as a patient in an alcohol or other drug program from re-disclosure.

5. The CCO or Clinical staff determine if an onsite review is necessary. If this is the case, an appointment is made with the former client to review the clinical records with them. The core clinician conducts this meeting with consent of the CCO.
6. Client consent is required to disclose client information. A General Release of Information, signed by the client, identifies the individual requesting information, and the scope of information that can be released. If needed, an additional or updated Release of Information is requested.
7. The agency has 30 days from the date the request is received and acknowledged to provide information or sooner if needed for legal purposes or admission into another treatment facility.
8. Individual making the request pays reasonable processing fees to the agency for documentation provided.
9. Staff responsible for the release of confidential information are trained on applicable State and Federal Regulations, specifically HIPAA and 42 C.F.R. Part 2. Records released without the express written consent of the client are done in accordance with these regulations, adhering to the stricter regulation when faced with conflicting options.
10. Any requests for copies of records for SFRC's clients, past or present, include a written, dated, and signed compliant request form from said client to be considered.
11. Request forms comply with HIPAA and 42 C.F.R. Part 2. Regulations and include at a minimum: The name of the person about whom information is to be released. The content to be released. To whom the information is to be released. The purpose for which the information is to be released. The date on which the release is signed. The date, event, or condition upon which the authorization expires. Information as to how and when the authorization can be revoked. The signature of the person who is legally authorized to sign the release.
12. The appointed clinician or CCO supervises the onsite records review of the requested records deemed acceptable to release to the client according to the following procedures.
13. The client, with the clinician present, reads each page of the record. If the client is unable to read, they may bring someone to read the record to them after signing the appropriate Release of Information form. The client may also request that the clinician read the records to them.

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14. The clinician is present to answer all questions the client or their designated representative may have about anything reviewed in the record.
15. Once the client has completed the review, they sign and date the bottom part of the Release of Information request in acknowledgement of the reviewed records. The clinician signs as witness.
16. Administrative staff copy and release the records within five working days of the record review, or within 30 days of the request if an on-site review is deemed unnecessary. Records can be released personally to the client or they can be mailed. Client records can also be faxed with a written request to that effect by the client. There is a cost associated with this service that is determined accordingly, but no more than \$1 per page copied and delivered, plus any postage costs. Records contained in the client's chart, which have not been produced by SFRC staff, are not released.
17. SFRC also provides for the safe transfer of protected health information via secure encrypted email. Authorized personnel have the capacity to send records utilizing end to end encryption directly to clients, health care providers, or other entities representing or regarding the clients. Email may also be used to precipitate, further coordinate, or follow-up the transfer of those records.
18. Pursuant to Federal Regulations, a record is kept of all disclosures of client protected health information and personally identifiable information.
19. If the clinician or CCO believes that some or all of the requested records are likely to psychologically harm the client, the request for release of records is denied. However, the CCO may refer the client to another licensed care provider to act as a receiver and disseminator of the information contained in the client's record.
20. The decision not to release all or part of the record is made by the CCO and is documented in the client's chart.