

Letters Needed Form

Please allow ONE WEEK

*****Columbia Addictions Center will NOT provide letters unless your balance is paid in full*****

Today's Date: _____

Client's Name: _____ Date of Birth: _____

Would You Like to Pick Up a Copy of Your Letter in the Office?

Yes _____ No _____

Name of Recipient: _____
Your lawyer, Probation Officer, or contact within the court system

Fax # of Recipient: _____
Only provide full mailing address if you KNOW that the recipient does NOT receive faxes

Purpose of Letter (check one)

Progress Letter **Completion Letter** **UA Results**

Date Needed: _____

Most letters are completed on Fridays.

If we do not have a current HIPAA release on file for the person or agency listed above, you must also complete the back of this form.

Consent for the Release of Confidential Information

(Your spouse, parent, attorney, counselor, physician, etc.)

PLEASE ENTER ONLY ONE NAME ABOVE; A SEPARATE FORM MUST BE COMPLETED FOR EACH PERSON TO WHOM YOU ARE ALLOWING INFORMATION TO BE RELEASED

FULL RELEASE

I authorize Columbia Addictions Center to release information to, and to obtain information from, the person or organization I have written above.

-OR-

LIMITED RELEASE

I authorize Columbia Addictions Center to release *only* the following information to the person or organization I have written above:

- _____ Appointment dates/times
- _____ Account Balance
- _____ Initial Evaluation
- _____ Progress, Attendance and Discharge
- _____ Urinalysis or Breathalyzer results

Signed by: _____
Signature of Patient or Legal Guardian Relationship to Patient

_____ _____
Print Patient's Name Date

This authorization will be valid for one year unless I otherwise specify.

When my information is used or disclosed pursuant to this authorization, it may be subject to re-disclosure by the recipient and may no longer be protected by the federal HIPAA Privacy Rule.

I have the right to revoke this authorization in writing except to the extent that the practice has acted in reliance upon this authorization.