

ProviderConnect NX

Sage-PCNX Release of Information_In Network Job Aid

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Introduction

This guide outlines the process by which providers obtain and document a patient's authorization to release protected health information (PHI) within the SAPC provider network.

The Sage-PCNX Release of Information_In Network form is used to document a patient's authorization to disclose PHI and specifies 1) what health information the patient authorizes to be released from their medical record, 2) with whom the information may be shared, and 3) the expiration date of the authorization (if any).

The Release of Information_In Network form also outlines the federal confidentiality rules that govern disclosure of substance use information found in 42 C.F.R. Part 2 and specifies that authorizing disclosure is voluntary and can be revoked at any time.

The patient's written signature is captured on the form as attestation that the patient understands this information and agrees to the parameters of the disclosure. A witness signature, typically that of the staff member completing the form with the patient, is also captured.

Workflow Considerations

The Release of Information_In Network form is available to both primary and secondary Sage users. It can be completed by Clerical staff, SUD counselors, Peers, LVNs / MAs, LPTs, LE-LPHAs / LPHAs, and/or Supervisors. The form does not have to be finalized by an LPHA.

SAPC recommends that providers complete the Release of Information_In Network form as part of the admission process when a new episode is initiated at their agency. SAPC also recommends that providers complete a new Release of Information (ROI) upon any re-admission to their agency. Ensuring that there is an active ROI on file any time a patient initiates care with a provider facilitates treatment planning and coordination of care.

While the ROI allows the patient to choose whether to permit disclosures to the entire network or to specific providers, SAPC does recommend disclosure to all network providers to help coordinate care and expedite transitions between providers.

The Release of Information_In Network form was developed to be used instead of the hard copy SAPC Release of Information form that would then need to be uploaded to Sage through Provider File Attach. Once the Release of Information_In Network form has been finalized and submitted in Sage, the provider may proceed with requesting copies of treatment records per their usual workflow. Please note that SAPC is currently working on additional functionality that will allow providers to run a report within Sage to access the treatment records that were authorized for release.

Accessing the Form in Sage

Within Sage's smart search bar, enter the prompt "release" or "release of information" and select the "Release of Information_In Network" form from the search results.

Q release	e of information			
Advanced	Advanced Client Search			
	Here is what I found:			
All 2	Clients 0 Staff 0 Forms 2			
	Forms			
Undoc	k Name	Menu Option		
Ľ	Release of Information_In Network	/ Avatar PM / Client Management / Disclosure Management		
Ľ	Release of Information in Network Re	port / Avatar PM / Data Trail / Reports		

If not currently in a patient chart, there will be a prompt to search for the patient and select them from the list.

Select Client			
Q test, yolanda			
Client Name	Personal Pronouns	Date Of Birth	Sex
YOLANDA TEST (00016183	2)	02/07/1990	Female

Then select the agency's episode.

Select Episode				
Name: YOLANDA TEST ID: 161832 Sex: Female Date of Birth: 02/07/1990				
Episode 🗘	Program 🗘	Start 🗘	End 🗘	
1	Recovery Inc	09/20/2024		

General Information

The Release of Information_In Network form is comprised of one (1) section (Release of Information) that is divided into five (5) sub-sections (Authorization to Disclose, Signature, Uploaded Signature, Revoke Previous ROI, and Finalize).

The fields for entry in these five sub-sections are provided below to help orient the user to the form. Documentation workflows are then provided to guide the user step-by-step in how to complete the form.

Authorization to Disclose Sub-Section

The Authorization to Disclose sub-section outlines the specific parameters of the PHI disclosure and has ten (10) entry fields as described below:

Field	Description
Release ID for use if revoking previous	A unique identification (ID) number assigned by the system to
release	identify each ROI that is added.
Is the patient revoking a previous ROI?	A Yes/No selection to indicate whether the patient is revoking
(Required)	a previous ROI.
Select which Release is being revoked	A drop-down menu to select which previous ROI is being
(Conditionally Required)	revoked, if applicable.
Program Name (Required)	A search field to select the agency's name.
Effective Date of Release (Required)	The date the ROI is effective.
Authorize All Providers or Select Providers	Indicates whether the patient authorizes all SAPC network
Only (Required)	providers to share information or only specific provider(s).
Select Providers within the SAPC Provider	A checklist of all SAPC network providers to indicate with
Network (Required)	which specific providers the patient authorizes sharing of
	information.
Select PHI that can be disclosed (Required)	Indicates whether the patient authorizes disclosure of all
	categories of protected health information or only specific
	type(s) of records.
I permit the entities listed above to share	A checklist of categories of protected health information to
the protected health information specified	indicate which types of records are authorized to be shared.
below. Disclosure shall be limited to the	
following information. (Required)	
If no date is entered, this Authorization will	An optional field in which an expiration date may be specified
remain active and will not expire.	if requested by the patient.

Signature Sub-Section

The Signature sub-section captures required signatures and has nine (9) entry fields as described below:

Field	Description
Person Signing- Patient or Representative	A drop-down menu to select whether the patient or patient's
(Required)	legal representative is signing the ROI.
Date of Patient/Representative Signature	The date the patient's or legal representative's signature was
(Required)	obtained.
Signature of Patient/Representative	An image capture of the patient's or legal representative's
(Required)	signature using a mouse, touch pad, or signature pad.
Name of Person Signing, if not the patient	A free-text field to write in the name of the patient's legal
(Conditionally Required)	representative, if applicable.
If signed by Patient's Legal Representative,	A free-text field to indicate the relationship of the patient's
state relationship and authority to do so	legal representative to the patient, and an explanation of the
(Conditionally Required)	representative's authority to sign on behalf of the patient, if
	applicable.
Witness Name and Credential (Required)	A search field to select the name and credential of the staff
	who is completing the authorization with the patient and
	witnessing the signature.
Witness Address (Required)	A search field to select the staff's site / location.

Date of Witness Signature (Required)	The date the staff's signature was obtained.
Witness Signature (Required)	An image capture of the staff's signature using a mouse, touch
	pad, or signature pad.

Uploaded Signature Sub-section

The Uploaded Signature sub-section is completed only if the patient did not sign the form electronically in Sage and a hard copy of the signature was obtained. It has three (3) entry fields as described below:

Field	Description
Signed release attached in Provider File	A single option to select Yes if a hard copy ROI was uploaded into
Attach	Sage.
Date File Uploaded (Conditionally	A calendar search to select the date of upload into Sage.
Required)	
Provider File Attach file name of uploaded	A free-text field to enter the name of the uploaded file. (Please
signature	see SAPC recommended file naming convention in the Provider
(Conditionally Required)	File Attach Job Aid)

Revoke Previous ROI Sub-Section

The Revoke Previous ROI sub-section is completed only when revoking a previous ROI. It has five (5) entry fields as described below:

Field	Description
Is the patient revoking or an authorized representative? (Conditionally Required)	A forced selection to indicate whether the patient or an authorized representative is revoking the previous ROI, if applicable.
Date of Revocation (Conditionally Required)	The date the revocation signature was obtained, if applicable.
Signature of Patient/Legal Rep to Revoke (Conditionally Required)	An image capture of the patient's or legal representative's signature using a mouse, touch pad, or signature pad, if applicable.
Name of Person Revoking Authorization, if not the patient (Conditionally Required)	A free-text field to write in the name of the patient's legal representative, if applicable.
If signed by Patient's Legal Representative, state relationship and authority to do so (Conditionally Required)	A free-text field to indicate the relationship of the patient's legal representative to the patient, and an explanation of the representative's authority to sign on behalf of the patient, if applicable.

Finalize Sub-Section

The Finalize sub-section documents the provision of linguistically appropriate services and is where the user will Finalize the form. It has four (4) entry fields as described below:

Field	Description
If patient's preferred language is NOT	Select from the following options:
English, were services provided in the	Yes
patient's preferred language? (Required)	• No

	• N/A
Language in which service was provided.	A drop-down menu to select what language services were
(Conditionally Required)	delivered in, if applicable.
Please explain why services were not	A free-text field to explain why services were not provided in
provided in patient's preferred language.	the patient's preferred language, if applicable.
(Conditionally Required)	
Form Status (Required)	A single selection option to Finalize the form.

Documentation Workflows

The Release of Information_In Network form allows users to add a new ROI to a patient's chart and to revoke an existing active ROI. A step-by-step guide for each of these documentation workflows is outlined below. In addition, guidelines are provided for how to document hard copy ROI forms that have been uploaded through Provider File Attach and how to document signatures for telehealth patients.

Adding an ROI for Patients with No Previous ROIs on File (First ROI Entry)

When adding an ROI to a patient's chart for the first time, the user will need to complete only the Authorization to Disclose, Signature, and Finalize sub-sections.

Authorization to Disclose Sub-Section

In this sub-section, the user will specify the parameters of the disclosure.

When the Release of Information_In Network form opens, the Release ID field will auto-populate by the system. The Effective Date of Release will default to the date the user is opening the form. Apart from these two fields, there will be no other fields in the form that contain information.

Release of Information	V Authorization to Disclose			
Authorization to Disclose Signature Uploaded Signature Revoke Previous ROI Finalize	Release ID for use if revoking previous release 1008	Link to SAPC Release of Information form		
	Is the patient revoking a previous ROI? *	Program Name		
	Select which Release is being revoked Select Effective Date of Release 02/13/2025	~		

<u>Note</u>: When there is at least one previous ROI on file for the user's agency, the system will prompt the provider to select a previous ROI to default information from and several additional fields will autopopulate. This process is described in the <u>next documentation workflow</u>.

1. Select No in the "Is the patient revoking a previous ROI" field. The "Select which ROI is being revoked" field will be disabled and grayed out.

✓ Authorization to Disclose		
Release ID for use if revoking previous release 1008	Link to SAPC Release of Information form	
Is the patient revoking a previous ROI? * Yes No Select which Release is being revoked Q	Program Name *	,
Select Effective Date of Release • 02/13/2025	~	

- 2. Complete the Program Name field.
- 3. As mentioned, the "Effective Date of Release" will default to the date the user opens the form. In most cases, this correctly corresponds to the date the authorization was obtained. The field may be backdated to correspond to the date of an uploaded Release through Provider File Attach. (See sections on <u>Documenting Hard Copies Uploaded through Provider File Attach</u> and <u>Documenting Signatures for Telehealth Patients</u> below.) A future date cannot be entered in this field and doing so will result in an error that prompts the user to re-enter the date.
- 4. In the "Authorize All Providers within the SAPC Provider Network" field, select whether the patient wishes to authorize information to be shared with all SAPC network providers or only selected providers.

Authorize All Providers or Select Providers Only *	
Select	~
	Q
Authorize all network providers	
Only authorize selected providers	

<u>Note</u>: SAPC recommends obtaining authorization for the full SAPC provider network instead of restricting authorization to only one (or a subset of) provider(s). This is intended to minimize barriers to coordination of care and further support the treatment process. However, if for any reason the patient wishes to restrict their authorization to select providers, that preference must be honored.

5. If the patient authorized information to be shared with all network providers, the user must select All in the "Select Providers within the SAPC Provider Network" field. This will automatically mark all providers within the network as shown below. Otherwise, if the patient authorized only a specific provider or set of providers, select the checkboxes next to those providers only. A search bar is also available to search for specific providers.



<u>Note</u>: Selecting Yes in the previous "Authorize All Providers within the SAPC Provider Network" field, will <u>NOT</u> automatically select all providers in this field. The user must manually select All so that all checkboxes are marked as shown above.

6. In the "Select PHI that can be disclosed field," indicate whether the patient would like to disclose all categories of protected health information or limit the disclosure to select categories.

Select PHI that can be disclosed *	
Select	~
1	Q
All disclosures listed Limited to disclosures selected	

7. If the patient authorizes disclosure of all categories of health information, select All in the "I permit the entities listed above to share the protected health information specified below. Disclosure shall be limited to the following information" field. This will automatically mark all categories as shown below. Otherwise, if the patient authorized only a subset of records, select the checkboxes next to those records only.



<u>Note</u>: Selecting All Disclosures Listed in the previous "Select PHI that can be disclosed" field will <u>NOT</u> automatically select all categories of health information in this field. The user must manually select All so that all checkboxes are marked as shown above.

8. In the field labeled "If no date is entered, this Authorization will remain active and will not expire" field, enter in an expiration date only if specified by the patient. If no date is entered, the authorization will not expire.

If no date is entered, this Authorization will remain active and will not expire.		_	
	曲		
			•

<u>Note</u>: In accordance with the 42 C.F.R. Part 2 Final Rule, releases of information for substance use no longer require an expiration date. Therefore, unless a patient specifies a date that they would like the authorization to expire, the expiration date field can be left blank, and the ROI will remain active until the patient chooses to revoke it.

Signature Sub-Section

In this sub-section, the user will obtain appropriate signatures.

1. In the "Person Signing – Patient or Representative" field, select whether the patient or a legal representative is signing the Release of Information form.

Person Signing- Patient or Representative *	
Select	~
	Q
Patient	
Representative	

2. If a legal representative is signing the form, the user must specify the name of this individual and provide an explanation of the individual's authority to sign on behalf of the patient.

Person Signing- Patient or Representative * Representative X	Date of Patient/Representative Signature
Signature of Patient/Representative *	Name of Person Signing, if not the patient *
	If signed by Patient's Legal Representative, state relationship and authority to do so *
Get Signature	

<u>Note:</u> If the signatory is not a "legal" representative, the ROI document is <u>NOT</u> valid, and any disclosures made will violate HIPAA and CFR regulations.

- 3. Enter the date the signature was obtained in the "Date of Patient/Representative Signature" field. This should be today's date.
- 4. To capture the electronic signature of the patient or legal representative, click "Get Signature."

Signature of Patient/Representative *	
	t Signature
Ut Ut	rt Signature

a. A signature will be able to be captured using the mouse, touch pad, or signature pad. A popup will give the option to sign in this way "This Time Only" or "Until I Logout." A choice to "Cancel" the signature may also be chosen.

?	No Signature Device Detected
	Do you want to sign using Mouse/Touch instead?
	Yes - This Time Only Yes - Until I Logout Cancel

b. Choosing either "Yes-This Time Only" or "Yes-Until I Logout" will open a window where the signature can be captured. After the signature has been captured, click "OK" or click "Clear" to sign again.



<u>Note</u>: Once a signature is obtained, clicking "Get Signature" again will remove the previously captured signature so that a new signature can be obtained. To retain the original signature, click "Cancel."

5. Use the search bar function to select the staff that is completing the form and witnessing the patient or legal representative's signature.

esp		
Practitioner Category	NPI Number	Taxonomy Code
OLANDA CESPEDES-	Licensed Clinical Psychologist	
(NADEL2 (008386)	(LCP)	

6. Enter the date the witness signature was obtained and capture the witness signature by clicking "Get Signature" as was done with the patient / legal representative signature.

Finalize Sub-Section

In this sub-section, the user will document the language in which services were delivered and finalize the form.

- 1. In the "If patient's preferred language is NOT English, were services provided in the patient's preferred language?" field, select the appropriate response.
 - a. If Yes is selected, this indicates that languages were provided in the patient's preferred language and that language was not English. Select the appropriate language from the drop-down menu.

If patient's preferred language is NOT English, were services provided in the patient's preferred language? *	Language in which service was provided * Select Q
Please Explain why services were not provided in patient's preferred language.	American Sign Language (ASL)
	Arabic
	Armenian
	Cambodian
	Cantonese
	Chinese
	English
	Farsi

b. If No is selected, this indicates that services were not delivered in the patient's language. Provide an explanation.

Please Explain why services were not provided in patient's preferred language. *	If patient's preferred language is NOT English, were services provided in the patient's preferred language? * Yes No NA	Language in which service was provided Select	~
		ed language *	
			•

c. If N/A is selected, this indicates that services were provided in English and that this is the patient's preferred language. No additional language information needs to be entered.

<u>Note</u>: In the current workflow, the user is adding a new ROI and is not uploading a hard copy ROI nor revoking a previous ROI. For this reason, there is no need to go complete either the Uploaded Signature subsection or the Revoke Previous ROI sub-section of the form.

2. In the "Form Status" field, select Final and proceed directly to Submit to save the completed ROI into the patient's chart.

RELEASE OF INFORMATION_	IN NETWORK		Autosaved at 1:21 Pl	1 Subn	nit (Backup	Discard	Send To	Do	Add to Favorites
Release of Information Authorization to Disclose Signature Uploaded Signature Revoke Previous ROI Finalize	Finalize If patient's preferred language preferred language? Ves	ge is NOT English, w	rere services provided in th	e patient's	Language in Select	n which service wa	s provided			~
	Please Explain why services v	were not provided ir	ı patient's preferred langua	ge.				¢	•	
	Form Status * () Final									

<u>Note</u>: The Release of Information_In Network form is not able to be saved as a draft. If the form is not ready to be Finalized, select the Discard option. The system automatically autosaves information every two minutes and a version of the form will be saved in the system's history, for possible future use. When the Release of Information_In Network form is opened again for the patient at a later point in time, the system will prompt to retrieve the information from the autosaved version. The provider may choose to pull forward the information from this version and update accordingly.

Restore Backup Data				
you wish to res pre-display or f	tore from the ba	ckup? Please note ing rows or create	: selecting 'No' wil	024 12:13 PM. Do I direct you to the . The unsubmitted
Yes No				

Overriding an Active ROI on File (Existing ROIs Already on File)

If there is at least one ROI on file for a patient, a pre-display window will first open before the user can complete the Release of Information_In Network form.

1. The pre-display window shows a table of all previous ROI records. From this window the user will click "Add" to create a new ROI.

Name: YOLANDA TEST ID: 292568 Sex: Female Date of Birth: 02/14/1997				
Release ID for use if revoking pre $\stackrel{\frown}{\searrow}$	Select which Release is being revoke $\hat{\varsigma}$	Effective Date of Release	Is the patient revoking a p \Rightarrow	Date of Revocation 🗘
1002		02/13/2025	No	
1003		02/06/2025	No	
1005	1003- 02/06/2025 - Only authorize selected providers	02/06/2025	Yes	02/13/2025
Add Edi	Cancel			

<u>Note:</u> Every row that appears in the pre-display reflects a separate ROI entry that has been made in Sage. In other words, an ROI that was submitted and subsequently revoked will have two separate entries in this table. Both entries will show the same Effective Date, but one will also show a Date of Revocation. In the example above, Release ID #1003 is the original ROI on file effective 02/06/2025. Referral ID #1005 revoked this ROI on 02/13/2025. Note also that all ROIs listed in the pre-display have been finalized and cannot be edited. Double-clicking on an entry in this table will open the form as view-only.

2. After clicking Add, a window will open showing previous releases of information that have been submitted for the patient. From this window, the user will select an ROI from which to default information. Select the most recent ROI that has not been revoked and click "OK." The most recent ROI is considered to be the valid ROI on file and defaulted information should come from this ROI when a user is overriding an active ROI.

Select Row to Default Information From						
Episode	Release ID for us	Select which Rele	Effective Date of	Is the patient re	Date of Revocatio	
1	1002		02/13/2025	No		
1	1003		02/06/2025	No		
1	1005	1003- 02/06/2025	02/06/2025	Yes	02/13/2025	
1	1005	1003- 02/06/2025	02/06/2025	Yes	02/13/2025	
			ОК			

3. After selecting which ROI to default information from, the Release of Information_In Network form will open. Because information was defaulted from a previous ROI, several fields will auto-populate and be locked from additional editing. A few of these fields are shown below.

Authorization to Disclose	
Release ID for use if revoking previous release 1008	Link to SAPC Release of Information form
Is the patient revoking a previous ROI? *	Program Name Recovery Inc (LE00001)
Select which Release is being revoked Select Effective Date of Release 02/13/2025	~

4. Select No in the "Is the patient revoking a previous ROI" field to remove all pre-populated entries and unlock all fields for editing. Selecting No allows the user to enter new information into the form.

✓ Authorization to Disclose	
Release ID for use if revoking previous release 1008	Link to SAPC Release of Information form
Is the patient revoking a previous ROI? *	Program Name *
Select which Release is being revoked 🖗 Select	
Effective Date of Release • 02/13/2025	

5. The Release of Information_In Network form is now ready to be completed and the user can follow the same steps outlined <u>above</u>.

Documenting Hard Copies Uploaded through Provider File Attach

For cases in which there is a hard copy ROI already uploaded into Sage (via Provider File Attach), the provider may want to add an electronic copy of the ROI using the Release of Information_In Network form. For instance, this would allow the ROI information to be captured in the Release of Information In Network Report and in the Release of Information widget.

1. Complete the Authorization to Disclose section using the details that have been entered into the hard copy form.

2. Scroll down to the Uploaded Signature section and select "Yes" in the "Signed release attached in Provider File Attach" field.

~	Uploaded Signature			
		Complete this section to document any signed hard copy of the rel Sage-PCNX.	ease of information (initial or revoked	I) that has been uploaded into
	Select	d in Provider File Attach	Date File Uploaded	d d ;
	Yes			

3. The "Date File Uploaded" and "Provider File Attach file name of uploaded signature" fields will become required fields for completion. Enter the date that the file was uploaded into Sage and the corresponding file name.

✓ Uploaded Signature		
Complete this section only	if patient was unable to sig	ign the form electronically in Sage-PCNX and a hard copy signature was obtained.
Signed release attached in Provider File Attach	Date File Uploaded *	
Provider File Attach file name of uploaded signature *		

4. Scroll down to the Finalize section to Finalize and Submit the form.

Documenting Signatures for Telehealth Patients

Patients who are seen via a telehealth platform and cannot sign the ROI in person will not be able to use the signature capture function in Sage. The following steps can be followed to obtain a signature from telehealth patients:

- 1. The provider sends a secure email or docu-sign with the completed Release of Information form to the patient for signature.
- 2. The patient signs and scans (or takes a picture) of the form with signature included.
- 3. The patient securely emails the signed copy back to the provider.
- 4. The provider uploads the signed copy to Provider File Attach in Sage (see Provider File Attach Job Aid).

Once the signed hard copy ROI has been uploaded to Sage, the provider can proceed to the <u>Uploaded</u> <u>Signature section</u> and follow the steps to Finalize and Submit the form.

Revoking an Existing ROI in the Patient Record

The revocation process can only be completed for patients that have an existing ROI on file. Users can revoke ROIs that were directly entered into Sage using the Release of Information_In Network form or that were uploaded into Sage using Provider File Attach and subsequently documented in the Release of Information_In Network form.

<u>Note</u>: It is extremely important to identify which ROI is to be revoked before opening the Release of Information_In Network form. Users are encouraged to use the Release of Information widget (as outlined in the <u>Checking ROI Status</u> section) to help them identify the ROI to be revoked. This ROI must be the ROI from which information is defaulted when opening the form.

- 1. From the Pre-Display, select Add.
- 2. From the "Select Row to Default Information From" window, select the ROI to be revoked.
- 3. Select Yes in the "Is the patient revoking a previous ROI" field. A pop-up window will notify the user that they have selected to revoke a previous ROI. Click "OK" to continue or "Cancel" to create a new release. Canceling will remove the selection and return the user to the form.

✓ Authorization to Disclose		
Release ID for use if revoking previous release	Link to SAPC Release	of Information form
	lected to revoke a previous release of information. Click OK to Cancel to create a new release.	
Select which Release is being revoked ${ig Q}$		
Select	~	

<u>Note</u>: If the user initially selected No in the "Is the patient revoking previous ROI" field and then changed the selection to Yes, information will not be properly defaulted from a previous ROI. The user will need to Discard the form and begin again.

4. In the "Select which ROI is being revoked" field, select the ROI to be revoked from the drop-down menu. The ROI selected in this field <u>MUST</u> match the ROI that was selected in the "Select Row to Default Information From" pop-up window. This is emphasized in the form with a Lightbulb notification icon that can be clicked for additional information.

Select which Release is being revoke	• • 📀	
Select		~

Select which Release is being revoked
When revoking a Release of Information (ROI), the ROI selected in this field must match the ROI previously selected in the "Select Row to Default Information From" pop-up window.

a. Only ROIs that are active (i.e., that have not previously been revoked) will display. Each revokable ROI will be listed with a Release ID number, effective date of authorization, and indication of whether All or Select providers were authorized.

Select which Release is being revoked * 🖓	
Select	~
	Q
1002- 02/13/2025 - Only authorize selected providers	

<u>Note</u>: All remaining fields in the Authorization to Disclose and Signature sub-sections will be defaulted from the previous ROI and locked from editing. Fields for linguistically appropriate services in the Finalize section will also be defaulted and locked from editing. This is to prevent any changes from being made to the original ROI that was signed. In other words, the revocation process does not alter the original ROI document but instead adds the revocation clause to the original form and adds an ROI as a new document to the patient record. The revoked ROI will be assigned a new referral ID number to distinguish it from the original ROI.

5. When a previous ROI is selected to be revoked, the Revoke Previous ROI section is enabled with three (3) required fields for entry.

✓ Revoke Previous ROI	
Is the patient revoking or an authorized representative? * Select	Date of Revocation *
Signature of Patient/Legal Rep to Revoke *	Name of Person Revoking Authorization, if not the patient
	If Signed by Patient's Legal Representative, state relationship and authority to do so
Get Signature	

6. In the "Is the patient revoking or an authorized representative" field, indicate who is revoking the previous ROI.



Note: Only the patient or the patient's legal representative may revoke an existing ROI.

- 7. Enter the date the revocation signature was obtained in the Date of Revocation field.
- 8. To capture the electronic signature of the patient or legal representative, click "Get Signature" and follow the same steps as described <u>above</u>. If a legal representative is signing the form, specify the name of the individual and an explanation of the individual's authority to sign on behalf of the patient.
- 9. The Uploaded Signature section is enabled and available for entry if users are completing the revocation process using a hard copy form. Note that selecting Yes in the "Signed release attached in Provider File Attach" will subsequently disable the required signature fields in the Revoke Previous ROI section.
- 10. Finalize and Submit the form to save it to the patient's record.

Additional Information Included in the Form

In addition to the fields described in this guide, there is additional information included in the Release of Information_In Network form.

At the top of the form is a hyperlink to the hard copy SAPC Release of Information form for users who may wish to print the form for completion.

·	 Authorization to Disclose 		
	Release ID (for use if revoking previous release)	Link to SAPC Release of Information form	
	100057		

The form includes information about the statutes under which disclosure is made as well as language attesting to the patient's understanding and acknowledgement of the information contained in the release form:

By signing this Authorization, I understand that:

- My alcohol and/or drug treatment records are protected under the Federal regulations governing Confidentiality and Drug Abuse Patient Records, 42 C.F.R. Part 2, and the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 45 C.F.R. parts 160 & 164, and cannot be disclosed without my written consent unless otherwise provided for by the regulations.
- This Authorization is voluntary and I do not need to sign this Authorization in order to receive treatment, enroll in services, or for payment for my health care.
- I have a right to receive a copy of this Authorization. A copy of this Authorization is as valid as the original.
- If information related to alcohol, drug, or HIV/AIDS treatment is shared, that information cannot be redisclosed except with another Authorization.
- I have the right to revoke this Authorization at any time in writing unless the entity disclosing my health information already shared my information before receiving my revocation. I may use the Revocation of Authorization at the bottom of this form to terminate this Authorization and may mail or deliver the revocation to SAPC (see mailing address below) or my substance use treatment provider.

Once my Revocation of Authorization is received, SAPC and/or my provider will cancel the Authorization and notify all involved parties of its cancellation.

I have read and understand the content of this Authorization. I am signing the Authorization voluntarily and understand that I have the right to refuse to sign this document. My signature authorizes the disclosure of the health information as described in this Authorization.

The form also includes language about the rules governing redisclosure of confidential information:

Prohibition on Redisclosure of Confidential Information

This notice accompanies a disclosure of information concerning a client in alcohol/drug treatment, made to involved providers with the consent of such client. This information has been disclosed to involved providers from records protected by federal confidentiality rules (42 C.F.R. Part 2). The federal rules prohibit involved providers from making any 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 C.F.R. 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.

Checking ROI Status

The best option for checking the current status of an ROI is through the Client Dashboard / Releases of Information on File widget.

The Release of Information widget was designed so that providers can check the status of every ROI on file at their agency. This may be done to 1) confirm the accuracy of an existing ROI upon re-admission to an agency, 2) determine if a previously completed ROI remains active or has been revoked, or 3) verify what access to substance use treatment records has been authorized.

The Release of Information widget is accessed through the Client Dashboard.

LOGGED IN AS Yolanda Cespedes-Knadle2						
Q What can I help you find? Advanced Client Search						
Recent Clients						
My Forms	•					
My Favorites						
Recent Forms	•					
Control Panel						
Recent Clients						
YOLANDA TEST ID#: 292568	Î.					

From the Client Dashboard, scroll to the "Releases of Information on File" widget and undock the widget by clicking on the pop-out arrow in the top right-hand corner. This will expand the viewable area.



There is an Action column with an option to "View" each ROI listed followed by nine (9) sortable and searchable columns: Provider, Release ID, ROI Status, Effective Date, Expiration Date, Authorized Providers, PHI to Disclose, Release Signed By, and Date Signed.

It is recommended that users sort by the ROI Status column so that currently active ROIs are listed first followed by revocations. Currently active ROIs will be identified as "Active ROI" in the ROI Status column. In the example below, Release ID # 1011 is an active ROI that went into effect on 02/14/2025 and authorizes all categories of PHI to be disclosed to all network providers. It has no expiration date.

	IFORMATION_IN NE											
Action	Provider 🗘	Releas	e ID 🗘	ROI Status	¢	Effective Date	Expiration Date	Authorized Providers 🗘	PHI to Disclo	se Released Si By 🗘	igned	Date Signed
View	Recovery Inc	1011		Active ROI		02/14/2025	No Expiration Date	Authorize all network providers	All disclosure listed	Patient		Signed on: 02/14/2025
	I											
	Delesse ID	~	DOI CH	A	F#	atta Data	Emination Date	A the a start of	DU	ta Diadaaa		
	Release ID	\$	ROI Sta	itus 🗘	Effe		Expiration Date		≎ ≎	to Disclose		

ROIs that have been revoked will appear only once in the widget and will be listed by the Release ID number of the <u>revocation</u>. The ROI Status column will indicate the Release ID number of the original ROI along with the date that the original ROI was revoked. The original ROI will not be listed as a separate entry in the widget. In the example below, Release ID # 1016 is a revocation. It revoked Release ID # 1015 on 02/14/2025. Release ID # 1015 is the original ROI that had gone into effect on 01/10/2025. Release ID # 1015 will not appear as a separate entry on the widget.

RELEASE OF INFO	DRMATION_IN NET	WORK							്മ	
Action	Provider 🗘	Release ID 🗘	ROI Status 🗘	Effective Date	Expiration Date	Authorized Providers 🗘	PHI to Disclose	Released Signed By 🗘	Date Signed	Î
View	Recovery Inc	1016	Original ROI ID(1015)- Revoked on: 02/14/2025	01/10/2025	No Expiration Date	Authorize all network providers	All disclosures listed	Release attached via Provider File Attach	01/10/2025	

Release ID	\$ ROI Status 🗘	Effective Date
1016	Original ROI ID(1015)- Revoked on: 02/14/2025	01/10/2025

<u>Note</u>: It is <u>NOT</u> recommended to view ROI status information from the form's Pre-Display. When an active ROI is revoked, both the original ROI and the revocation will be listed in the Pre-Display as separate entries. This may lead to confusion. The widget will no longer list the original ROI and will instead replace that entry with the revocation. This is the preferred way to interpret ROI status.

By comparison, in the example below, the Pre-Display continues to list Release ID # 1015 as a separate entry without identifying it as revoked. The revocation is noted in the row for Release ID #1016.

Release ID for use if revoking pre 🗘	Select which Release is being revoke 🗘	Effective Date of Release	Is the patient revoking a p $\stackrel{\frown}{\downarrow}$	Date of Revocation $\hat{\varsigma}$
1015		01/10/2025	No	
1016	1015- 01/10/2025 - Authorize all network providers	01/10/2025	Yes	02/14/2025

Selecting the "View" button from the widget will open an image of the ROI in the console widget viewer.



Release of In	formation_In Network $ imes$	
8 ⊻-	,	0
	Date Signed: 02/14/2025 at 11:38 AM PST Form Name: Release of Information_In Network Client's Name: TEST,YOLANDA (000292568) Client's DOB: 02/14/1997 COUNTY OF LOS ANGELES SAPC 1000 S FREMONT AVE Alhambra, CA 91803	
	Release of Information	
	Release ID for use if revoking previous release:	
	1016	
	Program Name:	
	Recovery Inc (LE00001)	
	Effective Date of Release:	
	01/10/2025	

The ROI can be printed from the console widget viewer by scrolling down to the bottom and selecting the "Print" button.

	Form Status:	
	Final	
	rinai	
	Electronically Signed by: YOLANDA CESPEDES-KNADEL2 on 02/14/2025 at 11:38 AM PST	
	Author	
	Autro	
	3	
< 1 /	/1) 67% - — 🖂 + 💥 I 🛏 🗟 🤝 🔗	
	Open Record Close All Print ~	