

**STANDARDS FOR FORM AND CONTENT OF AUTHORIZATION FORMS
PROCEDURE**

1. The Privacy Official or Designee(s) will create authorization forms that meet the standards of this policy, and will assure that an adequate supply of such forms is available at each location at which BHHF provides medical care.
2. File copies of all authorization forms developed by BHHF will be kept for six years or longer if required by state law or regulation after the date they are superceded by a new form. Members of the BHHF workforce will only use authorization forms that have been approved by the Privacy Official or Designee(s) when requesting a patient's authorization for the use or disclosure of PHI.
3. The Privacy Official or Designee(s) will assure that supervisors and managers at all locations at which BHHF provides medical care have been trained to recognize valid and invalid authorizations. A checklist will be provided to assist with this.
4. Any authorization form whose validity is in question will be forwarded to the Privacy Official or Designee(s) for a final determination before any PHI is released or used in reliance on such form.

REFERENCE: 45 CFR § 164.508

See also: AUTHORIZATION TO USE OR DISCLOSE PROTECTED HEALTH INFORMATION
USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION FOR MARKETING PURPOSES
USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION FOR PURPOSES OF RESEARCH

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Jerome E. Lovrien, Commissioner, Bureau for Behavioral Health and Health Facilities