

San Mateo County Health System
Behavioral Health and Recovery Services
Policy Attachments, Clinical Forms and Other Information
Available in Languages other than English

| ENGLISH file name with location | SPANISH | TAGALOG | TONGAN |
|--|---------|---------|--------|
| BHRS Policy Attachments | | | |
| 98-01 Attach A Change Provider Request | ✓ | ✓ | |
| 00-06 Attach A Request Access PHI | ✓ | ✓ | |
| 03-01 Attach B Auth Disclose PHI | ✓ | ✓ | ✓ |
| 03-01 Attach C Auth Verbal Release PHI | ✓ | ✓ | ✓ |
| 03-01 Attach H AOD Auth Release PHI | ✓ | ✓ | ✓ |
| 03-02 Attach A Notice Privacy Practices | ✓ | ✓ | ✓ |
| 03-02 Attach B Consent NPP | ✓ | ✓ | ✓ |
| 03-06 Attach A Auth Disclose PHI | ✓ | ✓ | ✓ |
| 03-06 Attach B Auth Verbal Release PHI | ✓ | ✓ | ✓ |
| 03-12 Attach E (Payment) Information for Clients | ✓ | | |
| 04-07 Attach A Info Health Care Directives | ✓ | | |
| 04-07 Attach B Advance Directive Form | ✓ | | |
| 04-07 Attach C Info Health Care Agents | ✓ | | |
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| QM Clinical Forms | | | |
| 26.5 MH Assessment | ✓ | | |
| App Services & Consent Senior Peer Counseling | ✓ | | |
| Auth Disclose PHI (03-01 Attach B) | ✓ | ✓ | ✓ |
| Auth Record Session | ✓ | | |
| Auth Verbal Release PHI (03-01 Attach C) | ✓ | ✓ | ✓ |
| Change Provider Request (98-01 Attach A) | ✓ | ✓ | |
| Consent NPP (03-02 Attach B) | ✓ | ✓ | ✓ |
| Notice Privacy Practices (03-02 Attach A) | ✓ | ✓ | ✓ |
| Verification of Consent to Medication | ✓ | ✓ | |
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| QM Beneficiary Information/Client Rights | | | |
| General Statewide Informing Materials | ✓ | | |
| Lobby flyer "For Your Information & Protection" | ✓ | ✓ | |
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