

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

1700 K STREET
 SACRAMENTO, CA 95814-4037
 (916) 445-1942
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**NOTICE OF RETENTION OF CONFIDENTIAL RECORDS**

The Department of Alcohol and Drug Programs (ADP) hereby acknowledges the confidentiality of participant records maintained by any alcoholism or drug abuse recovery or treatment facility, or other program providing services as stipulated in 42 CFR (Code of Federal Regulations) Part 2 and the Health Insurance Portability and Accountability Act (HIPAA), Chapter 12, Health Oversight Activities.

ADP AUTHORIZED REPRESENTATIVE MAY CHECK ONE OF THE FOLLOWING:

- Inspection of participant records has disclosed deficiencies in complying with applicable regulations and/or standards for Alcohol/Drug Program Services which necessitates the duplication and retention of records containing client identifying information. Records copied and retained by ADP's duly authorized representative are being used to substantiate a claim of noncompliance.
- Inspection of participant records has **not** disclosed deficiencies in complying with applicable regulations and/or standards for Alcohol/Drug Program Services at the time of delivery of this Notice. However, records containing participant identifying information are being duplicated and retained to produce an evidentiary basis for a complaint investigation.
- Inspection of participant records has not disclosed deficiencies in complying with applicable regulations and/or standards for Alcohol/Drug Program Services at the time of delivery of this Notice. Copying and retention of documents is not necessary at this time.

Records containing participant identifying information shall be retained in a confidential folder as part of the facility or program file. All files are stored in a protected database at the Department of Alcohol and Drug Programs, Program Services Division, Drug Medi-Cal Monitoring Unit, 1700 K Street, Sacramento, California 95814-4037.

Records containing participant identifying information will be disposed of in accordance with 42 CFR, Part 2. Inquiries by the program or facility regarding disposition may be directed to Supervisor, Drug Medi-Cal Monitoring Unit, 1700 K Street, 4th Floor, Sacramento, California 95814-4037.

 Facility Name

 ADP Authorized Representative Date

 Provider Designee Date

I acknowledge receiving the original of this form.