

Jim Cosenza, LCSW, CADC

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Authorization for Release and Exchange of Information

Date: _____

I,

Patient First Name

Patient Middle Initial

Patient Last Name

residing at

Street Address

Apartment or Unit Number

City

State

Zip

Date of Birth: _____ and Telephone Number: _____

hereby authorize and request **Jim Cosenza, LCSW, CADC and staff** to release and exchange written, oral, or electronic information to:

Person, Agency, or Facility: _____

Address: _____

City: _____

State: _____

Zip: _____

Telephone: _____

FAX: _____

This information will be used for the purposes of continuity of care, insurance utilization, and in cases of emergency and is confined to the following specified and initialed information: (please initial in boxes)

Insurance:

initials

Mental Health:

initials

Treatment Verification:

initials

Treatment:

initials

Continuity of Care:

initials

Information Gathering:

initials

Diagnosis:

initials

This Authorization is valid until: _____

(must have date within the next 12 months)

I understand that I may revoke this authorization at any time, but not retroactive to the release of information made in good faith, by writing to **Jim Cosenza, LCSW, CADC** at the address above.

It has been explained to me that if I decline to consent to this release of information, the following are the consequences: _____

Signature of Patient or Legally Authorized Patient Representative

Date

Relationship to Patient

Jim Cosenza, LCSW, CADC

Date

Note: Authorization must be filled out in its entirety in order to be valid.

Notice to receiving agency or person: Under the provisions of the Illinois Mental Health and Developmental Disabilities Confidentiality Act, III. Rev. Stat. Ch. 91 ½ Par. 805 (d) (1979), you may not redisclose any of this information unless the person who consented to this disclosure specifically consents to such redisclosure. Under the Federal Act of July 1, 1975, Confidentiality of Alcohol and Drug Abuse Patient Records, no such records, nor information from such records may be further disclosed without specific authorization for such disclosure.