

**County of San Bernardino
Department of Behavioral Health**

Date: _____

Client Name: _____

Address: _____

**RE: RESPONSE TO REQUEST FOR RESTRICTIONS ON THE MANNER/METHOD OF
CONFIDENTIAL COMMUNICATIONS.**

We have reviewed your request for confidential communications dated _____.

This response applies to the request made at _____.

The County of San Bernardino, Department of Behavioral Health (DBH) agrees to use the alternative means/method/location you requested. Please inform DBH if any of your requested information has changed by completing a new [Request For Restrictions On The Manner/Method Of Confidential Communications Form Spanish](#) with the revised information provided on the new form.

DBH cannot accommodate your request or can only provide a limited accommodation (provide a description of the limitations on the accommodation) because

Signature

Date

County of San Bernardino Department of Behavioral Health

COMPLAINTS

If you believe your privacy rights have been violated, you may submit a complaint with us or with the Federal Government.

Filing a complaint will not affect your right to further treatment or future treatment.

<p>To file a complaint with the Department of Behavioral Health, contact:</p> <p>Chief Compliance Officer 268 W. Hospitality Lane, Ste. 400 San Bernardino, CA 92415</p> <p>Phone # (909) 382-3080 Fax# (909) 382-3105 E-mail: eporteous@dbh.sbcounty.gov</p>	<p>To file a complaint with the County of San Bernardino, contact:</p> <p>HIPAA Complaints Official 385 N. Arrowhead Ave, 5th Floor San Bernardino, CA 92415</p> <p>Phone # (909) 387-4500 Fax # (909) 387-8950 E-mail: HIPAAComplaints@cao.sbcounty.gov</p>
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To file a complaint with the Federal Government, contact: Secretary of the U.S. Department of Health and Human Services, Office of Civil Rights, Attention: Regional Manager, 50 United Nations Plaza, Room 322, San Francisco, CA 94102

For more information about your privacy rights, please refer to "DBH, Notice of Privacy Practices" available on our website at http://www.sbcounty.gov/dbh/Forms/COM004_E.pdf or http://www.sbcounty.gov/dbh/Forms/COM004_S.pdf for Spanish.

Please contact DBH, Office of Compliance if you have any questions 800-398-9736.