



## Template: Patient Notice for Part 2 Programs

The federal privacy protections for substance use disorder (SUD) treatment records, 42 USC § 290dd-2 and 42 CFR Part 2, require covered Part 2 programs to inform patients of their federal privacy rights and provide patients with a notice of the program's privacy practices ("Patient Notice"). This Template Patient Notice provides a framework that Part 2 programs may adapt to reflect their particular policies and practices. The template reflects the 2024 Final Rule's amendments to Section 2.22 of 42 CFR Part 2, which took effect on April 16, 2024, with a required compliance date of February 16, 2026. Additional federal and state requirements also apply.

This Template Patient Notice also provides a framework for HIPAA covered entities, which may or may not be Part 2 programs, to amend their Notice of Privacy Practices as required by the [2024 amendments](#) to the HIPAA Privacy Rule at Section 164.520 of 45 CFR Part 164. HIPAA covered entities that create or maintain records subject to 42 CFR Part 2 must update their Notice of Privacy Practices to include adequate notice to patients about the uses and disclosures of any Part 2-protected records, the individual's rights, and the covered entity's legal duties with respect to such records. These changes took effect June 25, 2024, with a compliance date of February 16, 2026.

This notice should be provided to the patient no later than the date of delivery for the first service, including service delivered electronically, or in an emergency treatment situation, as soon as reasonably practicable after the emergency treatment situation. See Section 2.22(c)(1) of 42 CFR Part 2. To learn about implementation requirements for programs with a physical location that delivers services, and implementation requirements for electronic delivery of the notice, refer to [Section 2.22\(c\)\(2\) and \(3\)](#) of 42 CFR Part 2.



## How to Use This Resource

This resource was designed by the CoE-PHI to provide organizations with a Template Patient Notice and accompanying annotated guidance for how it should be tailored for organizational context. Please consider the following when utilizing this resource:

- The template should be customized and tailored to your specific organization by someone in an administrative oversight or compliance role.
- The boxes that contain a blue background include annotated guidance and prompts where information should be entered. In certain circumstances, the boxes that contain a blue background also include a note stating “hover for additional instructions”, indicating that the user should hover their mouse over the box for additional context and instructions.
- Upon placing your cursor within the blue-shaded boxes, the guidance will disappear, allowing you **to either remove it, or tailor it to your specific organization.**
- Organizations should ensure that all information on the Patient Notice matches actual organizational practice, and that all staff are trained regarding the contents of the form when finalized.

**Note and disclaimer:** this template does not constitute legal advice. Specifics of any notice to patients should be discussed with your agency or organization’s privacy, compliance, or legal staff as may be applicable.

## Notice of Privacy Practices of

FEDERAL LAW PROTECTS THE CONFIDENTIALITY OF SUBSTANCE USE  
DISORDER PATIENT RECORDS.

This notice describes:

- How health information about you may be used and disclosed
- Your rights with respect to your health information
- How to file a complaint concerning a violation of the privacy or security of your health information, or of your rights concerning your information

YOU HAVE A RIGHT TO A COPY OF THIS NOTICE (IN PAPER OR ELECTRONIC  
FORM) AND TO DISCUSS IT WITH

AT

IF YOU HAVE ANY QUESTIONS.

*I. Uses and disclosures.*

*a.*

*i.*

*ii.*

*b.*

- i.* Records that are disclosed to a Part 2 program, covered entity, or business associate pursuant to the patient's written consent for treatment, payment, and health care operations may be further disclosed by that Part 2 program, covered entity, or business associate, without the patient's written consent, to the extent the HIPAA regulations permit such disclosure.

ii. A Part 2 program may use or disclose records to fundraise for the benefit of the Part 2 program only if the patient is first provided with a clear and conspicuous opportunity to elect not to receive fundraising communications.

c. A patient may provide a single consent for all future uses or disclosures for treatment, payment, and health care operations purposes.

d. \_\_\_\_\_ will only use and disclose your protected information as described in this notice, or with your written consent.

e. You may revoke your consent at any time, except to the extent \_\_\_\_\_ has acted in reliance upon it.

You may revoke consent by submitting a request in writing

at \_\_\_\_\_,

or you may request reasonable accommodation for an alternative revocation process by contacting \_\_\_\_\_ at \_\_\_\_\_.

f. If you were mandated to treatment through the criminal legal system (including drug court, probation, or parole) and you sign a consent authorizing disclosures to elements of the criminal legal system such as the court, probation officers, parole officers, prosecutors, or other law enforcement, your right to revoke consent may be more limited and should be clearly explained on the consent you sign.

g. Records, or testimony relaying the content of such records, shall not be used or disclosed in any civil, administrative, criminal, or legislative proceedings against you unless based on your specific written consent or a court order. Records shall only be used or disclosed based on a court order after notice and an opportunity to hear is provided to you (the patient) and/or the holder of the record, where required by 42 USC § 290dd-2 and 42 CFR Part 2. A court order authorizing use or disclosure must be accompanied by a subpoena or other similar legal mandate compelling disclosure before the record is used or disclosed.

II. *Your rights.*

- a. You have the right to request restrictions of disclosures, for purposes of treatment, payment, and healthcare operations, including when you have previously provided written consent.
- b. You have the right to request and obtain restrictions of disclosures to your health plan for those services for which you have paid in full.
- c. *The compliance date for this right is tolled until HHS revises the HIPAA Accounting of Disclosures provision at 45 CFR § 164.528. See 89 Fed. Reg. 12472, 12476 (2024). If the program has not implemented this right, delete this paragraph.* You have the right to an accounting of disclosures of electronic records under this part for the past three years.
- d. You have the right to an accounting of disclosures by  
  
for the preceding three years, including information about who received your protected records, the date of the disclosure, and a brief description of the information that was disclosed. You may submit your request to
- e. You have the right to obtain a copy of this notice from upon request.
- f. You have the right to discuss this notice with the contact person or office designated at the end of this notice.
- g. You have the right to elect not to receive communications from  
  
to fundraise on its own behalf.

III.

's duties.

- a. is required by law to maintain the privacy of records, to provide patients with notice of its legal duties and privacy practices with respect to records, and to notify affected patients following a breach of unsecured records.
- b. is required to abide by the terms of the notice currently in effect.
- c. reserves the right to change the terms of its notice and to make the new notice provisions effective for records that it maintains.

IV. *Complaints.*

- a. If you believe your privacy rights have been violated, you have the right to file a complaint with the Secretary of the U.S. Department of Health and Human Services and  
You may do so by contacting the HHS Office for Civil Rights or accessing <https://www.hhs.gov/hipaa/filing-a-complaint/index.html>. A patient is not required to report an alleged violation either to the Secretary or part 2 program but may report to either or both.
- b. In order to file a complaint with ,
- c. will not retaliate against you for filing a complaint.

FOR ADDITIONAL INFORMATION, CONTACT:

EFFECTIVE DATE: