

## Client Authorization to Release Information

Client's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Representative's Name: \_\_\_\_\_

Self     Guardian     Legal Representative/DPOA     Spouse

### **Client or Representative's Information**

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

- I give permission for Senior Care Consultants to discuss the health and care needs of the client listed above for the purpose of senior housing and care service referrals.
- I authorize them to review and discuss records and health care information from, to and with any long-term care facility, hospital, physician, skilled nursing facility or other health care providers and/or staff associated.
- I also authorize Senior Care Consultants and any of their associates same ability and permission to review and discuss records.
- I agree and understand that such information may be shared via email, fax, telephone calls, electronic mailings and care planning meetings.
- The authorization of this disclosure may change with the written notification of the client or their representatives.
- A photocopy, electronic mailing and/or fax shall be valid as original.
- This release shall be valid for 60 days from date of release.

I acknowledge that I have received the Disclosure of Services and Client Authorization To Release Information and have returned it via mail, email or fax to:

### **Senior Care Consultants**

PO Box 12692 Mill Creek, WA 98082 | P: 206-228-1678 F: 425-337-3679  
Email: [fsimons@seniorcareconsultants.net](mailto:fsimons@seniorcareconsultants.net) | [www.SeniorCareConsultants.net](http://www.SeniorCareConsultants.net)

\_\_\_\_\_  
Client or Representative Signature

\_\_\_\_\_  
Date of Release

## Disclosure of Services

Senior Care Consultants ('SCC') is a senior housing and care provider referral agency mandated under the ELDER AND VULNERABLE ADULT REFERRAL AGENCY ACT Chapter 18.330 RCW. As a client of SCC; you, your family and representatives have the right to a disclosure statement. SCC does not charge a fee to their clients or representatives for referral services and are paid directly by the senior housing and care provider. SCC makes referrals and offers options to their clients and does not make direct recommendations.

- SCC's senior housing and care provider referral services are always free to our clients and their families or representatives.
- SCC does not require or request clients to sign waivers of potential liability for losses of personal property or injury. Also, we do not ask for waivers of any rights of the client be signed.
- SCC works with the client, care service facilities and supportive housing providers. We will inform the providers with details regarding the potential clients housing and care needs. In order to do so, SCC must obtain authorization to disclose confidential health care information and information identifying the client.
- SCC conducts routine visits of the senior housing provider facilities we refer our clients to at minimum annually. During the referral process SCC will inform our clients if the property has been toured, DSHS website enforcement letter findings checked and dates those were complete.
- The client may without cause stop using SCC services or switch to another agency without penalty or cancellation fee to the client or representative.
- A client may file a complaint of violations with the Attorney General's office:

Attorney General Phone: Mon-Fri, 10am to 3pm, 360-753-6200  
Office of the Attorney General, 1125 Washington Street SE, PO Box 40100, Olympia, WA 98504-0100

- SCC receives fees from the senior housing or care providers for making referrals. This fee is based on an agreement that SCC and the provider have agreed upon. SCC requests that you provide a copy of your closing/contract documents indicating the monthly charges when complete.
- SCC's contract with senior housing and care providers state the fee cannot be passed on to the client. Payment terms are due anywhere from 10-30 days after client has begun services with the provider. We will provide a pro-rated refund to the provider if the client passes away or moves out within 60 days at a 30% rate based on number of days services were provided.
- Prior to moving into any adult family home the client will require an assessment by a DSHS certified nurse to establish the level of care required, a care plan for the resident and determine the cost of care services. Any fees associated with the assessment are the responsibility of the client and are paid directly to the nurse providing the assessment, if applicable. SCC can, at the request of the client, coordinate scheduling of the assessment with an independent DSHS certified nurse, but is not responsible for the assessment and receives no fees for this service.

***I hereby acknowledge receiving the Senior Care Consultants disclosure statement:***

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Client's Printed Name

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Client or Representative Signature

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Date