

The DMA-7098, *County DSS Request and Authorization to Disclose Health Information*, form was developed for social workers to request profiles needed in the investigation of abuse cases. The county Department of Social Services (DSS) director or his designee must sign the DMA-7098.

Mail or fax the completed DMA-7098, *County DSS Request and Authorization to Disclose Health Information* form to:

N.C. Division of Medical Assistance  
Quality Assurance Section - Box 18  
2501 Mail Service Center  
Raleigh, NC 27699-2501  
Fax 919-715-0801