

Bill of Rights for Persons Served

- 1. Mental Health Systems, Inc. (MHS, Inc.) does not discriminate on the basis of religion, race, sex, marital status, age, sexual orientation, gender identity, national origin, previous incarceration, disability or public assistance status.
- 2. Every client shall be fully informed, prior to or at the time of the intake session, of the services available at MHS, Inc. and of related financial charges that are the client's responsibility to pay beyond the coverage (if any) of health insurance.
- 3. Every client can expect complete and current information concerning their diagnosis and individual treatment plan in terms they can understand from their mental health professional or practitioner. This information shall include diagnosis, the nature and purpose of the proposed treatment, the risks and benefits of the proposed treatment, the possible negative outcomes of and possible alternatives to the proposed treatment, the probability that the proposed treatment will be successful, and the prognosis if the client chooses not to receive the treatment.
- 4. Every client shall have the opportunity to participate in the formulation of their individual treatment plan.
- 5. Every client shall have the right to know the name and competencies of the licensed mental health professional responsible for coordination of their treatment.
- 6. Every client who will be treated by an unlicensed mental health practitioner shall have access to a Statement of Credentials posted in the lobby of each facility that will include the following information before treatment begins:
 - a. Name, title, business address and telephone number of the unlicensed practitioner;
 - b. Degree(s), training, experience, or other qualifications of the unlicensed practitioner;
 - c. Name, business address and telephone number of the unlicensed practitioner's licensed mental health professional supervisor;
 - d. Brief summary, in plain language, of the theoretical approach used by the unlicensed practitioner in treating clients.
- 7. Every client shall have the right to respectfulness of privacy as it relates to their psychotherapy treatment program. Assessment, case discussion, consultation and treatment are kept private.
- 8. Every client shall have the freedom to voice grievances and recommend changes in policies and services to MHS, Inc. staff free from restraint, interference, coercion, discrimination, or reprisal.
- 9. In addition to the rights listed above, consumers of psychological services offered by psychologists licensed by the State of Minnesota have the right to:
 - a. Expect that a psychologist has met the minimal qualifications of and experience required by state law;
 - b. examine public records which contain the credentials of a psychologist;
 - c. to obtain a copy of the rules of conduct for psychologists. A consumer who wishes to obtain a copy should contact the Minnesota Board of Psychology, 2829 University



Avenue S.E., Suite 320, Minneapolis, MN, 55414-3237, 612-617-2230.

- 10. In addition to 1-8 above, consumers of psychological services offered by social workers licensed by the State of Minnesota have the right to:
 - a. Expect that a social worker has met the minimal qualifications of and experience required by state law;
 - b. examine public records which contain the credentials of a social worker;
 - c. to obtain a copy of the rules of conduct for social workers. A consumer who wishes to obtain a copy should contact the Minnesota Board of Social Work. 335 Randolph Ave, Suite 245, Saint Paul MN 55102, 612-617-2100.
- 11. In addition to 1-8 above, consumers of psychological services offered by counselors licensed by the State of Minnesota have the right to:
 - a. Expect that a counselor has met the minimal qualifications of and experience required by state law;
 - b. examine public records which contain the credentials of a counselor;
 - c. to obtain a copy of the rules of conduct for counselors. A consumer who wishes to obtain a copy should contact the MN Board of Behavioral Health and Therapy, 335 Randolph Avenue, Suite 290, St. Paul, MN 55102, 651-201-2756.
- 12. Every client has the right to refuse to participate in any experimental research.
- 13. Every client has the right to reasonable notice of changes in services or financial charges.
- 14. Every client may expect courteous treatment and to be free from verbal, physical, and sexual abuse by MHS, Inc. staff.
- 15. Every client shall receive information on billing before receiving treatment.
- 16. Every client may refuse mental health services or treatment.
- 17. Every client has a right to coordinated transfer when there will be a change of therapists.
- 18. Every client may assert the client's rights without retaliation.
- 19. Every client has the right to choose freely among available mental health professionals and practitioners in the community and to change therapists after mental health services have begun within the contractual limits of the client's health insurance, if any.
- 20. Other mental health services may be available in the community. For more information, telephone First Call for Help at 211.



Procedures for Filing a Grievance (Complaint)

- I. If a client believes that their rights have been violated by a mental health practitioner, the client is encouraged to submit an oral or written complaint to the clinic lead of the location they are receiving services. If the client is not able to submit a complaint written by the client or by someone else of the client's choosing on behalf of the client, the client may choose to submit a taped complaint in the client's own voice identifying the specific rights violation(s) believed to have occurred. The clinic lead shall investigate the complaint and attempt to rectify the problem within five working days. The client may request that this resolution be put in writing and given to the client.
- 2. If a client believes that their rights have been violated by a mental health professional, the client is strongly encouraged to submit a written complaint clearly stating the specific rights violation(s) and signed and dated by the client to the clinic lead. The client may choose to file a complaint with the mental health professional's state licensing board, or with the Office of Mental Health Practice in the case of a mental health practitioner.
 - A nurse is licensed by the Minnesota Board of Nursing, 1210 Northland Drive Suite 120, Mendota Heights, MN 55120. Call 612-688-1841 or file <a href="https://example.com/here-nurses/her
 - A psychiatrist is licensed by the Minnesota State Board of Medical Practice, 335 Randolph Avenue, Suite 140, St. Paul, MN 55102. Call 612-617-2130 to file.
 - A psychologist (LP) is licensed by the Minnesota Board of Psychology, 2829 University Avenue S.E., Suite 320, Minneapolis, MN. 55414. Call 612-617-2230 or visit the <u>board</u> website for more information on filing a complaint.
 - A counselor (LPCC, LPC, LADC) is licensed by the MN Board of Behavioral Health and Therapy, 335 Randolph Avenue, Suite 290, St. Paul, MN 55102. Call 651-201-2756 or visit the board website for more information.
 - A social worker (LICSW, LGSW) is licensed by the Minnesota Board of Social Work. 335 Randolph Ave, Suite 245, Saint Paul MN 55102. Call 612-617-2100 or file here.
 - An unlicensed mental health practitioner is regulated by the MN Board of Behavioral Health and Therapy, 335 Randolph Avenue, Suite 290, St. Paul, MN 55102. Call 651-201-2756 or visit the board website for more information.

Data Privacy Notice for Clients Who Provide Information in Person

1. Minnesota Statute requires MHS, Inc. to give a "data privacy notice" or "Tennessen Warning" before asking anyone for private or confidential data. Often the first contact with a prospective client is over the telephone. In cases where persons are asked for private data such as name or service desired or some details about circumstances, they must be given the following data privacy information:

"Before I can ask you to give me any information I am required by law to explain who can see it and how it will be used. The information you give will be used by the staff of this agency to help you determine the kind of treatment you need. No law requires that you give us information, but we cannot help you without some information. What you say will be kept private. but it could be reviewed by the staff who work in the program(s) you are treated within.

If you are a minor you can ask that data about you be kept private from your parents."



Any prospective client given this information over the telephone should also be given a copy of the complete data privacy notice at the intake session.

- 2. Federal and state laws require MHS, Inc. to keep all information about you strictly private. Anyone at MHS, INC. who may have access to information about you must keep that information private. Anyone who illegally shares information about you is subject to fines, dismissal or other legal action.
- 3. All information we request will be used for one or more of the purposes stated below:
 - a. to evaluate your need for care;
 - b. to plan the types of care that will help you the most;
 - c. to assist MHS, Inc. in collecting payment for the service we provide you.
- 4. You are not required to provide any information to us. However, if you choose not to give us information about you, that will make it more difficult for us to help you, and may interfere with or prevent achieving your counseling goal(s).
- 5. Information about the type, the amount, the dates, the cost, the outcome and the evaluation of the treatment given to you will be available to MHS, Inc. staff who need such information to keep records. This information may be sent to your insurance company for billing purposes, but only after you give your signed permission.

No audio or video recording of a treatment session will be made without your written permission. No one except MHS, Inc. staff involved in your treatment will view or listen to a treatment session or recording of a session, or read a verbatim transcript of a session, unless you give your permission.

There are a few instances where MHS, Inc. may be unable to protect your privacy. MHS, Inc. staff are required by law to report suspected child or vulnerable adult maltreatment, even if the information was received in confidence. If you are involved in a court action, your record may be subpoenaed. During an emergency non-MHS, Inc. affiliated individuals or agencies may be contacted (for example, physician, hospital, telephone answering service) in order to help you resolve your emergency. If you do not pay your bill on time, it may be reviewed by our attorney, used in a lawsuit or turned over to a collection agency.

6. You may see all the data about you unless it is used to investigate an illegal action or if a licensed mental health professional believes that it will be harmful to you or others. You may have the information explained to you and have information corrected you think is wrong and MHS, Inc. finds to be wrong. If you consider incorrect any information which MHS, Inc. finds to be correct, you may still attach your own explanation to your client record.

Privacy

Most of the information we collect about you will be classified as private. That means that you and MHS, Inc. staff who need the information can see it while others cannot. For example, MHS, Inc. therapists may participate in periodic case conferences for case review in order to insure that you and other clients



receive the most effective service possible. Your therapist will inform you if your case is discussed in a case conference.

Occasionally statistics and other anonymous data may be taken from the information we collect about you. This is public and open to anyone, but it will not identify you individually in any way.

Access by You

You can see all public and private records about yourself and your children. (See section on minors for an exception.) To see your file, submit a written request for records to your primary clinician. Access may take a few days, but ten working days is the longest you can be asked to wait. You may also authorize anyone else to see your records. Any access is without charge, but you will be charged for photocopies. Remember to bring identification with you when you request to see records.

Access by Others

Employees of MHS, Inc. will have access to information about you any time their work requires it. Any individual or agency you authorize by informed signed consent may have access to information about you for the purposes you identify. By law, some other government and contractor agencies may also have access to certain information about you if they provide a service to you or if they provide a service to this agency that affects you and requires access to your records. In circumstances specified in statute, information about you may or must be released without your consent. For examples of these circumstances, please review the document, "Access to Health Records: Practices and Rights," given to you at the time of your intake interview.

Details about how the information we collect about you may be shared are available from the staff person(s) who work with you.

Purposes

The purposes of the information we collect from you, or that you authorize us to collect from others about you, are listed below. Because this list of purposes covers a variety of situations, some of the purposes will not apply to you. Details about the purposes of the information we collect from you are listed on any release of private data form(s) you will be asked to complete and are available from MHS, Inc. staff. Depending on the services you receive. The purposes of the data we collect from you are:

- to assess your need for treatment;
- to provide effective care and treatment of problems identified by you;
- to coordinate your treatment with other members of your interdisciplinary team;
- to prepare statistical reports and do evaluative studies (you will not be individually identified in the reports or studies);
- to enable us to collect federal, state or county funds for the services, care or assistance that you or your dependent(s) receive from this agency;
- to permit this agency to collect from you or the Minnesota Department of Human Services or a county human services agency the payment owed us for the service(s) you receive from MHS, Inc.;



- to evaluate and audit programs; and
- other purposes specifically authorized by you.

Other Rights

You have the right to challenge the accuracy of any of the information in your records. If you want to challenge any information, talk to your MHS, Inc. therapist or write to a MHS, Inc. clinic lead. Your challenge must be answered in 30 days.

You have the right to insert your own written explanation of anything you object to in your records.

You have the right to appeal the decisions about your records. To file an appeal, you may write to the Commissioner of Administration, State of Minnesota. 50 Sherburne Avenue, St. Paul, Minnesota. 55155. Your notice to the Commissioner of Administration should contain the following information:

- your name, address, and phone number, if any;
- a statement that Mental Health Systems, Inc. is the agency involved in the dispute and that one of MHS, Inc.'s clinic leads is the responsible authority representing MHS, Inc.;
- a description of the nature of the dispute, including a description of the data; and
- the desired result of your appeal.

This notice must be filed within 60 days of the action being appealed.

Minors

If you are a minor (i.e., less than 18 years old), you have the right to request that information about you be kept from your parent(s) or legal guardian(s). This request should be made in writing to your MHS, Inc. therapist and both explain the reasons for withholding data and show that you understand the consequences of doing so. In a few cases the law permits us to withhold data from your parent(s) or legal guardian(s) without a request from you, if that data concerns the treatment of drug abuse or venereal disease or if you are married. If you have any questions about this, ask the MHS, Inc. therapist who works with you.

Whom to Contact

If you have any questions regarding the Data Practices Act or any of the information above, ask your MHS, Inc. therapist or an MHS, Inc. clinic lead. Please refer to www.mhs-dbt.com for current contacts. You may also direct inquiries to the Data Privacy Division, Department of Administration, 305A Centennial Office Building, 658 Cedar Street, St. Paul, MN 55155, 651-296-6733 or 1-800-657-3721.

Funding

MHS, Inc. is a private, for-profit clinic whose sole source of revenue is based on fees for services provided. Major sources of reimbursement for services provided are the Minnesota Health Care Programs (MHCP), and private health insurance. MHS, Inc. accepts MHCP (Medical Assistance, MinnesotaCare, or



Medicare) reimbursement as payment in full for covered services provided to a recipient with the following exceptions: (1) in the case of a spend-down, (2) when the recipient has received an insurance payment designated for the service, in which case MHS, Inc. is allowed to bill the recipient directly to recover the insurance payment that the recipient has received, and (3) under MinnesotaCare, if a copayment or dollar cap on the service exists. A fee schedule is available in the lobby of the each clinic or upon request.

Responsible Authority

The clinical leads at Mental Health Systems, Inc. are the responsible authority regarding the interpretation and implementation of the Government Data Practices Act. They are the people responsible in this Center for answering inquiries from the public concerning the provisions of the Data Practices Act.