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Welcome

Welcome to Pines Behavioral Health your local mental health and substance abuse agency that provides services and supports to assist those to achieve their full potential in life. This booklet is meant to help you understand what to expect as you receive these services and supports as well as to serve as a question and answer guide. Our mission is to attain the highest quality of life to those we serve through our assistance and support. We will provide clinically appropriate treatment and prevention using education, coordination of services, family support, and outreach regardless of emotional, behavioral, developmental or financial limitations. If you have any questions at any time, do not hesitate to contact your clinician or customer services.

History of Pines

Pines has been providing behavioral health services since the mid-60's. We employ highly professional, ethical and trained staff to serve persons with multiple needs. Over the years, Pines has expanded not only the number of staff employed, but also the types and levels of services available in response to the community. Most recently, we have partnered with seven other similar agencies in surrounding counties (Barry, Berrien, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren) to share costs, learn from others, and provide additional choice to you. The oversight of the Medicaid services across this partnership is managed by Southwest Michigan Behavioral Health.

Our Commitment to You

During your receipt of services from us, we will make sure that your services are provided based on your needs and personal goals in an environment of confidentiality and privacy. You will have a say in how and what is provided to while receiving care, in a language and in a way that is most understandable to you. Your clinician will work with you to use the persons in your life (family and friends) to assist in this process in combination with professional services to better assist you in your recovery.

Code of Ethics and Conduct

Pines is committed to providing services according to federal and state laws and regulations, and in accordance with ethical standards. Staff and contracted providers are required to adhere to our policy outlining

appropriate conduct including anti-fraud and abuse practices, discrimination, and other behaviors which may place you and Pines at risk or vulnerability. You may at any time request a full copy of our code of conduct policy, each discipline's code of ethics, and/or our risk management plan.

Recovery

The overall intent of services is to lead you through a process of recovery. "Recovery" includes having a renewed self-esteem, the ability to see issues you face in life with a new way of approaching them, being able to live with confidence, and if applicable, the ability to maintain sobriety. It is not about whether you need to take medications or not or being "cured", but rather what you are able to do with your life as a result of better knowing who you are and what you are capable of. We are honored that you have chosen us to help you in this process and look forward to celebrating your success.

GENERAL AGENCY OPERATIONS

Pines operates under the direction of several state and federal laws, which govern public mental health agencies, including the Michigan Mental Health Code. Our operations are designed to meet the overall community need for mental health and may change according to changes in law or feedback from the community. When operations change, this booklet will be updated and/or you will receive a special notice to these changes.

Hours of Operation

We are open Monday through Friday from 8:00 a.m. – 5:00 p.m. On Tuesdays, we are open until 7:00 p.m. Occasionally, we may be closed for holidays, inclement weather, or staff training. However, during these closures and outside of business hours, emergency response services are always available and can be accessed by calling our local numbers (517-279-8404 and 517-278-2129), or direct dialing 1-888-725-7534. To access services during business hours, call 517-279-8404 or walk in at your convenience on Wednesdays for an eligibility screening. Pines closure due to inclement weather will be announced on: Radio Station WTVB 95.5FM and WWMT-TV Channel 3 News.

Accommodations for Special Needs

Pines makes several accommodations in order for people to receive mental health services. Our buildings and bathrooms are wheelchair accessible, and doors to lobby area automatically open. Interpreters and/or translators are available for those with limited English proficiency. Michigan Relay is available for persons with hearing impairments and assistance with reading materials is available for persons who are not able to read. Services are provided within a variety of locations

including the office, community settings, or within your home depending on your needs and preferences. If there is an accommodation that you need that is not listed above, do not hesitate to let us know.

Pines Behavioral Health complies with applicable Federal Civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Pines Behavioral Health does not exclude people or treat them differently because of race, color, national origin, age disability or sex.

Pines Behavioral Health:

- Provides free aids and services to people with disability to communicate effectively with us such as
 1. Qualified sign language interpreters
 2. Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English such as:
 1. Qualified interpreters
 2. Information written in other languages

If you need these services, contact our Member Services Representative.

If you believe that Pines Behavioral Health has failed to provide these services or discriminated in another way on the basis of race, color national origin, age disability or sex, you can file a grievance with:

Pines Behavioral Health, Member Services Representative
200 Vista drive
Coldwater, MI 49036

P: 517-278-2129 or 866-877-4636

TTY: 711

You can file a grievance in person, by mail, fax or email. If you need help filing a grievance, our Member Services Representative is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through their Complaint Portal available at <https://ocrportal.hhs.gov/ocr/portal/lbby.jsf> or by mail or phone at:

**U.S Dept. Of Health and Human Services
200 Independence Ave. SW, Room 509F, HH Building
Washington, D.C. 20201
1-800-368-1019, 1-800-537-7697 (TDD)**

Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/inex.html>.

“ATENCIÓN: Si habla **español**, hay servicios gratuitos de asistencia con el idioma para usted. Llame al 1-800-890-3712 (TTY: 711)”.

“انتبه: إن كنت تتحدث ال عربي، فتوجد خدمات مساعدة لغوية، مجانية، وممتاحة (رسالة مبرقة: 711) (1-800-890-3712). اتصل بـ 3712”

“ACHTUNG: Sollten Sie **deutsch** sprechen, steht Ihnen ein Sprachenhilfe-Service kostenlos zur Verfügung. Sie können uns unter folgender Telefonnummer erreichen: +1-800-890-3712 (TTY: 711).”

“请注意: 如果您说中文, 您可以利用我们免费提供的语言帮助服务。详情请致电1-800-890-3712 (TTY: 711)。”

“OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-800-890-3712 (TTY- 711).”

“UWAGA: Jeśli mówi Pan/Pani **po polsku**, oferujemy bezpłatną pomoc językową. Proszę zadzwonić pod numer 1-800-890-3712 (TTY/tel. dla niesłyszących: 711).”

“VINI RE: Në qoftë se flisni **shqip**, keni në dispozicion shërbim falas për t'ju ndihmuar me gjuhën. Telefononi 1-800-890-3712 (TTY-teletext: 711).”

“ATTENZIONE: Si parla **italiano**, servizi gratuiti di assistenza linguistica, sono a vostra disposizione. Chiamare 1-800-890-3712 (TTY: 711).”

“TALA: Kung kayo ay nagsasalita ng **Tagalog**, ang serbisyo ng tulong sa wika (language assistance services), ay available upang magamit ninyo, nang walang bayad. Tumawag sa 1-800-890-3712 (TTY: 711).”

“**ध्यान दें** : यदि आप **हिन्दी** बोलते हैं, तो आपके लिए भाषा सहायता सेवाएँ मुफ्त में उपलब्ध हैं। 1-800-890-3712 (TTY: 711) पर कॉल करें।”

"주의: 귀하가 **한국어**를 할 경우, 한국어 언어 지원 서비스를 무료로 사용할 수 있습니다. 1-800-890-3712 (TTY 문자 전화기: 711)로 전화하십시오."

"LƯU Ý: Nếu quý vị nói **tiếng Việt**, các dịch vụ hỗ trợ ngôn ngữ được cung cấp cho quý vị miễn phí. Vui lòng gọi số 1-800-890-3712 (TTY: 711)".

"**আপনার দৃষ্টি আকর্ষণ করছি**: আপন যদি বাংলাভাষী হ'ন এবং যদি আপনার ভাষাগত সাহায্যের প্রয়োজন হয়, তাহলে নথিরাচায় সাহায্য পতে ফোন করুন: ১-৮০০-৮৯০-৩৭১২ (TTY: 711) 1-800-890-3712 (TTY: 711)."

ご注意：日本語で対応しているアシスタンスサービスを無料でご用意しております。1-800-890-3712 (TTY: 711)へお電話下さい。

«ВНИМАНИЕ! Если вы говорите на **русском** языке, вам предоставляется бесплатное языковое обслуживание. Звоните по тел.: 1-800-890-3712 (телефон с текстовым выходом: 711)».

Appointments

When you are scheduled an appointment, we will try as best as we can to get you in quickly as well as accommodate the best time of day for you. Often times, someone else may cancel or call to re-schedule so it may be of benefit for you to call back to see if you can get in quicker as a result. Letting us know ahead of time of any appointments that cannot be kept allows us to fill the appointment time with someone else who is waiting. If you know you cannot make an appointment for any reason, please let us know within 24 hours, so that someone else can occupy your timeslot.

Therapy appointments are generally scheduled for 50 minutes to allow time during the remaining hour for documenting the outcome of the session. Please arrive on time for these appointments as the therapist may not be able to see you if you are too late or you may receive less time than normally scheduled.

Payment for Services

Pines accepts most insurances including Medicaid. Most out of pocket costs are determined by an ability to pay system as specified by state law. For persons without insurance coverage, an ability to pay assessment will be provided to determine what if any costs will need to be paid out of pocket. Because we need to make sure state and federal money is spent appropriately and accurately, it is necessary to verify your insurance at each visit. Please let us know as soon as possible if your insurance, income, or address changes. It is important to let you know that if you are able to use another resource for service payment and you refuse to do so, you may be charged the full fee for services. Rates for services are available upon request.

Safety

Pines is committed to providing its consumers and staff a safe environment. We will not tolerate threats, threatening behavior, or acts of violence against employees, consumers, visitors, or other individuals by anyone on our property. This includes physical attacks, verbal or physical threats, destruction of property, sexual assaults, intimidation, or abusive language. Weapons and other means that could be used as a weapon are not allowed. To promote a healthy and safe environment, we ask that you not bring alcohol or illegal drugs onto the premises, or smoke/use tobacco within the building. Prescription drugs brought onto the premises must be your own, and must not be sold or given to other persons. Designated smoke areas are available outside of the building for your convenience. You may be required to reschedule your appointment if you arrive intoxicated and unable to participate in treatment. As services are designed to assist you in achieving your stated outcome, it is important that you are in a position to understand and participate to the fullest extent possible something that may not be possible to do while intoxicated. The failure to abide by our safety policies as outlined above, thus potentially placing you or others at risk, may result in removal from the building, police officials being noticed, and/or the possibility that services cannot be provided at Pines. We have a safety committee, which meets regularly to discuss issues of safety. Safety inspections are conducted internally as well as by certified professionals. Lighting fixtures that illuminate during a power failure can be found along the hallways and lighted exit signs can be found above the door. Clinical areas are secured in the event of a hostile environment involving a weapon, and to safeguard your privacy. Fire extinguishers are prominently displayed in each area and the lobbies and reception areas are equipped with medical and first aid supply kits and instructions for their use. While you are receiving services, you may encounter a “safety drill”. These drills prepare staff for responding to real safety emergencies and include situations such as fire, tornado, chemical spills, bomb threat, responding to weapons and medical emergencies. Please do not see these events as disruptions to your service, but rather our way in ensuring that your safety is always protected. Posted along the hallways are emergency evacuation routes. Below is a list of our general procedures in the event of a specific emergency:

Posted along the hallways are emergency evacuation routes. Below is a list of our general procedures in the event of a specific emergency:

Fire: Exit the building from the closest exit in a calm, but quick fashion. Walk to the employee parking lot in the farthest south corner and wait for further instruction.

Tornado: There is a designated safe hallway in the building. Proceed to the Large bathrooms and the short hallways just outside of those bathrooms.

Bomb Threat: When given the instruction to do so, evacuate the building to the “safe area”. The Gross-Stabil parking lot, across the street from the Pines Behavioral Health building.

Chemical Spill: Remain within the building (or the designated safe location) until instructed otherwise. Staff will also instruct individuals coming from outside the building to remain in the foyer area of the building, until the authorities instruct differently. Visitors will be allowed to leave following directions of the legal authority announcing the emergency.

Advanced Psychiatric Directives

If you have an advanced psychiatric directive (someone you have appointed to make decisions for you in the event you become unable to do so), we will need a copy for our records. If your directive involves withholding lifesaving treatment, Pines will pass that information onto hospital emergency personnel; however, we must perform lifesaving measures until they arrive. If you do not have a psychiatric advanced directive, but would like to develop one, you may request information and the forms to do so at any time. To ensure that your wishes can be made known, please let us know as soon as possible any changes you have made to your directives. All Advance Directive decisions are voluntary. If you do create a psychiatric advance directive, you should give copies to:

- All providers caring for you;
- People you have named as Medical or Mental Health Patient Advocate;
- Family members or trusted friends who could help your doctors and behavioral health providers make choices for you if you cannot make those choices.

If you do not believe you have received appropriate information regarding Psychiatric Advance Directives from Pines, please contact Customer Services office to file a grievance, 1-866-877-4636

UNDERSTANDING YOUR SERVICES

The services that are provided will be based on state and federal regulated eligibility parameters as well as your clinical needs and personal input. Services are designed to be flexible in terms of type, duration, and intensity levels. Services are voluntary and you must acknowledge in writing an informed consent to such services including risks and benefits; court-ordered treatment will be honored only upon your written consent. Services are available in languages that you understand including interpreter and/or translated materials free of charge. The following areas provide a more detailed understanding of what you can expect.

Eligibility

Before you begin services, an eligibility screen must occur. This screen is based on parameters set forth by your insurance plan as well as state laws that govern who qualifies for behavioral health services. In addition, this screening will assist in determining what community resources are available for you, what services based on history and expertise will be the most beneficial, and which agency is the best provider for the issues you want resolved.

Minors 14 years or older may seek mental health services (except psychiatric) without parental consent for up to 12 sessions or 4 months whichever is sooner. All other minors receiving mental health services must have parental or guardian consent. Minors receiving only substance abuse services, may consent to services independently.

The Change Process

Your path to recovery is often not easy, and requires commitment on your part. During this process, you will learn different skills and applying those skills will change how you've reacted to situations in the past. As a result, you may find this uncomfortable, sometimes difficult, and those who you initially felt were supportive may no longer be. If your issue(s) surrounds parenting, oftentimes the child or children will engage in an increase in behaviors in response to your newly learned skills. It may feel as if services have not met your expectations. With patience and continued commitment, you will begin to notice that your hard work has paid off. Your confidence will increase, your controlled parenting will improve, and truly supportive relationships will be developed. Throughout this process, it will be important to understand and remember that achieving your goals are ultimately up to you. Your

therapist or case manager can help point you in the right direction, but they cannot do the hard work for you.

Person Centered Planning

When you have been determined eligible for services, you will begin what is referred to as “person centered planning”. Person centered planning (PCP) is a process in which your desires and preferences as to what you want to accomplish are central to the services that are provided. PCP allows you to determine when times are most convenient for you to engage in services, who is the best clinician for you to work with, what service will best meet your need, etc. A planning meeting is conducted, facilitated by the person of your choice, including a facilitator outside of Pines if you choose, in which these areas can be discussed. PCP is limited based on legal, health and safety parameters, as well as reasonableness and the availability of your choices.

Choice

The choice of what you wish to improve upon, with whom you’d like to help support you in doing so, and how to best achieve your goal is central to your recovery. You have the choice of case manager or therapist you would like to work with and you can request a change if the relationship does not work for you.

Before your planning meeting, you will also be asked if you would like your meeting facilitated by an “independent facilitator” – someone other than your therapist or case manager. Additionally, depending on your needs, you may also be eligible for self-determination. Self-determination is a process in which you control an approved amount of dollars, using this money to purchase the services or supports that are necessary. For more information, contact customer services.

Assessment

Your primary coordinator of service will conduct an assessment of your strengths, needs, abilities and preferences with you in order to best develop the most effective plan for your care. Therefore, it is important that you disclose as much as you are willing to and be as honest as possible so that your expectations for treatment can be met as soon as possible.

This initial assessment will occur usually during your first visit with your clinician, but it is important to note that the process of assessment is ongoing. As your relationship with your clinician grows, you will most likely feel more comfortable to share additional information that will impact your plan. As you do, you will be involved in whether your plan continues to be the most effective and what if any changes need to be made as a result.

Natural Supports

During the assessment phase, the clinician will inquire as to who is providing support to you in various parts of your life. This may be as simple as a friend you enjoy spending time with, or something more structured such as involvement in a community group or project. It is important to include your established support system in your overall treatment progress/ recovery to the level you feel most comfortable and to widen this circle of support if at all possible. The more support we have in our lives; the fewer burdens we have to shoulder ourselves during the times of trouble. Pines may be able to assist you in connecting with potential support systems – let us know how we can help.

Individual Plan of Service Development

After decisions have been made as to the goals you wish to accomplish, a document called the “treatment plan” will be developed that outlines the services that will be developed to help you accomplish those goals and let you know who should provide the services. This document will spell out the chosen goal(s), the steps to achieve the goals, the ideal timeframe to which each step will be achieved, how often you will meet with each

service provider and the location each service will be provided. Other things often added to this document include how your health and safety issues will be addressed, and what other personal or community resources will be used to help. You are entitled to receive a copy of this document within 15 days of its development. If you do not receive it, contact your clinician or customer services.

Family Involvement

When we are working with children, it is important to involve the family into the child's care. The child's success will be largely impacted on the family relationships within the home and without home environment improvement, often the child will revert back to the behaviors, thoughts or feelings that initiated services. Exceptions to this policy will occur in the event that the clinician feels the family member may actually be more harmful to the child's progress or if the child has consented to services independent of their parent(s).

Coordination of Your Care

With your permission, we will coordinate the services you receive with other agencies and your primary care physician. Your mental health often overlaps with other areas in your life such as your medical wellness, your employment, your education, or legal involvement. With effective coordination, those other areas can also be adequately addressed so that your overall well-being is improved. If you are mandated to receive services, and do not wish for us to speak to the court or their designee, we will honor your request, but consequences from the court mandating such treatment may occur.

Referrals and Discharge

During your treatment, it may be necessary to make a referral either to a different service or to an additional service to achieve the greatest outcome for you. If this were to be the case, you will be consulted for agreement. Care will be coordinated between the different service providers so that you experience as little disruption as possible.

During the early stages of your treatment, your clinician will form with you a plan for determining when it will be known that services should end. This is called a discharge plan, or sometimes called a transition plan. Some people may require services for a long period of time but may transition to different levels or intensity of that service whereas other people may no longer require services at all and will be discharged. Your plan will be individualized based on what you need and will be updated regularly as you progress.

In extreme cases, an administrative discharge may be necessary based on actions that are perceived to be a safety risk for others in treatment. Should an administrative discharge occur, we will follow up within 72 hours to evaluate your level of risk.

SERVICES AVAILABLE

There are many services available to meet your unique needs, however, eligibility criteria differ. Your case manager or clinician will help you choose the right service(s) during the person centered planning process. These services are generally categorized according to the level of intensity needed by each consumer. Full descriptions can be found within the Southwest Michigan Behavioral Health Customer Handbook or is available upon request.

Outpatient Services

All services attempt to coordinate services with other agencies, providers, and your primary physician as indicated, to meet the specific needs of the individual. As necessary, they may include outpatient Psychiatric services with medications.

Adult Services: These treatments may include individual, family, couples, or group therapeutic intervention. Some common problems are adjustments to life changes due to death or divorce; problems with children or stepchildren; anxiety; depression, emotional difficulties; and suicidal thoughts or actions.

Older Adult Services: In addition to those services as indicated in Adult services area, there are also pre nursing home evaluations and outreach services in the home to deal with aging related issues.

Child / Adolescent Services: Consultation, testing, and support for the child and family. Problems may include adjustment to divorce; blended families; conflicts with parents or school; depression; anxiety; hyperactivity; difficult life adjustments; and suicidal thoughts or actions. For children diagnosed with autism, we offer through contracted providers, Applied Behavioral Analysis to those that qualify and can benefit from this service.

Substance Use Services

Outpatient: Individual, family and group therapy for persons with a substance use problem and/or persons affected by family members with an addiction. Early intervention services for persons who are engaged in early use are available as well.

Intensive Outpatient: Group therapy provided at an intensive level (at least 9 hours per week) to assist in the addiction recovery process.

Diversion/Prevention Services: Services available in and for the community with the goal of preventing substance use and addiction and/or diverting persons from incarceration, additional legal difficulties, or lengthy criminal justice sentences.

Case Management Services: Linking, monitoring and coordinating necessary resources to achieve recovery based on assessment and planning.

Women Support Services: Services designed for women who have a substance use disorder and need support while raising their children or regaining custody of their children.

Recovery Support Services: Services designed to provide engagement in services, and ongoing support to the person in recovery. May also include peer-led groups.

Targeted Case Management Services / Supports Coordination

These services assist individuals who have some functional limitations from developmental disability or mental illness. Assistance is coordinated with other providers, agencies, and primary healthcare provider. Assistance may include day programming; work training or placement; housing including foster care placements; or applying for Social Security, SSI, Medicaid, or Medicare. Persons with complex medical issues are also assisted through referrals to specialized health care services, and coordination of care across multiple service providers.

Assertive Community Treatment

These services assist individuals with mental illness who have difficulty with their daily lives. The program is set up to have a higher level of outpatient intervention services that are outreaching and of an in-home nature. The multi-disciplinary team is able to respond to a broad range of individualized needs to help sustain and support the individual in the community.

Home Based Services

This program is an intensive service for children with severe emotional disorders and their family members. Therapy and case management is provided to assist the family achieve an improved relationship and functioning level, preventing the need for out-of-home placement.

Wraparound Services

This program is for families that are involved with multiple service providers, or whom have not benefitted from other less intensive mental health services. The Wraparound Facilitator will assure that the necessary services are provided and coordinated to help

preserve the family unit.

Inpatient Psychiatric Services

For those times when a brief inpatient hospital admission may be necessary we will do the screening and facilitation of admission to a variety of private or public hospitals, based upon the needs of the individual. We are the gatekeeper and single point of entry for any inpatient admission for those who may need to access public funding.

Specialized Group Homes

These group homes provide 24/7 supervised residential living for individuals with severe/profound intellectual/developmental disability, or mental illness. This includes individuals with high medical needs or challenging behaviors, beyond those that can be managed in traditional foster care. Case management, nursing, and other specialized service providers may also be involved in the care of the individual.

Peer Services

Peer services provide a rich understanding of treatment and the need for supports based on the peer's own lived experience with mental health conditions or parenting a child with a severe emotional disturbance or intellectual/developmental disability.

Supportive Services

The following services are provided through a contract with other service providers:

Applied Behavioral Analysis (ABA): ABA is offered in the home or within a center under the supervision of psychologists certified in behavioral analysis. Family training and support is also available to further assist the family.

Community Living Supports: Offers a variety of individual or group support designed to increase self-care skills and social

awareness.

Supported Employment: Places persons with disabilities in community work sites.

Clubhouse: Promotes independent living skills for persons, while improving self-esteem and encouraging appropriate social interaction.

Housing Assistance: Assistance to prevent homelessness and/or increase one's independent living environment.

Respite: A break provided to parents or other caregivers responsible for caring for persons with mental health conditions or intellectual/developmental disabilities

Friendship Center

The Friendship Center is a contracted consumer-run social recreation and support program for individuals in the community.

Emergency Services - Crisis Intervention

A clinical professional is on call 24 hours a day, seven days a week to speak with the individual in crisis, as well as their family members or friends. This intervention may be made either by telephone or in person, depending upon the situation. Our clinician will evaluate the presenting problems, provide support and brief therapy as appropriate, and make recommendations and referrals to follow up to the crisis.

During business hours: (517) 279-8404 or (517) 278-2129

After business hours: (517) 279-8404, (517) 278-2129, or (888) 725-7534

RIGHTS AND RESPONSIBILITIES

Recipient Rights:

Mental Health and Substance Abuse

You are entitled to a number of rights as someone receiving public mental health and substance abuse services. Rights for persons receiving mental health services can be found within

the Mental Health Recipient Rights Book. Rights for persons receiving substance abuse services can be found below. If you receive services for both mental health and substance abuse, you are covered by both rights. If you feel your rights have not been protected, please contact the recipient rights officer immediately at 279-8404.

Substance Use Specific Recipient Rights

1. A recipient as defined in the 1981 Administrative Rules for Substance Abuse Service Programs in Michigan (see definitions) shall not be denied appropriate service on the basis of race, color, national origin, religion, sex, age, mental or physical handicap, marital status, sexual preference, or political beliefs.
2. The admission of a recipient to this program, or the provisions of prevention services, shall not result in the recipient being deprived of any rights, privileges, or benefits which are guaranteed to individuals by state or federal law or by the state or federal constitution.
3. As part of the intake or admission process, each recipient will receive a brochure which summarizes recipient rights. The recipient will then be requested to sign the rights acknowledgement form to indicate understanding of the rights.
4. If the recipient is incapacitated, he or she shall be presented with the previously mentioned brochure, explanation of rights, and opportunity to document understanding of the rights as soon as feasible, but not more than 72 hours after admission.
5. Upon admission, each recipient is provided with program rules, which are also posted in public areas in the program. These program rules inform new recipients of the infractions that can lead to discharge. The rules also describe the mechanism for appealing a discharge decision and which staff has authority to discharge. The recipient signs a form that documents that the written

program rules have been received and any questions have been answered.

6. A recipient shall participate in the development of his or her treatment plan.
7. A recipient has the right to refuse treatment and to be informed of the consequences of that refusal. When a refusal of treatment prevents this program from providing services according to ethical and professional standards, the relationship with the recipient may be terminated upon reasonable notice.
8. A recipient shall have the benefits, side effects, and risks associated with the use of any drugs fully explained in language which is understood by the recipient.
9. A program staff member shall not physically or mentally abuse or neglect or sexually abuse a recipient as the terms “abuse” and “neglect” are defined in the Substance Abuse Licensing Section of the Administrative Rules (see definitions).
10. A recipient has the right to review, copy, or receive a summary of his or her program records, unless in the judgment of the Program Director, such actions will be detrimental to the recipient or to others for either of the following reasons:
 - a. Granting the request for disclosure will cause substantial harm to the relationship between the recipient and the program, or the program’s capacity to provide services in general.
 - b. Granting the request for disclosure will cause substantial harm to the recipient If the Program Director or designee determines that such action will be detrimental, the recipient is allowed to review non-detrimental portions of the record or a

summary of the record. If a recipient is denied the right to review all or part of his or her record, the reason for the denial shall be stated to the recipient. An explanation of what portions of the record are detrimental and for what reasons, shall be stated in the client record and shall be signed by the Program Director.

11. A recipient has the right to give prior informed consent, consistent with federal confidentiality regulations, for the use and future disposition of products of special observation and audiovisual techniques, such as one-way vision mirrors, tape recorders, television, movies, or photographs.
12. Fingerprints may be taken and used in connection with treatment or research or to determine the name of a recipient only if expressed written consent has been obtained from the recipient. Fingerprints shall be kept as a separate part of the recipient's record and shall be destroyed or returned to the recipient when the fingerprints are no longer essential to treatment or research.
13. Should this program engage in any experimental or research procedure, any or all recipients will be advised as to the procedures to be used, and have the right to refuse participation in the experiment or research without jeopardizing their continuation of services. State and federal rules and regulations concerning research involving human subjects will be reviewed and followed.
14. A recipient may present grievances or suggested changes in program policies and services to the program staff, to governmental officials, or to another person within or outside the program. In this process, the program shall not in any way restrain the recipient.
15. A recipient has the right to review the written fee schedule. Any revisions of fees will be approved by the

governing authority.

16. A recipient is entitled to receive an explanation of his or her bill upon request, regardless of the source of payment

Additional Rights For Prevention Programs

17. Any program announcement, brochure, or other written communication that describes our program's substance abuse prevention services shall state the following:
"Recipient of substance abuse services have rights protected by state and federal law and promulgated rules." For information, contact the Bureau of Health Systems, Division of Licensing & Certification, Substance Abuse Licensing Section, Recipient Rights Coordinator, P.O. Box 30664, Lansing, MI 48909.
18. When prevention program records that include both the recipient's name and information regarding his or her substance abuse or abuse are maintained, the recipient shall be provided with both a summary of recipient rights, and written notification that states: "Recipients of substance abuse services have rights protected by state or federal law and promulgated rules." For information, contact the Bureau of Health Systems, Division of Licensing & Certification, Substance Abuse Licensing Section, Recipient Rights Coordinator, P.O. Box 30664, Lansing, MI 48909.

When a recipient telephones this prevention program, and when program records are maintained that include both the recipient's name and information regarding his or her substance use or abuse, the recipient shall be informed that a summary of recipient rights will be mailed to him or her on request.

Recipient Responsibilities

As an active participant in receiving services, you have the

responsibility:

- To present your Medicaid card and/or other insurance coverages prior to receiving services.
- To let us know any changes to your address, income and/or insurance as they occur.
- To keep scheduled appointments or let us know if you will be delayed or cannot make the appointment at least 24 hours in advance.
- To pay all charges that have been determined you owe.
- To pay payments for services on time.
- To turn over any provider payments received by third party insurers.
- To ask questions about your services and keep asking until you fully understand.
- To provide honest and complete information to those providing services.
- To follow your plan of care that you chose and understand what might happen if you choose not to follow the plan.
- To assist in the complaint process so that resolutions may be mutually agreeable.
- To express your opinions, concerns or complaints in a constructive manner.
- To not disclose the identity of other persons receiving services here.
- To treat staff and other persons receiving services with courtesy and respect.

In the event that your conduct warrants an imminent threat of harm to yourself or others, restrictions on your rights or privileges may be necessary for protective purposes. In the event that this occurs, these restrictions will be the least

restrictive possible for you. So that you may quickly but appropriately regain access to any lost rights or privileges, the safety issues necessitating the loss will be reviewed frequently.

Customer Services

Customer Services is a function that has been designed to help you answer any questions that you have. If you have any questions, complaints, or need general information, feel free to ask for customer services at 1-866-877-4636 any time during business hours, you may need to leave a message. Your message will be returned within the next business day.

Privacy and Confidentiality Notice

Each time you visit Pines or one of Pines' Service providers, a record of your visit is made. Typically, this record contains your symptoms, any test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment
- Means of communication among the many health professionals who contribute to your care
- Legal document describing the care you received
- Means by which you or your insurance can verify that services billed were actually provided
- A tool in educating health professionals
- A source of data for research
- A source of information for public health officials charged with improving the health of the nation
- A source of data for facility planning and marketing
- A tool with which we can assess and continually work

to improve the care we render and the outcomes we achieve

- Understanding what is in your record and how your health information is used helps you to:
- Ensure its accuracy
- Better understand who, what, when, where, and why others may access your health information
- Make more informed decisions when authorizing (permitting) disclosure to others

Your Health Information Rights: Although your health record is the physical property of the healthcare provider or facility that compiled it, the information belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your information
- Obtain a paper copy of the notice of information practices upon request
- Inspect and obtain a copy of your record
- Request amendments to your record
- Obtain a list of disclosures of your health information
- Revoke your authorization (permission) to use or disclose health information except to the extent that action has already been taken

Our Responsibilities: This organization is required to:

- Maintain the privacy of your health information
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you

- Abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction to the release of your information
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, we will notify you and the community and have such changes listed on the Pines website (www.pinesbhs.org). We will not use or release your health information without your authorization (permission), except as described in this notice.

If you have questions and would like additional information, you may contact the CEO or the Chief Privacy Officer at 517-278-2129.

If you believe your privacy rights have been violated, you can file a complaint with the Recipient Rights Officer (517-278-2129) or with the Secretary of Health and Human Services (toll free 877-696-6775). There will be no retaliation for filing a complaint.

Substance Use Confidentiality

Frequently, persons served by Pines have mental health issues as well as substance use issues. The confidentiality of information in the record that may contain information about alcohol and/or drug abuse maintained by Pines is protected by Federal Law and Regulations. Pines respects your confidentiality except under certain circumstances:

1. The consumer consents in writing;
2. The disclosure is allowed by a court order; or
3. The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation.

Violation of the Federal Law and Regulations by a program is a

crime. Suspected violations may be reported to appropriate authorities in accordance with Federal Regulations.

Federal Law and Regulations do not protect any information about a crime committed by a consumer either at Pines or against any person who works for Pines or about any threat to commit such a crime.

Federal Laws and Regulations do not protect any information about suspected child abuse or neglect from being reported under State Law to appropriate State or Local authorities.

Explanation of Grievance and Appeals

You will be offered (given) detailed information about grievance and appeal processes when you first start services and then again annually. Anytime you have a question, concern, want more information, or want to file a grievance or appeal, please call our Customer Services Staff. 1-866-877-4636 You can also ask to review our policies and procedures about grievances and appeals at any time.

GRIEVANCES

You have the right to say that you are unhappy with your services, supports, or the staff who provide them, by filing a “grievance”. Examples of grievances include but are not limited to: if you are not happy with an aspect of how an office is run, or if you are having a problem with the staff working with you and you want a new provider. You will be notified in writing of the outcome of the grievance you file within 90 calendar days. If you do not receive a response within 90 calendar days, your grievance is then considered deemed exhausted and you are allowed to file an appeal. You can file a grievance any time by calling, visiting, or writing to Pines Customer Services Office. Assistance is available in the filing process by asking Customer Services for help when you contact them.

APPEALS

You will be given an adverse benefit determination when a

decision is made that denies your request for services or reduces, suspends, or terminates the services you already receive. You have the right to file an appeal when you do not agree with such a decision. Your appeal will be completed quickly and you will have the chance to provide information or have someone speak for you regarding the appeal. You may ask for assistance from Customer Services to file an appeal. As part of an appeal, you will have the chance to provide information to Pines. You can also ask for information about your case while the appeal is going on—including information from your case record and other information that may be used to make a decision about your appeal. You have the right to request documents relevant to your appeal, free of charge. If you are not a beneficiary of Medicaid or HMP, your state appeal rights will be explained to you at the conclusion of your local appeal. State process dictates that all local processes must be exhausted prior to a state appeal—also known as the Alternative Dispute Resolution Process.

LOCAL APPEALS

You or your representative must request a “Local Appeal” within 60 calendar days from the date of the written adverse benefit determination regarding the services you requested that were denied, reduced, suspended, or terminated. You or your representative may request a “Local Appeal” verbally over the phone or in writing. A determination will be made as quickly as possible, but not longer than 30 calendar days from the date you filed the appeal. You may also request for your case to be considered for a quicker or “expedited” appeal if you believe that waiting for the standard time would jeopardize our ability to attain, maintain, or regain maximum functions. **Please note that if your request for an “expedited” appeal is denied, we will call and write you within 2 calendar days. If we accept your appeal as “expedited,” we will resolve it within 72 hours.**

State Fair Hearing for Medicaid and HMP Beneficiaries

You or your representative may request a Medicaid Fair Hearing only after receiving notice that Pines is upholding the adverse benefit determination. This request must be submitted within 120 calendar days from the date of the adverse benefit determination being upheld. Forms to request a Medicaid Fair Hearing are available at Pines. Contact Customer Service to get help to complete this form and send it to the state office. You may contact the Michigan Administrative Hearing System (MAHS) to be considered for a quicker or “expedited” hearing for your appeal if you feel waiting the standard time will jeopardize your ability to attain, maintain, or regain maximum function. This request must be in writing. You may contact the state office at:

Michigan Administrative Hearing System

P.O. Box 30763

Lansing, MI 48909

Phone: (877)833-0870 Fax: (517)373-4147

Continuing Services during an Appeal

Pines must continue Medicaid services previously authorized while the PIHP appeal and/or State Fair Hearing are pending if:

- You or your representative specifically requests to have the services continued within **10 calendar days**; and
- You, your representative, or provider files the appeal timely; and
- The appeal involves the termination, suspension, or reduction of a previously authorized course of treatment.
- The services were ordered by an authorized provider; and
- The original period covered by the original authorization has not expired

When Pines continues or reinstates your services while the appeal is pending, services must be continued until one of the following occurs:

- You or our representative withdraws the appeal
- **Ten calendar days** pass after Pines mails the adverse benefit determination of your appeal, unless you or your representative within the **10 calendar day** timeframe, has requested a State Fair Hearing with continuation of services until a State Fair Hearing decision is reached.
- A State Fair Hearing officer issues a hearing decision adverse to you or your representative
- The time period or service limits of the previously authorized service has been met.

If your complaint involves a denial of initial services or a denial for a request for hospitalization, you may request a second opinion from our Chief Executive Officer which will be decided within 3 days.

* Your complaint will be expedited (resolved within 1 business day) if there is belief of a significant risk to your health and safety if resolved later.

IMPROVING OUR SERVICE QUALITY

Pines is committed to providing services that meet your needs and expectations. In doing so, it is necessary that we hear what is important to you and in what ways we can improve.

Input Opportunities

There are several opportunities, in which Pines uses the input of those that are or have received services. We have an advisory council made up of persons receiving services that provides input into policymaking and organizational processes. Several of our committees include representation from persons who are receiving services. We also conduct

surveys to elicit feedback regarding how services were provided as well as whether you have sustained improvement post-discharge. Suggestion boxes are also located within the waiting area for your convenience.

Achievement of Outcomes

The emphasis of treatment will be on helping you achieve your desired outcomes. As such, Pines employs personnel that are highly skilled in their positions and we as an organization are consistently looking at research and practices to make sure that the interventions we offer are considered the best in the field. Pines has adopted several “evidence based” practices which have been found repeatedly to provide positive outcomes for persons. Pines also provides “promising practices” which are interventions that have been reported by consumers as being successful. Ultimately the achievement of outcomes is up to you, but with the expertise that Pines can offer, this achievement can be highly attainable.

Satisfaction

Pines provides a variety of avenues in which persons who receive our services can express satisfaction or dissatisfaction with our services. These include an annual satisfaction survey, a post-discharge from services survey, individual assessment of satisfaction every six months as your treatment plan is reviewed, and then periodically relative to various quality improvement projects that are underway. Your input is highly valuable as it is used to improve our services to you. If at any time you wish not to participate in these surveys, contact customer services.

Performance Feedback

Each year, Pines sets forth goals and standards related to areas of importance. Examples of where we have set standards include how quickly we are able to see someone who requested a service, how quickly we are able to see someone following a discharge from hospitalization, and what

percentage of persons are satisfied with overall services. Located in each waiting area are bulletin boards where you will be able to locate information about these standards as well as information on specific results of satisfaction surveys. Additional information is posted on our website at www.pinesbhs.org.

Mission Statement

We are committed to providing behavioral health services to individuals and families of our community and will strive to assist them in reaching their highest quality of life.

Revision Date:
5/20/2021

