

CLIENT RIGHTS AND RESPONSIBILITIES

Welcome to Porter-Starke Services

As a client, it is your right to receive a copy of the Client Rights and Responsibilities.

Your Rights

- You will be treated with dignity, respect, and not lose any of your rights because you receive services.
- You have the right to easy access and timeliness of care.
- You have the right to receive services that will not jeopardize your employment.
- You have the right to fair treatment no matter what your race, religion, gender, ethnicity, age, disability, sexual orientation, where you come from, or your source of payment for services.
- You have the right to practice your religion and work with staff on any special needs you might have.
- You have the right not to be physically or sexually hurt and you have the right not to be made fun of or teased. The treatment person you are seeing cannot embarrass, threaten, or take advantage of you.
- You have the right to get the best help that you can get. Staff should always be on time, friendly, and respectful.
- You have the right to request certain preferences in a provider.
- You have the right to know the name of the person treating you, their training history, and their work history. You have the right to know how they can help you. You may receive a copy of their Code of Ethics.
- You have the right to share in the development of your Treatment Plan, and know about your rights and responsibilities in the treatment process.
- You have the right to information about how Porter-Starke Services, Inc. interacts with your insurance plan, its practitioners, services, and the insurance company's role in the treatment process.
- You have the right to know information about the clinical guidelines used by Porter-Starke Services, Inc. and your insurance plan in providing and managing your care. You have the right to have provider decisions about your care made without regards to financial incentives.
- You have the right to information about your diagnosis and treatment in plain clear language that you understand.
- You have the right to know about available treatment choices, regardless of the costs or lack of coverage by your insurance plan.
- We will inform you about advocacy, community, and prevention services that may aid in your treatment.
- You have the right to know how to reach us for services.
- We will write down your appointment times and explain how to pay your bills and when they are due.
- We will explain what you need to do to work on your Treatment Plan, and tell you about other ways, people, or things can help you.
- You may ask another treatment person here to look at your record to give you another opinion at any time.
- If asked, you do not have to participate in any research project.
- You have the right to refuse to submit to treatment or the right to stop coming here at any time unless you are judged mentally incompetent by a court of law.
- If we think you might pose a threat to yourself or someone else, we may have to tell the police.
- You have the right to have your treatment information and other private information kept private. Only when permitted by law, may your records be released without permission.
- You or someone you choose may have a copy of your record if you sign the proper form. You may have to pay for those copies. Some information may not be released to protect you or other people.
- You have the right to give input on your Client Rights and Responsibilities.
- You have the right to know how to file a complaint or appeal, and learn how to do so: First, inform an appropriate staff member at Porter-Starke Services to determine if your rights have been violated and why you believe your rights have been infringed on, to give staff an opportunity to address the situation. If you are still unsatisfied, you may also call the toll-free Client Services number for the Indiana Division of Mental Health and Addiction at 1-800-901-1133 or the toll-free number for the Indiana Protection & Advocacy Services (IPAS) at 1-800-622-4845. For substance related confidentiality issues call The Office for Civil Rights 312-730-1560.
You cannot get in trouble or lose your rights by calling these telephone numbers or by consulting with legal counsel.
- You have the right to adequate information about the nature and efficacy of treatment and the known side effects of receiving and not receiving services.
- You have the right to mental health services appropriate to your needs, in accordance with standards of professional practice and designed to afford reasonable opportunity to improve your condition.
- You have the right to contact and consult with legal counsel and private practitioners of your choice at your expense.
- You have the right to petition a committing court or hearing officer for consideration of the treatment or program, if you are involuntarily committed.

Your Responsibilities

Medication Refill Responsibilities

To improve timeliness of refill requests, we ask that you call your pharmacy to get your medication refilled. The pharmacy will then contact Porter-Starke Services for authorization via fax. Make sure when you start running low on your medications, that you call your pharmacy for a refill. **When you have a 7 day supply remaining, call your pharmacy. Expect 3-4 days to get it refilled.** This is a good way to make sure that you do not run out of your medication.

Mail Order Prescriptions

If you use a mail order pharmacy benefit, please tell your doctor at the time of your office visit. Since most mail order pharmacies prefer a written prescription for a three month supply with refills for a year, it is required that all new mail order requests be made at an office visit. This is to insure that your provider can review your medications and the conditions that require those medications.

All Patients Are Required to be Seen Regularly to Renew Medications.

Sometimes, more frequent follow-up is needed to determine progress and the need for medication change. We understand that this may pose an inconvenience to you; however, we feel that it is in the best interest of your health. By following the steps indicated above, we will be better able to serve you and your family. A nurse is available to answer your questions at 219-476-4542. Thank you for choosing Porter-Starke Services.

General Responsibilities

- Treat all those involved with providing your care with dignity and respect.
- Give providers the information they need. This is so providers can deliver the best possible care.
- Ask questions about your care, this is to help you understand the care you are receiving.
- Follow the Treatment Plan. This is to be agreed upon by you and the provider.
- Follow the agreed upon medication plan. Take your medications as prescribed.
- Tell your provider and primary care physician about any medication changes, including medications given to you by other providers. Tell your provider about vitamins, herbs, or drugs you may be taking that are not prescribed by a medical professional.
- If you have problems or changes with your medicine, tell your provider or doctor.
- Keep your appointment. If you cannot keep your appointment, provide at least 24-hour notice to avoid a \$25 no-show fee.
- Respect the privacy of other clients by not telling others what was said in group therapy.
- Pay your bills on time, as you agreed to do.
- Help plan your goals and work hard toward them.
- Notify your provider when the Treatment Plan is not working for you.
- Notify your provider if you are having any problems with paying the fees.
- Report abuse or fraud.
- Inform your provider of any change in personal information, such as address, phone number, marital status, insurance, employment, medications, etc.
- Understand the rules of any legal commitment you may be under that may cause you serious consequences including arrest or hospitalization if you leave without your doctor's permission or act violently or unsafely.
- Openly report any concerns about the quality of care you are receiving.

By initialing the Consent/Financial Agreement you are certifying that you have been informed of your rights and responsibilities, and that you understand this information. You are also certifying that you have been offered a copy of your rights and responsibilities.