



CHILDREN'S ADVANTAGE

Family Behavioral Health Services



Children's Advantage Locations:

- Main Campus:
 - M-Th: 8:00 am – 8:00pm, F- 8:00 am – 5:00 pm
 - 771 N. Freedom St., Ravenna, OH 44266
 - Ph: (330) 296-5552
 - Fax: (330) 296-6126
- Psychiatry Campus:
 - M-Th: 8:00 am – 6:00 pm, F: Closed
 - 5968 New Milford Rd., Ravenna, OH 44266
 - Ph: (330) 296-5552
 - Fax: (330) 296-6126
- Family Center Campus:
 - M-F: 8:00 am – 4:00 pm
 - 5968 New Milford Rd., Ravenna, OH 44266
 - Ph: (330) 296-5552
 - Fax: (330) 296-6126

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You have a copy of

- Consents Form (signed)
- Financial Consents Form (signed)

CHILDREN'S ADVANTAGE



CLIENT ORIENTATION INFORMATION

Children's Advantage would like to welcome you to our agency and provide an overview of our services and procedures.

Our Mission: Our mission is to promote the healthy development of children and families through quality behavioral, mental health, and substance use prevention and treatment services, community partnerships, and advocacy.

Our Vision Statement: Children and families will receive the highest quality and most comprehensive services at Children's Advantage.

This packet contains information on the following:

Treatment Plan Development
Cost of Services
Consent for Treatment
Confidentiality
Client Expectations/Attendance
Health and Safety
Emergency After Hours Services
Client Rights

Treatment Plans:

Creating a file: Prior to your child's intake appointment, you will meet with a Medical Billing Specialist. Your fee will be determined by the information you provide during your financial interview. Please see your copy of the Financial Consents Form for the current fee structure. You can also obtain a new copy by request by calling (330) 296-5552

Treatment Consent: Our Medical Billing Specialist will also go over a consent form that will allow Children's Advantage to provide services for your child.

Confidentiality: Children's Advantage keeps all client records and identifying information confidential. Exceptions to this policy include legal mandates, such as a subpoena, a medical emergency, if there is suspicion of abuse and/or neglect, or if a child intends to harm him/herself or others.

Assessment: The first step in beginning treatment is scheduling a diagnostic intake appointment. This allows Children's Advantage to gather information regarding symptoms, behavior, and family concerns; which aids in diagnosing your child.

Waiting List: At times of increased need in our schools and community, we may encounter a wait for services. If this occurs, you will be notified at the earliest possible time. If you choose to wait for services, outreach attempts will be made on regular intervals to discuss symptoms to evaluate needs as they change. If contact is not able to be made after 2 attempts or 1 month, whichever is longer, we will assume that you no longer need services and will close the referral and remove you from the waitlist. We do this in an attempt to get everyone in as quickly as possible. If things change before you receive outreach from us, please call in and notify us. We may be able to identify additional services to meet more immediate needs. In general, if you are able to receive services during daytime hours, there is often more availability. If an open appointment exists during the day and you are willing to consistently utilize that time, you may be able to skip the waitlist. After-school/evening hours are our most in-demand time and may lead to a wait for some services.

Treatment plans are centered on the needs of your child. Therapists assist children and families in creating goals for improvement. Children's Advantage encourages growth by placing our focus on each child's strengths. This enables clients to realize their potential and assists in accomplishing their goals.



Services available at the agency include: individual counseling, family counseling, CPST, and psychiatry. Multiple services may be provided depending on each child's individual needs. Coordination of services will be handled by a Case Manager, Therapist, Psychiatrist, or Nurse.

Motivational Incentives may be used to encourage clients to reach their goals. Children learn through play, therefore therapists may occasionally play a game with clients during counseling. Therapists may use a favorite game as an incentive to share thoughts, feelings, etc.

Transition Procedure: Children's Advantage will assist in coordinating services for children who have reached adulthood and require counseling at an agency that provides adult services.

Discharge Criteria: Upon completion of goals, your therapist will discuss discharge with you and your child. This will help prepare your child for separation from the agency and reinforce his/her achievements.

Client Expectations/Attendance: You must keep appointments in order to assist in the progress of your child's goals. Please refer to the Attendance Agreement as expectations are detailed on that document. Clients and their families are expected to behave in a respectful manner both while in treatment sessions and while waiting. Physical aggression, excessive verbal aggression, weapons on person, clients/guardians under the influence, and/or any other behavior or attitude deemed offensive, detrimental to the treatment of other clients, and/or safety concerns may lead to termination of services. Parents/Guardians are expected to be available to participate in treatment as recommended. Parents or designated adults are expected to arrive with the client and remain present during any and all treatment services provided at the agency or in the home. Children's Advantage staff are not able to adequately monitor your child in the waiting rooms. Parents who leave their children alone in the office will be contacted and asked to return. If parental actions are deemed neglectful by staff, appropriate contacts with law enforcement or the CARES Line may be made.

Health and Safety Policies:

Child Safety: Children's safety and well-being is a priority. Children's Advantage staff members do not use seclusion or restraint at any time. Children and families are treated with respect.

Substances/Medications: Children's Advantage prohibits tobacco products and other legal or illegal substances on our premises. In addition, any over-the-counter or prescription medications brought into the building must be stored in their original containers and kept out of reach of children.

Weapons: Children's Advantage also prohibits weapons of any kind on the premises.

Emergency Procedures:

Tornado: The designated tornado shelters for each building are as follows:

Main Campus: Men's/Women's restrooms or basement
Psychiatry: Board Room
Family Center: Middle room (where conference table is located)

Fire: In the event of a fire, please proceed to the nearest designated area (see below). In addition, fire extinguishers are located throughout all buildings.

Main Campus: 1) Outside front entrance facing N. Freedom St.
2) Rear of back parking lot facing Outpatient entrance
3) Between employee entrance and Commerce Road

Psychiatry: Sidewalk in front of the building



Family Center: Parking lot in front of building

Fire extinguisher locations at Freedom:

1. Outpatient Services entrance
2. Next to shredding box/counselor printer
3. AC electrical room across from shred box
4. Perpendicular to School Case Manager supply closet
5. Server room
6. Left side facing Intake desk
7. Entrance to Intake lobby [by SCM associate director's office]
8. Doorway outside women's restroom
9. Entry to kitchen
10. Exterior exit from the Community Outreach room
11. Through doorway before top of the stairs
12. Through doorway at bottom of the stairs
13. Basement exit to outside
14. Boiler room
15. Phone Wire room
16. Basement storage room.

Fire extinguisher locations at Family Center and Psychiatry:

1. At end of front hallway
2. Kitchen,
3. Group room
4. Back hallway by door
5. Supply room by furnace
6. Conference room – by outer door

Minor Injury: The first aid kit at Main Campus is located in the outpatient reception office. Psychiatry has first aid kits in the main office and the nurse's office. The Family Center has a first aid kit at the front lobby.

Risk Identification Procedures: Therapists observe child behavior. In the event a determination is made regarding the child's intent to harm him/herself, a Safety/Crisis Plan will be completed.

Emergency After Hours Services: Children's Advantage recommends ACCESS for after-hours emergencies. ACCESS services are available 24 hours. In the event of an emergency, please call 330-296-3555 or Toll Free 1-877-796-3555.

Standards of Service: Children's Advantage Staff are dedicated to maintain client confidentiality and to act professionally and respectfully at all times

Suggestions & Concerns:

General suggestions may be written on a piece of paper and placed in the suggestion box located in the waiting room. Specific concerns may be addressed with your child's therapist or therapist's supervisor.

Children's Advantage is dedicated to providing the highest quality mental health services possible. In addition, we strive to meet the expectations of every family we serve. If a situation arises where you feel it necessary to file a grievance, please follow the steps below.



1. A client or client's representative shall submit a letter to the client rights officer, Madison Glavic, 771 N. Freedom St. Ravenna, OH 44266. Clients are encouraged to provide a description of the problem or dissatisfaction, as soon as, possible after the occurrence.
2. The client rights officer will gather information concerning the grievance, interview all parties involved, and attempt to resolve the grievance within five working days of receiving the grievance letter. A written report will be completed within seven working days of the filing of the grievance with one copy given to the client or client's representative, with client's permission.
3. In the event the issue is not resolved satisfactorily, the client or client's representative may request in writing within five working days of receiving the written report from the client rights officer, that the issue be presented to the Client Rights Review Committee.
4. The Client Rights Review Committee will meet within five working days of receiving the written complaint and review the written report prepared by the client rights officer, to clarify any issues necessary and attempt to resolve the matter. During the five days, the Client Rights Review Committee may hold a hearing at the request of the client or client's representative. The client or client's representative may request that a CPST worker represent him/her at any hearing. A written report of the Committee's review will be completed within seven working days of receiving the written request to review the grievance with one copy of the response filed in the client's case record.
5. Should the issue not be resolved to the client's satisfaction, the client or client's representative may write to any of the organizations listed below. Upon request, a CPST worker shall assist the client or client's representative in preparing information to be sent to another organization.

Organizations to contact concerning a grievance:

A client or his/her representative may at any time contact one or more of the following entities concerning a grievance:

The Mental Health & Recovery Board of Portage County	(330) 673-1756
155 East Main St.	Fax - (330) 673-1330
Kent, OH 44240	

The Ohio Department of Mental Health and Addiction Services	(614) 466-2596
30 E. Broad Street – Suite 1180	
Columbus, OH 43215-3430	

Disability Rights Ohio	(800) 282-9181
200 Civic Center Drive	(614) 466-7246
Columbus, OH 43215	

Attorney General's Office, Help Center	(800) 282-0515
30 E. Broad St., 14th Floor	
Columbus, OH 43215	

U.S. Department of Health & Human Services	(800) 368-1019
Officer for Civil Rights – Region V	
233 N. Michigan Ave., Suite 240	
Chicago, Illinois 60601	
Attn: CDR Kimberly Davids	

Advocacy Services Administrators	(614) 466-2333
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Ohio Department of Mental Health and Addiction Services Fax - (614) 466-1571
30 E. Broad St., 8th floor
Columbus, OH 43215-3430

Any of these professional licensing boards may also be contacted. If the grievance concerns:

A psychiatrist:

State Medical Board (614) 466-3934
30 East Broad St., 3rd Floor Fax - (614) 728-5946
Columbus, OH 43215

A psychologist:

State Board of Psychology (614) 466-8808
77 S. High Street – Suite 1830 Fax - (614) 728-7081
Columbus, OH 43266-0321

A licensed counselor or social worker:

Counselor, Social Worker and
Marriage & Family Therapist Board (614) 466-0912
77 S. High Street – 24th Floor, Room 2468 Fax - (614) 728-7790
Columbus, OH 43215

A registered nurse:

Nursing Education & Nursing Regulations Board (614) 466-3947
77 S. High Street - 17th Floor Suite 660 Fax - (614) 466-0388
Columbus, OH 43215

CHILDREN'S ADVANTAGE
CLIENT RIGHTS SUMMARY

THE RIGHT	to be treated with consideration and respect for personal dignity, autonomy, and privacy;
THE RIGHT	to service in a humane setting which is the least restrictive feasible as defined in the treatment plan;
THE RIGHT	to be informed of one's own condition, of proposed or current services, treatment, or therapies;
THE RIGHT	to consent to or refuse any service, treatment, or therapy upon full explanation of the expected consequences of such consent to or refuse any service, treatment, or therapy on behalf of a minor client;
THE RIGHT	to a current, written, individualized service plan;
THE RIGHT	to active and informed participation in the establishment, periodic review, and reassessment of the service plan;
THE RIGHT	to freedom from unnecessary or excessive medication;
THE RIGHT	to freedom from unnecessary restraint or seclusion;
THE RIGHT	to participate in any appropriate and available agency service, regardless of refusal of one or more other services, treatments, or therapies, or regardless of relapse from earlier treatment in that or another service, unless there is a valid and specific necessity which precludes and/or requires the client's participation in other services;
THE RIGHT	to be informed of and refuse any unusual or hazardous treatment procedures;



THE RIGHT	to be advised of and refuse observation by techniques such as one-way vision mirrors, tape recorders, televisions, movies, or photographs;
THE RIGHT	to have the opportunity to consult with independent treatment specialists or legal counsel, at one's own expense;
THE RIGHT	to confidentiality in accordance with state law;
THE RIGHT	to have access to one's own psychiatric, medical, or other treatment records, conducted in the presence of CA personnel on the organization's premises, unless access to particular identified items of information is specifically restricted for that individual client for clear treatment reasons; or to protect vulnerable persons from releasing information that may be harmful. The client can challenge the accuracy of the record and insert his or her own statement. The agency professional will note in the record of the client's agreement or disagreement with an issue. If CA personnel insert a statement in response, such statement is inserted with knowledge of the person served.
THE RIGHT	to be informed in advance of the reason(s) for discontinuance of service provision, and to be involved in planning for consequence of that event;
THE RIGHT	to receive an explanation of the reasons for denial of service;
THE RIGHT	not to be discriminated against in the provision of service on the basis of religion, race, color, creed, sex, national origin, age, lifestyle, physical or mental handicap, development disability, or inability to pay;
THE RIGHT	to know the cost of services;
THE RIGHT	to be fully informed of all rights;
THE RIGHT	to exercise any and all rights without reprisal in any form including continued uncompromising access to service;
THE RIGHT	to file a grievance; and upon request to have oral and written instructions for filing a grievance.

Madison Glavic, LSW: CLIENT RIGHTS OFFICER
(330) 296-5552, 771 NORTH FREEDOM STREET, RAVENNA, OHIO 44266
Hours of operation-Monday-Thursday-8:00am-8:00pm and Friday-8:00am-5:00pm

* The complete Client Rights of Children's Advantage, approved by the Ohio Department of Mental Health and Addiction Services, is posted in the lobby and available upon request.

CHILDREN'S ADVANTAGE

CLIENT RIGHTS GRIEVANCE PROCESS

- A. The client rights officer, Madison Glavic, may be contacted in person at 771 N. Freedom St, Ravenna, Ohio 44266 or by phone Monday - Friday 8 am to 5pm, (330) 296-5552. The client rights officer's responsibilities include:
- (1) Submitting copies of the client rights and grievance to the Mental Health & Recovery Board of Portage County and the Ohio Department of Mental Health and Addiction Services for approval.
 - (2) Submitting any substantive changes to Mental Health & Recovery Board of Portage County and the Ohio Department of Mental Health and Addiction Services for approval before enactment.
 - (3) Accepting and processing any grievance filed with the agency by a client or other person or agency on behalf of a client or his/her representative.
 - (4) Taking all necessary steps to assure compliance with the grievance process.
 - (5) Training all agency staff concerning client rights and the agency's grievance process so that they can explain the rights and procedures to all clients or their representatives. All new staff



will be trained within 10 working days of employment.

- (6) Ensuring that a copy of the client rights and grievance process is distributed to all clients at intake with a verbal explanation of same.
- (7) Ensuring that a copy of the client rights and grievance process is posted in the agency.
- (8) Monitoring the grievance process to ensure that all grievances are handled in the timeframes as established in the Ohio Revised Code.
- (9) Logging all grievances received by the agency – recording the subject matter of the grievances and the resolution of the grievances. These records shall be available for review by the Mental Health & Recovery Board of Portage County and the Ohio Department of Mental Health and Addiction Services upon request.
- (10) Preparing an annual summary of the number of grievances the Agency has received, types of grievances and resolution status.
- (11) Submitting to the Mental Health & Recovery Board of Portage County a copy of the summary on grievances.



- B. A client or his/her representative may at any time contact one or more of the following entities concerning a grievance:

The Mental Health & Recovery Board of Portage County (330) 673-1756
155 East Main St. Fax - (330) 673-1330
Kent, OH 44240

The Ohio Department of Mental Health and Addiction Services (614) 466-2596
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Columbus, OH 43215-3430

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77 S. High Street – Suite 1830 Fax - (614) 728-7081
Columbus, OH 43266-0321

A licensed counselor or social worker:

Counselor, Social Worker and (614) 466-0912
Marriage & Family therapist Board



77 S. High Street – 24th Floor, Room 2468
Columbus, OH 43215

Fax - (614) 728-7790

A registered nurse:

Nursing Education & Nursing Regulations Board
77 S. High Street - 17th Floor Suite 660
Columbus, OH 43215

(614) 466-3947

Fax - (614) 466-0388

- C. The agency shall provide all relevant information about a grievance upon written request from any of the organizations listed in Section B of this policy statement. Written documentation pertaining to a grievance will be forwarded to the organization requesting it within five working days of receipt of the request.
- D. Should the client or his/her representative need help in submitting a written grievance, or wish for a representative to investigate the complaint and/or represent him/her at a hearing, the client or his/her representative may call CHILDREN'S ADVANTAGE at (330) 296-5552 to receive assistance from a case manager.
- E. Should the client rights officer be unavailable to process a grievance, the Chief Executive Officer shall fulfill the duties of the client rights officer.
- F. In the event that the client rights officer is involved in the complaint, the client or his/her representative shall file his/her grievance with the Chief Executive Officer of the agency.
- G. In the event that the Chief Executive Officer of the agency is involved in the complaint, the client or his/her representative shall file his/her complaint with the President of the CHILDREN'S ADVANTAGE Board 771 N. Freedom Street, Ravenna, Ohio, or calling (330) 296-5552.
- H. All staff of the Agency will be trained to understand the client rights policy and grievance process of the agency sufficiently to inform any client with a complaint of the procedure to file a grievance.
- I. Staff of the Agency shall present a copy of the client rights to each client at intake. The staff person will verbally explain and allow the client to ask any questions. The client shall initial or sign a form stating he/she has received a copy and had an explanation. The form will be filed in the client's individual record at the Agency.
- J. When a client is seen in a crisis or emergency situation, the client shall be verbally advised of pertinent rights, such as the right to consent to or refuse the offered treatment and the consequences of that agreement or refusal. A written copy of the client rights policy and more complete explanation will be given to the client at the next session.
- K. Clients or recipients of community services (such as: information and referral service, consultation, or mental health education) or any Portage County resident may have a copy and explanation of the client rights and grievance process upon request.

STEPS FOR FILING A GRIEVANCE



- 1.) A client or his/her representative shall submit in writing a description of the problem or dissatisfaction to the client rights officer. Clients are encouraged to submit this written description as soon after the occurrence as possible.
- 2.) The client rights officer will gather information concerning the grievance, interview all parties involved and attempt to resolve the grievance within five working days of the filing of the grievance. A written report of the process will be completed within seven working days of the filing of the grievance with one copy given to the client or to his/her representative with the client's permission.
- 3.) In the event the issue is not resolved satisfactorily, the client or his/her representative may request in writing, within five working days of receiving the written report from the client rights officer, the issue be presented to the Client Rights Review Committee.

The Client Rights Committee shall be comprised of the Chief Executive Officer of the Agency, and two other staff who are not involved in the grievance.

- 4.) The Client Rights Review Committee will meet within five working days of receiving the written complaint and review the written report prepared by the client rights officer, to clarify any issues necessary and attempt to resolve the matter. During the five days, the Client Rights Review Committee may hold a hearing at the request of the client or his/her representative. The client or his/her representative may request that a case manager represent him at any hearing. A written report of the Committee's review will be completed within seven working days of receiving the written request to review the grievance, with one copy given to the client or to his/her representative with the client's permission and one copy of the response in the client's case record.
- 5.) Should the issue not be resolved to the client's satisfaction, the client or his/her representative may write to any of the organizations listed in Section B of this policy. Upon request, the case manager shall assist the client or his/her representative in preparing information to be sent to any other organization.



CHILDREN'S ADVANTAGE **TREATMENT COMMITMENT & ATTENDANCE AGREEMENT**

Treatment is most successful when there is a shared commitment made between your family and our staff members. We commit to you and your family to provide treatment that is focused on your individual needs, is time limited (most families need less than 3 months of treatment) and is based on methods that are supported by research and clinical experience. We expect your family to commit to treatment by attending appointments and following recommendations. Failure to consistently keep appointments undermines progress and results in treatment not working.

Children's Advantage can provide the following service(s) to you and your family: Diagnostic Assessment, Individual, Family, and Group Solution Focused Psychotherapy, Child/Adolescent Psychiatry, Community Psychiatric Supportive Services and School, Early Childhood, and Community-Based Preventions/Consultation Services.

- We strive to make appointments convenient for you and your family. However, most families prefer therapy appointments from 3:00pm onward. Since we cannot schedule everybody during these “primetime” hours, all families must share in scheduling appointments during morning and early afternoon hours. If appointments are not consistently kept during these “primetime” hours, then we will ask you to schedule future appointments only during morning and early afternoon hours.
- When we schedule an appointment, we reserve that time exclusively for the care of your family. When you do not keep your appointment, we do not make progress on our goals. We also miss the chance to serve other clients who could have used that time slot. This is especially critical when the appointment was made in “primetime” hours. Please give us at least 24 hours’ notice if you will not be able to keep an appointment.
- Two missed appointments in 30 days or two missed appointments in a row may result in termination of services. In this situation, your case may need to be reviewed and approved by our Management Team in order to continue treatment.

By initialing the consent form, I commit to treatment by attending appointments and following recommendations.

CHILDREN'S ADVANTAGE



CONFIDENTIALITY STATEMENT, HIPAA COMPLIANCE POLICY AND SECURITY OF PROTECTED HEALTH INFORMATION

- I understand that all client records and all personally identifying information is confidential. I understand that my record and any personally identifying information cannot be released without my permission or my parent/legal guardian's permission.
- I understand that the Children's Advantage has a legal and ethical responsibility to safeguard the privacy of all records and to protect the confidentiality of health information as outlined above.
- I understand that the staff of Children's Advantage are mandated by law to report certain information without my authorization under the following legal circumstances: the receipt of a legitimate subpoena; in the event of a medical emergency; if information we receive suggests any suspicion of abuse and/or neglect; and if information we receive indicates the intention to harm oneself or others.
- **SMS/Text Message Permission**
By providing my phone number, I agree to receive SMS/text messages from Children's Advantage about my appointments and treatment, as well as marketing messages about our services (only if you have given us your consent). To opt out of receiving SMS/text messages at any time reply "STOP" to any message we send you.
- If I have any questions and/or concerns regarding this policy, I can contact the Children's Advantage Privacy Officer at 330-296-5552, extension 209.





CHILDREN'S ADVANTAGE **NOTICE OF PRIVACY PRACTICES**

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

If you have any questions about this Notice, please contact the Children's Advantage (CA) Privacy Officer at (330) 296-5552, extension 209.

OUR DUTIES

At CA we understand that health information about you and your health is personal. We are committed to protecting health information about you and safeguarding that information against unauthorized use or disclosure. We are required by law to: 1) maintain the privacy of your health information; 2) provide you Notice of our legal duties and privacy practices with respect to your health information; 3) to abide by the terms of the Notice that is currently in effect; and 4) to notify you if there is a breach of your unsecured health information.

HOW WE MAY USE AND DISCLOSE YOUR PERSONAL HEALTH INFORMATION

When you receive service from CA, health information is collected and created about you. We may receive, use, or share your health information for such activities as payment for services provided to you, conducting our internal health care operations, communicating with your healthcare providers about your treatment and for other purposes permitted or required by law. The following are examples of the types of uses and disclosures of your personal information that we are permitted to make:

Payment - We may use or disclose information about the services provided to you and payment for those services for payment activities such as confirming your eligibility, obtaining payment for services, managing your claims, utilization review activities, and processing of health care data.

Health Care Operations - We may use your health information to train staff, manage costs, conduct quality review activities, perform required business duties, and improve our services and business operations.

Treatment - We may share your personal health information with your health care providers to assist in coordinating your care.

Other Uses and Disclosures - We may also use or disclose your personal health information for the following reasons as permitted or required by applicable law: To alert proper authorities if we reasonably believe that you or your child/ward may be a victim of abuse, neglect, domestic violence or other crimes; to reduce or prevent threats to public health and safety; for health oversight activities such as evaluations, investigations, audits, and inspections; to governmental agencies that monitor your services; for lawsuits and similar proceedings; for public health purposes such as to prevent the spread of a communicable disease; for certain approved research purposes; for law enforcement reasons if required by law or in regards to a crime or suspect; to correctional institutions in regards to inmates; to coroners, medical examiners and funeral directors (for decedents); as required by law; for organ and tissue donation; for specialized government functions such as military and veterans activities,



national security and intelligence purposes, and protection of the President; for Workers' Compensation purposes; for the management and coordination of public benefits programs; to respond to requests from the U.S. Department of Health and Human Services; and for us to receive assistance from consultants that have signed an agreement requiring them to maintain the confidentiality of your personal information. Also, if you have a guardian or a power of attorney, we are permitted to provide information to your guardian or attorney in fact.

Uses and Disclosures That Require Your Permission - We are prohibited from selling your personal information, such as to a company that wants your information in order to contact you about their services, without your written permission. We are prohibited from using or disclosing your personal information for marketing purposes, such as to promote our services, without your written permission. All other uses and disclosures of your health information not described in this Notice will be made only with your written permission. If you provide us permission to use or disclose health information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose your health information for the purposes stated in your written permission except for those that we have already made prior to your revoking that permission.

PROHIBITED USES AND DISCLOSURES

If we use or disclose your health information for underwriting purposes, we are prohibited from using and disclosing the genetic information in your health information for such purposes.

POTENTIAL IMPACT OF OTHER APPLICABLE LAWS

If any state or federal privacy laws require us to provide you with more privacy protections than those explained here, then we must also follow that law. For example, drug and alcohol treatment records generally receive greater protections under federal law.

YOUR RIGHTS REGARDING YOUR PERSONAL HEALTH INFORMATION

You have the following rights regarding your health information:

- **Right to Request Restrictions.** You have the right to request that we restrict the information we use or disclose about you for purposes of treatment, payment, health care operations and informing individuals involved in your care about your care or payment for that care. We will consider all requests for restrictions carefully but are not required to agree to any requested restrictions.*
- **Right to Request Confidential Communications.** You have the right to request that when we need to communicate with you, we do so in a certain way or at a certain location. For example, you can request that we only contact you by mail or at a certain phone number.
- **Right to Inspect and Copy.** You have the right to request access to certain health information we have about you. Fees may apply to copied information.*
- **Right to Amend.** You have the right to request corrections or additions to certain health information we have about you. You must provide us with your reasons for requesting the change.*
- **Right to an Accounting of Disclosures.** You have the right to request an accounting of the disclosures we make of your health information, except for those made with your permission



and those related to treatment, payment, our health care operations, and certain other purposes. Your request must include a timeframe for the accounting, which must be within the six years prior to your request. The first accounting is free, but a fee will apply if more than one request is made in a 12-month period.*

- **Right to a Paper Copy of Notice.** You have the right to receive a paper copy of this Notice. This Notice is also available at our web site: www.childrensadvantage.org, but you may obtain a paper copy by contacting the CA office.

To exercise any of the rights described in this paragraph, please contact the CA Privacy Officer at: 771 N. Freedom Street, Ravenna OH 44266 (330) 296-5552, extension 209 or email mayayo@childrensadvantage.org

*** To exercise rights marked with a star (*), your request must be made in writing.**

Please contact us if you need assistance.

CHANGES TO THIS NOTICE

We reserve the right to change this Notice at any time. We reserve the right to make the revised Notice effective for health information we already have about you as well as any information we receive in the future. We will post a copy of our current Notice at our office *and on our website at:* www.childrensadvantage.org. In addition, each time there is a change to our Notice, you will receive information about the revised Notice and how you can obtain a copy of it. The effective date of each Notice is listed on the first page in the top center.

TO FILE A COMPLAINT

If you believe your privacy rights have been violated, you may file a complaint with the CA (see above) or with the Secretary of the Department of Health and Human Services. To file a complaint with CA, contact the Privacy Officer at the address above. You will not be retaliated against for filing a complaint. If you wish to file a complaint with the Secretary you may send the complaint to: Office for Civil Rights, U.S. Department of Health and Human Services, Attn: Regional Manager, 233 N. Michigan Ave., Suite 240, Chicago, IL 60601.
CA Privacy Officer: 771 N. Freedom Street, Ravenna, OH 44266 (330) 296-5552, mayayo@childrensadvantage.org.



CHILDREN'S ADVANTAGE **GUARDIAN/PARENTAL RIGHTS ACTION PLAN**

The purpose of the Guardianship/Parental Rights Action Plan is to ensure that staff are providing services and information to appropriate parties in order to ensure the best clinical care for clients and families served.

- **Children's Advantage staff is committed to providing the best clinical services for clients and families served. In order to accomplish this, appropriate documentation on guardianship, custody, and parental rights are required.**
 - **Accepted Documents include court orders and other court documentation or verbal disclosure of intact family and/or shared custody.**
1. **At first contact,**
 - The intake coordinator will discuss guardianship, parental rights issues.
 - The intake coordinator will discuss the importance of appropriate documentation and request that the custodial parent bring appropriate documentation to the intake appointment.
 2. **At the intake session,**
 - The custodial parent will be expected to provide court orders or court documentation showing custody agreements, guardianship, parental rights, etc.
 - The custodial parent will need to complete custody disclosure statement on the Children's Advantage Disclosure Form.
 3. **In cases where custodial documentation is not provided**
 - The agency and its staff will operate as if shared custody is in place until appropriate documentation is provided stating otherwise.
 4. Children's Advantage will maintain communication with the residential parent and/or the parent who attends sessions. It is the responsibility of that party to communicate with other guardians/parents. Children's Advantage staff will be happy to communicate with any guardian/parent, within legal and ethical bounds, that contact the agency to initiate communication. *It is not the responsibility of Children's Advantage staff to seek out a non-residential guardian/parent to maintain communication on a regular basis.*
 5. Clinical/medical decisions will be made with input from client, clinician, and at least one parent/guardian. This is to ensure that appropriate decisions are made in a timely manner to best meet the needs of the client. Children's Advantage will rely on the information and decision making of the parent/guardian who attends the sessions and/or who has the most contact with the client, as they are able to provide the best clinical information.
 6. Children's Advantage and its staff will not willfully deceive or exclude a parent/guardian with appropriate legal rights, however, only information deemed appropriate by clinical staff will be divulged including verbal and written communication. This is to ensure clients confidentiality and safety regarding sensitive issues.
 7. Children's Advantage will provide a copy of this policy to all involved parents/guardians in order to ensure its understanding and adherence.

CHILDREN'S ADVANTAGE



FINANCIAL POLICY

FINANCIAL POLICY In the interest of a cooperative working relationship between Children's Advantage and clients, please carefully read our financial policy as described below. If you have any questions or concerns regarding this policy, we encourage you to speak with the Billing Specialist.

1. Delinquent Accounts:

- a. Client balances (not covered by insurance) are due in full within 10 days of receiving your monthly statement.
- b. Please be advised that accounts past due by 90 days, will be sent to pre-collect with Fidelity Collection Agency unless arrangements have been made with the Billing Specialist.
- c. After 120 days of no payment, your account will be assigned to Fidelity Collection Agency and reported to the credit bureau. Also, the case will be reviewed by Children's Advantage for termination.

2. Returning clients: Clients with balances either in collections or active balances will not be able to return for services at Children's Advantage prior to paying the balance in full.

3. Receipts: Receipts will be provided at the time of payment.

4. Return Checks: There is a \$10.00 processing fee on returned checks. We require that your returned check amount plus the processing fee be paid before your next scheduled appointment.

INSURANCE CLIENTS

5. Scheduling and fees for Insurance clients: A minimum of \$20 or your co-pay and/or co-insurance is due at every appointment. Prior to attending the first appointment and when adding any new services, the client is responsible for calling their insurance company and obtaining co-pay, co-insurance, deductible, number of visits, authorization, and network provider status. This information can be faxed directly to Children's Advantage at 330-296-6126 or brought to the first appointment by the client. If this information is not available at the first appointment then the **client is responsible for 100% of the bill** at each appointment until the client brings in this information.

6. Insurance Past Due: Insurance is billed providing you submit all the necessary billing information required by your insurance company. It is important to note that even when we have filed an insurance claim on your behalf, if after 90 days we have not been paid by your insurance company, you will be required to pay the past due balance. While we do our best to collect on past due insurance claims, in the end, we cannot accept responsibility for following up on past due claims nor negotiating a disputed claim.

7. Changes in income or insurance: I agree to notify Children's Advantage whenever there is a change in my annual income, expenses and/or number of dependents within 14 days of the occurrence. Otherwise, I will be charged 100% of the services not covered by the insurance company until information is received. Children's Advantage is not able to back date methods of payment changes.

8. Authorizations: It is the client's responsibility to obtain authorization of each service received at Children's Advantage prior to the start of that service.