



PARTICIPANT ORIENTATION HANDBOOK



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Welcome to Human Supports of Idaho

The purpose of this handbook is to provide you with an overview of our programs and services as well as to inform you of your rights and responsibilities as a participant. This information is provided so you may make an informed decision about your treatment. All information is based on the most current rules and regulations governing these programs and on Human Supports of Idaho, Inc. policy and procedures. This information is updated whenever there are rule, regulation or policy changes affecting the contents of this handbook.

The staff at Human Supports of Idaho, Inc. is available to help you to identify your goals and methods by which you may achieve these goals. The purpose of this handbook is to provide you with the information necessary for you to make the best decisions regarding your treatment and services.

Mission Statement

Our mission is to provide integrated services that support recovery and enhancement of life. We endeavor to create a collaborative environment that fosters hope, stability, and respect among persons served, employees, and our community.

Vision Statement

We aspire to be the human service agency of choice within our community, highly valued by the participants we serve, respected by competitors and colleagues, and acknowledged for innovative service delivery.

Values

We value professionalism, competency and high ethical standards in our employees and contractors, we perform our duties while maintaining respect for others, a non-judgmental attitude, genuine caring, and acceptance for all whom we serve. We demonstrate the importance of honesty, hope, compassion, empathy and support in our actions.

Recovery Focused

“Recovery is a process of change through which individuals improve their health and wellness, live self-directed lives and strive to reach their full potential.”

-SAMHSA, 2012

The principles of a recovery-oriented approach include understanding that each person is different and should be supported to make their own choices, listened to, and treated with dignity and respect. Each person is the expert of their own life and support should assist them to achieve their hopes, goals and aspirations.

Ethics

All clinicians at HSI adhere to the Code of Ethics for his/her/their profession. Each Code of Ethics offers a set of values, principles and standards to guide decision-making and everyday professional conduct. You can find our more information about the Code of Ethics at:

- American Counseling Association: www.counseling.org/resources/aca-code-of-ethics.pdf
- American Medical Association: code-medical-ethics.ama-assn.org/
- American Nurses Association: www.nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/
- American Psychological Association: www.apa.org/ethics/code
- ID Certified Peer Support Specialist: www.bpahealth.com/wp-content/uploads/2018/05/CPSS-Code-of-Ethics.pdf
- National Association of Social Workers: www.socialworkers.org/About/Ethics/Code-of-Ethics

Services are provided without regard to sex, race, color, creed, home of national origin, age, disabling condition, sexual orientation, gender identity, veteran status, or ability to pay.

Our Services

Assessments

HSI uses a variety of assessment tools to help us identify your strengths and needs. These assessments are necessary to help build an individualized treatment plan that will support goal attainment. These assessments include:

ASAM Summary: This summary from the American Society of Addiction Medicine (ASAM) is used to determine if you need substance use disorder treatment. The information gathered helps identify the types of services needed as well as the recommended Level of Care.

Child/Adolescent Needs and Strengths Scale (CANS): If you are under 19 years of age and have Medicaid Insurance, the CANS provides insight regarding the strengths you already possess and any areas or needs you may have to successfully complete treatment.

Comprehensive Diagnostic Assessment (CDA): The Comprehensive Diagnostic Assessment (CDA) includes your reason for seeking services and what you hope to gain from taking part in services (e.g., goals). This includes a social, medical, developmental, and behavioral health history, a mental status exam and risk assessment, a review of current symptoms, and a behavioral health diagnosis. Treatment recommendations are provided and, with your help, a first plan for treatment is created. Any time there is a meaningful change in your status or symptoms, or at least once per year, the assessment information is updated, and your treatment is adjusted accordingly. As part of these assessments, some or all the following tools may be used:

DUI Evaluation: We are approved to complete DUI evaluations using the DUI Evaluation Reporting Form required by the Idaho Supreme Court.

World Health Organization Disability Assessment Schedule (WHODAS) 2.0: The WHODAS 2.0 is a short assessment tool that evaluates 6 domains of functioning including cognition, mobility, self-care, getting along, life activities, and participation. This is typically completed if you have Medicaid Insurance.

Treatment Plans

After an initial assessment, you will meet with your assigned provider to create a plan for your treatment. This plan includes your goals for participating in treatment, what you and your team will do to help you meet these goals, and how you will know when services are no longer needed. This plan is reviewed every 90 days to determine your progress, if any changes are required, and if treatment is still medically necessary. Then you and your provider will meet regularly to work toward your goals using Evidence Based Practices (EBPs).

Individual Therapy

Individual and group psychotherapies are provided by our amazing team of therapists and counselors. Which clinician you will see may be limited by the type of insurance you have, by state or federal regulations, your personal preferences, or other factors. We participate in the development of new therapists by providing training and supervision for Graduate Students. Each student is supervised by a licensed clinician.

Evidence based practice involves integrating the best available research with clinical knowledge and expertise while considering your unique needs and personal preferences to achieve your goals. Below is a list of many of the evidence-based treatments offered at HSI.

Acceptance and Commitment Therapy (ACT): Participants learn to accept rather than avoid, deny, or struggle with inner emotions and commit to making necessary changes and move toward valued behavior.

Cognitive Behavioral Therapy (CBT): Helps participants identify challenging situations, build awareness of thoughts, emotions, and beliefs about these challenges, identify negative or inaccurate thinking, and reshape thinking to drive desired change.

Collaborative Assessment and Management of Suicidality (CAMS): Designed to treat suicidality in an outpatient setting by addressing stress, hopelessness, and suicidal ideation by reducing access to lethal means, improving problem solving, and building hope.

Dialectical Behavioral Therapy (DBT): Participants learn mindfulness, distress tolerance, emotional regulation, and interpersonal effectiveness skills to manage painful emotions and decrease conflict in relationships.

Eye Movement Desensitization and Reprocessing (EMDR): EMDR is a therapy designed to help with distress related to traumatic memories and other negative life experiences. Participants learn ways to handle emotional distress and use their skills to change the way traumatic memories are stored in their brains.

Motivational Interviewing (MI): MI is a collaborative, goal-oriented style of communication designed to strengthen personal motivation for and commitment to a specific goal by enhancing a person's own reasons for change.

Solution-Focused Brief Therapy (SFBT): Helps participants identify their goals and works to build solutions by focusing on strengths and resources rather than problems and deficits.

Group Therapy

Group Psychotherapy involves multiple participants and one or more providers. Each of these formats uses evidence-based approaches (integrating the best available research with clinical knowledge and expertise) to provide the most effective treatment possible. Below is a list of some of the evidence-based treatments offered at HSI.

Anger Management: A cognitive-behavioral therapy that helps participants with relaxation training, cognitive interventions, and communication skills to learn new ways to address challenging situations.

Cognitive Self Change (CSC): CSC is a program designed to teach participants how to change their own thinking.

Hazelden Co-occurring Disorders: An integrated treatment approach with a focus on stabilizing symptoms of the co-occurring mental health disorder while providing a foundation for recovery from addiction.

Illness Management and Recovery (IMR): Empowers participants to manage their illness, find their own goals for recovery, and make informed decisions about their treatment by teaching them the necessary knowledge and skills.

Living in Balance (LIB): This curriculum addresses basic issues commonly faced by individuals in early recovery. Sessions address drugs of abuse, relapse prevention, self-help programs, mental and physical health, emotional and social wellness, sexual and spiritual health, daily living skills, and vocational and educational development.

Matrix Model: This approach promotes positive and healthy changes to a person's thoughts and behaviors that lead to substance abuse issues by teaching skills to stop substance use, deal with cravings, avoid relapse, and build positive sober support systems.

Moral Reconnection Therapy (MRT): MRT is a cognitive behaviorally based treatment approach designed to promote growth of a positive, productive identity, and facilitate the development of higher stages of moral reasoning.

Substance Use Treatment

HSI utilizes an Integrated Behavioral Health approach as much as possible, meaning that services available to people with mental health and / or substance use disorders are provided in a similar fashion with an integrated treatment team. However, there are facets of our Substance Use treatment program that are unique from our Mental Health treatment program. These Include:

ASAM Level of Care Guidelines

We utilize the American Society of Addiction Medicine's Level of Care Guidelines to determine the appropriate Amount, Frequency, Duration, and Intensity of services. The levels of care include:

0.5 – Early Intervention (Hours Only): Drug and Alcohol Assessment and Education, usually completed by attending a specific amount of group counseling and/or individual counseling.

1.0 – Outpatient Services: Less than 9 hours of counseling per week completed by attending 3-4 groups and 1 individual session

2.1 – Intensive Outpatient: 9 or more hours of counseling per week completed by attending 4 or more groups and 1 or more individual sessions

Other Levels of Care: If you need a higher level of care, we will request an authorization and then provide you a referral for these services at an appropriate agency. This may include 2.5 – Partial Hospitalization, 3.1 to 3.7 – Residential, or 3.7+ - Inpatient

Random Alcohol and Drug Testing

Observed urinalysis or mouth swab to determine if treatment is working or needs to be adjusted.

Medication Assisted Treatment (MAT)

MAT is the use of prescribed medications to treat substance use disorders. If you are interested in learning more about this treatment option, please see "MAT" under the Psychiatric Medication Management section of this handbook.

Probation, Parole, and Child Protective Services Reports

Some governmental entities may require us to provide them with updates about your progress in treatment. With your consent, we will complete PO Reports or CPS Reports that summarize your attendance, indicate the results of your Alcohol and Drug Tests, and provide general information about your efforts in treatment.

Psychiatric Medication Management

If you are interested in Psychiatric Medication Management Services, a 30 to 60-minute assessment with one of our Nurse Practitioners is the first step. (Please note, we do not prescribe pain medication or other non-psychiatric medications except those used in treating the side-effects of your psychiatric medications). After this initial meeting, you will have periodic check-ins with your medication provider (usually 15-30-minutes). These follow-up appointments are to see how the medications are working, to discuss any side-effects or concerns, and to make any needed adjustments.

Refills

During your follow-up appointment, your medication provider will submit refills as necessary. If you need a refill between appointments, please contact your pharmacy directly several days before you are out of medication. The pharmacy will send us an electronic refill request which is typically completed within 1 to 3 business days.

Side Effects and Drug Allergies

All medications have the potential to cause side effects or allergic reactions. Some side effects are more serious than others and require more immediate attention. If you experience side effects or an allergic reaction, please call the office, your primary care physician, or 911 Emergency Services.

Controlled Substances

We do not keep any controlled substances on site. If you lose your controlled medication before its time to refill (even if it is not your fault), a new prescription cannot be provided. NO EXCEPTIONS. It is your responsibility to keep your medications safe in a secure or locked location. If you need assistance securing your medications, please speak with your treatment provider.

Our agency participates in the Idaho Prescription Drug Monitoring Program. Our providers will not prescribe you a controlled substance if it is determined that your medications are being misused or if you do not show for a scheduled appointment.

Random Drug Screenings: If you are prescribed a controlled substance, you will be required to participate in random drug screening either by observed urinalysis or a mouth swab. If it is time for your drug screen, you will be informed during your appointment and are required to complete the screen by the end of the next business day (5:00pm). If you fail to complete the screen you will not be prescribed the controlled substance.

Benzodiazepines: Benzodiazepines, such as Xanax (alprazolam), Ativan (lorazepam), Klonopin (clonazepam), and others, are a group of controlled substance medications typically used to treat anxiety. Benzodiazepines become less effective over time because our body gets used to them. They can cause severe side effects including confusion, memory loss, insomnia, tremors, increased anxiety, and addiction. Do not use alcohol or opiates while taking Benzodiazepines as this can be fatal. Our providers will not prescribe these types of medications for long-term use. They will assist you to gradually decrease (taper) and eventually stop your use of Benzodiazepines. Alternative medications that are more effective for long-term treatment of anxiety will be offered.

Stimulants: This is a group of controlled medications typically used to treat Attention-Deficit/Hyperactivity Disorders. If you are diagnosed with this disorder, your prescriber may provide a prescription for a stimulant. Common stimulants include Adderall, Concerta/Ritalin, Vyvanse, Dexedrine, and Focalin.

Medication Assisted Treatment (MAT): MAT is the use of prescribed medications to treat substance use disorders. Our providers can prescribe Buprenorphine and Suboxone (controlled substances that are used to treat Opioid Use Disorders) and Vivitrol, a controlled substance used to treat Alcohol Use and Opiate Use Disorders. Our providers will send a prescription for an initial dose to the pharmacy and participants take it at the clinic under observation. Then you will obtain and take ongoing medication as needed. If you are just starting MAT, you are required to participate in substance use disorder treatment including group and individual psychotherapy. These medications require a toxicology screening before each prescription can be filled.

Community Based Services

There are many factors which may influence your mental health or substance use and the success of your treatment. The term “Community Based” includes an array of services provided outside of the therapy office by a Case Manager, a Community Based Rehabilitation Services (CBRS) provider. You may work with these individuals who will assist you in identifying areas needing support and a plan for how to meet those needs. Some of those needs may include:

- Medical Services
- Behavioral Health Services
- Housing
- Employment/Vocational
- Public Assistance
- Education
- Childcare
- Legal Matters
- Other Social Services
- Basic Living Skills
- Community
- Social
- Family

Case Management

Case Managers meet with you to complete a Case Management Needs Assessment in order to determine your needs, create a treatment plan, link you to resources and supports, coordinate care, and monitor your progress.

Skills Building/Community Based Rehabilitation Services (CBRS)

CBRS Providers complete a Skills Building Assessment with you to identify functional needs and goals related to your behavioral health diagnosis and then complete a Skills Building Treatment Plan. CBRS focuses on building confidence and competency with skills designed to increase functioning and decrease behavioral health symptoms.

Recovery Peer Services

Service Providers are individuals who have been successful in the recovery process and have chosen to use their personal experience to help others navigate the process of recovery. Providers include, Family Support Partners, Recovery Coaches, and Youth Support Specialists. Together, you will complete a Needs Assessment to identify needs, goals, and preferences and a Recovery Plan. Recovery oriented, person centered, voluntary, relationship-focused, and trauma-informed. Can help participants make progress in any of the four dimensions that support a life in recovery:

- Health: Physical and emotional wellbeing;
- Home: A stable place to live;
- Purpose: Meaningful daily activities or creative endeavors, increased ability to lead a self-directed life, and meaningful engagement in society; and
- Community: Relationships and social networks that provide support, friendship, and hope.

Advance Directives

A key component of maintaining self-determination and independence is being prepared for situations where you are unable to give clear and immediate directions for how you wish to be treated. Advance Directives are legal documents that allow you to convey your decisions in the event you become disabled to the point of needing a higher level of care (such as psychiatric hospitalization), or to plan end-of-life care ahead of time. This is a valuable tool to help communicate your wishes to family, friends, and health care professionals. All individuals have the right to develop an Advance Directive according to their personal preferences.

The State of Idaho provides details for the development of an Idaho Living Will or the Idaho Durable Power of Attorney for Health Care (<https://healthandwelfare.idaho.gov/services-programs/birth-marriage-death-records/advance-directives-and-registry-services>). Human Supports of Idaho, Inc. has instructional/informational packets on these crucial personal health care tools available. You may request this information from any staff member and a Case Manager can assist you in obtaining the necessary information needed to complete your paperwork.

Crisis Intervention

While you are actively involved in your treatment services, an agency on-call crisis worker is available to you in the event of a serious emergency. These crisis services are intended to provide support in situations where there is a risk of hospitalization, incarceration, loss of income or employment, loss of housing, a family altercation, or other serious circumstance. Only use the agency crisis number when there is a current emergency taking place. In the event of a non-emergent call, the crisis worker will refer you to your assigned worker on the next business day.

The role of the on-call worker is to provide support during a crisis by assessing the risk(s), providing de-escalation, and linking you to appropriate resources to prevent harm to you or others. The on-call worker can prompt on effective coping skills, relaxation exercises, using your crisis plan, or other techniques for managing stress and decreasing symptoms. Referral resources may include Child or Adult Protection, a hospital or emergency room, or law enforcement. If you are referred to law enforcement for a mental health crisis, the on-call worker may provide them with necessary information such as medical and contact information.

You may also contact the National Suicide Hotline to speak with someone 24/7 at **988** via phone or text.

The after-hours crisis number for both HSI service locations is **(208) 861-0781**.

Health and Safety

We are committed to providing a safe and healthy environment to our participants and staff. We participate in regular, competency-based training for our staff on pertinent health and safety issues including emergency evacuation, infection control, and disaster preparedness. We maintain current fire/safety and environmental inspections and seek to address any environmental hazards in a timely manner. In the event of an emergency or any observed environmental hazard, please contact the nearest staff member and alert them to the situation so that they can take the appropriate action.

Illegal or Dangerous Behaviors

Agency policy dictates that employees immediately leave situations where they feel unsafe, and to promptly contact authorities. Human Supports of Idaho, Inc. will follow-up, evaluate, and respond to each incident on a case-by-case basis. Agency policy also dictates that staff do not place participants in isolation or, in any way, physically restrain you (hold you down or keep you from moving). If you are in danger of harming yourself or others, law enforcement assistance will be sought.

Infectious Disease and Bug Infestation

If you become ill with an infectious disease or experience a bug infestation, we ask that you do not enter our facilities, our providers' vehicles, or allow us into your home without appropriate precautions. Please give us as much advance notice as possible and we will assist you with accessing proper treatments for the infectious disease or bug infestation to the best of our ability. Most services can be completed virtually if necessary.

- Common infectious diseases include influenza (the flu), COVID-19, stomach flu, hepatitis, respiratory syncytial virus (RSV), and strep throat among others.
- Common bug infestations include bed bugs, fleas, lice, and scabies among others.

Smoking and Vaping

Smoking and vaping are prohibited inside our facilities. Smoking and vaping are permitted in designated areas outside of each building. Per Idaho State Law, this “designated area cannot be the sole means of entrance or exit to the establishment or its restrooms and must be located a minimum of 20 feet of the building entrance in an area where no employee has to enter to perform work responsibilities.”

At the Boise office, the smoking area is approximately located on the east side in the front of the building outside the courtyard area and is clearly marked with signs and ash trays.

At the Caldwell office, the smoking area is located on the south side of the building. Both you and the employee are prohibited from smoking or vaping in an employee’s private vehicles during services.

Rights and Responsibilities

To get the most out of your treatment, it is important for you to understand what your rights are and to take responsibility for your actions. Some expectations while in treatment at HSI include:

Your Rights

Informed Consent: You have the right to receive information about the risks and benefits of our services, and to agree to participate in, decline or refuse services.

Self-Determination: You have the right to make choices about your care including your person-centered treatment plan goals, objectives, and interventions, to decide which services you receive, and to determine who is present during your services. (see “Advanced Directives”)

Accessibility and Reasonable Accommodation: You have the right to receive services in the least restrictive manner, in an environment that is safe, sanitary, and humane and to request services be delivered in a manner that respects your abilities.

Dignity and Respect: You have the right to be treated with dignity and respect, to freedom from abuse (sexual abuse, physical abuse, verbal or emotional abuse, and exploitation), and neglect, and to freedom from restraint or seclusion in any form.

Access to and Confidentiality/Privacy of Protected Health Information: You have a limited right to access your medical record and to determine who has access to your protected health information as described in our Notice of Privacy Practices and Record Copying Policy.

Constitutional and Civil Rights: You have a right to freedom of speech, freedom of association, freedom of religion, to receive, possess, and use personal property, to privacy and freedom from unreasonable search and seizure, to freedom from involuntary labor, to vote, and to equal protection and freedom from discrimination. HSI does not discriminate based on race, color, national origin, sex, age, or disability in its health programs and activities.

Grievance: You have the right to file a grievance without fear of retaliation. (For information about how to file a Grievance please see the “Grievance” section of this handbook).

Your Responsibilities

Be respectful and courteous: Always provide complete and accurate information to your providers. Do not use vulgar language, make threats or sexual gestures or comments, or engage in intimidating behavior towards staff or other participants.

Show up ready for treatment: Make your best effort to attend your appointments clean and dressed appropriately. Be sober for all appointments. Adhere to your treatment plan.

Do not engage in illegal or inappropriate behavior: Use or possession of illegal drugs, shoplifting, threatening behavior, public nuisance, disturbing the peace, or any other unlawful act is not allowed during services. This includes but is not limited to: possessing illicit drugs, alcohol, and/or weapons of any kind at our facilities, in vehicles, or in the presence of our staff. An employee may immediately discontinue services, leave the area, and in some cases contact authorities if you are involved in an illegal activity. All over the counter and prescription medications you have in your possession while on HSI property must be kept in the original labeled container(s).

Help us maintain a therapeutic environment: Do not play music or videos on your cellphone or other device in the lobby without using headphones or silencing the device. Do not put the device on speaker. If you need to make a phone call, please step outside and/or be aware of the volume of your voice.

Do not leave children unattended in the lobby: If your child is under the age of 14, a parent/guardian or other responsible adult must remain on the premises while your child is in his/her appointment.

Animals

HSI allows participants and employees to bring dogs into our facilities in accordance with the Service Animals provision in Title III of the Americans with Disabilities Act which states “**A service animal is a dog that is individually trained to do work or perform tasks for a person with a disability.**” Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the ADA.

A service animal must be under the control of its handler. Under the ADA, service animals must be harnessed, leashed, or tethered, unless the individual’s disability prevents using these devices or these devices interfere with the service animal’s safe, effective performance of tasks. In that case, the individual must maintain control of the animal through voice, signal, or other effective controls.

When it is not obvious what service an animal provides, only limited inquiries are allowed. Staff may ask two questions: (1) is the dog a service animal required because of a disability, and (2) what work or task has the dog been trained to perform.

A person with a disability cannot be asked to remove his/her/their service animal from the premises **unless:** (1) the dog is out of control and the handler does not take effective action to control it or (2) the dog is not housebroken. When there is a legitimate reason to ask that a service animal be removed, staff must offer the person with the disability the opportunity to obtain goods or services without the animal’s presence.

Staff are not required to provide care for or supervision of a service animal.

Use of Family/Friends for Interpreting

HSI does not allow family members or friends of participants to provide interpretation services except for initial service contacts and until an appropriate third-party interpreter is identified. The use of family members to provide language interpretation is discouraged by the American Psychological Association which advises that this practice is disruptive to the therapeutic process in several ways. For more information about this please see <http://apa.org/monitor/2010/02/translation.aspx>

No-Show Policy

Since the scheduling of an appointment involves the reservation of time set aside especially for you, a minimum of 24 hours' notice is required for rescheduling or cancelling of an appointment. You may also inquire whether there is an option to meet virtually if you're unable to attend an in-person session.

To best serve you, HSI has implemented a No-Show Policy regarding missed appointments. If you do not show for your scheduled appointment 2 times in a 6-month period, all scheduled appointments may be cancelled, and you will be placed on a Standby List. Once you are on the Standby List, you will be contacted the day before when an appointment time opens up for your provider. Once you no longer have 2 No-Shows within 6-months, you may be eligible to return to scheduled appointments.

Failure to Fulfill Your Responsibilities May Result In

- Loss of trust and/or restrictive service locations
- Restrictions placed on services
- Change of providers
- Development of a learning contract
- Legal charges for criminal conduct
- Interruption or discontinuation of services
- Referral to a higher level of care
- Termination of treatment for excessive no shows or cancellations for scheduled appointments

Grievance Procedure

If you have a concern regarding your services, you are encouraged to follow the grievance procedure outlined below:

1. Contact the Human Supports of Idaho, Inc. office directly to report your grievance over the telephone or in person. Copies of the Grievance form are available in each office and at the back of this handbook.
2. Describe what happened, who was involved, when and where the problem occurred, and what harm or damage resulted from the incident(s).
3. The completed Grievance form will be routed to the appropriate manager who will gather any necessary additional information. This may include other involved parties, and any staff member(s) identified in the grievance.
4. The manager will work with all involved parties to develop a resolution and prevention plan prior to forwarding the grievance report to the Administrator.
5. The Administrator will provide comments, suggestions and other input/action to prevent future occurrences.

6. Once this process is complete, you will be provided with written notification of the resolution plan and any actions to be taken.
7. This process will be completed within 2 weeks unless there are extenuating circumstances that require additional time to address. In these cases, you will be notified of the reason(s) for the delay. If you do not receive written notification within 2 weeks, please contact the Administrator, Brian Knight.
8. You may appeal the findings detailed in the resolution plan directly with the Administrator if you are dissatisfied.

Grievance Contacts

- **Steven Mauk, LPC, Mental Health Manager**
Phone: (208) 454-8389
Email: smauk@humansupports.com

Protection Against Retaliation

Retaliation against anyone who files a grievance or provides information related to a grievance is strictly prohibited and will not be tolerated. Human Supports of Idaho, Inc. considers retaliation a very serious matter. Accordingly, individuals found to have engaged in acts of retaliation shall be subject to immediate and appropriate disciplinary action up to and including dismissal from the company. During the grievance investigation, all parties shall be reminded that retaliation is prohibited.

Examples of retaliation can include, but are not limited to, negative actions such as poor customer service, changes in services without the participant consent, or other negative treatment or service decisions, laughing at, ignoring or failing to take seriously concerns/complaints.

Payment and Insurance Billing

Human Supports of Idaho, Inc. and its providers accept many different insurance plans, and will submit claims on your behalf for reimbursement for services provided by in-network providers. Our billing department will provide you with a HCFA 1500 form for services provided by out-of-network providers within 7 business days of the service. If insurance fails to cover a billed service for an In-network provider for any reason, it is your responsibility to pay outstanding balances more than 90 days old.

If you have insurance with co-pays and deductible responsibilities, are self-pay, or if you do not qualify for the sliding scale fee program, you are expected to pay those fees at the time of service. We accept cash, check or money order, and credit/debit cards for the exact amount only. Failure to pay your responsibilities may result in an interruption to your services.

Good Faith Estimate

If you are Self-Pay you are entitled to a Good Faith Estimate of the costs of treatment. You and your provider(s) will establish a treatment plan which will outline the amount, frequency, and duration of your services which will impact the total cost of care. This is the Self-Pay fee schedule for all services.

Service	Code	Fee
Comprehensive Diagnostic Asmt.	90791	\$165.00
Global Appraisal of Individual Needs (GAIN)	H0001	\$400.00
DUI Evaluation	H0001	\$150.00

Individual Therapy 30 Minutes	90832	\$60.00
Individual Therapy 45 Minutes	90834	\$90.00
Individual Therapy 60 Minutes	90837	\$120.00
Family Psychotherapy	90846/ 90847	\$110.00
Group Psychotherapy	90853	\$30.00
Urine Analysis Presumptive Test	80305	\$13.50
Medication Mngt. Intake	90792	\$200.00
Medication Mngt. Follow-up 20 Minutes	99213	\$75.00
Medication Mngt. Follow-up 30 Minutes	99214	\$100.00
Medication Mngt. Follow-up 40 Minutes	99215	\$150.00
Medication Injection	96372	\$20.00
Case Management	T1017	\$66/ hour
Peer Services/ Recovery Coaching	H0038	\$66/ hour
Community Based Rehabilitation Services	H2017	\$66/ hour
Probation/ Parole Report	PORPT	\$60/ report
Court Summon Fees		\$600/ hour

Sliding Scale Fee Program

It is the policy of Human Supports of Idaho to provide essential behavioral health services regardless of a person's ability to pay. Discounts are based solely upon your family/household size and annual income. A sliding scale fee schedule is used to calculate the basic discount and is updated each year using the Federal Poverty Guidelines.

Once approved, the discount will be honored for up to 12 months, after which you would need to reapply. For the purposes of this discount policy, HSI counts only the mother, father, and dependent children under 18 years of age as the family. Other adults in the household, even though related, are not considered in the application process.

Discount Application Process

This program is designed to provide free or discounted care to those who have no means, or have limited means, to pay for their medical services (e.g., uninsured or underinsured). A completed application must be on file and approved by the business office before a discount will be granted. Additional documentation of household income may be required.

To support timely access to care, application approvals may be made without supporting income verification. The clinician will work with you to secure the documentation as soon as possible after the initiation of services.

- **Clinical Services:** The discount is applied to individual therapy and psychiatry services.
- **Pharmacy:** Samples are provided when available and without charge.

Record Requests

Human Supports of Idaho is committed to providing you with access to your medical records in accordance with all applicable laws and regulations, specifically the 21st Century Cures Act of 2016 and the Health

Insurance Portability and Accountability Act of 1996. In accordance with these laws, we may charge reasonable fees to provide you with a copy of your medical records. We may also restrict access to your medical records if it is determined that releasing them may result in harm to you or someone else or if it would be a violation of your privacy or that of another person.

We will provide, at your request, to you or another person or entity the following records for **free**:

- A copy of your Initial Comprehensive Diagnostic Assessment
- A copy of your most recent Comprehensive Diagnostic Reassessment
- A copy of your Initial Psychiatric Diagnostic Evaluation
- A copy of your most recent Treatment Plan for each service
- A copy of your most recent Psychiatric Medication Management note
- A copy of your current Active Medication List

This meets the community standard for transfer of care.

Requests for additional records will result in a fee for organizing, printing, reviewing, and delivering a more extensive record set. The charges for these services are payable prior to our staff completing the request and will be completed at a time convenient to our operations. Charges listed include requests for electronic copies. These costs are not covered by health insurance benefits nor by our sliding fee program and are the responsibility of you or of the requesting entity. These charges include:

- 25 Cents per page for the first 100 pages,
- 50 Cents per page for each page in addition to the first 100 pages, and
- \$10 for each 15-minute increment of staff time spent filling the request.

Communication and Confidentiality Practices

HSI is committed to honoring the privacy and confidentiality of our participants. Generally, HSI may not state that a person attends an agency program or disclose any information identifying a patient as participating in alcohol or drug abuse treatment.

Communicating with our Staff and Providers

You may choose to communicate with your provider through cell phone calls, text messaging, or email. These are not secure or encrypted platforms for communication. You are encouraged to limit communication on these platforms to discussions about scheduling appointments. We may send you appointment reminders via text message. We will not communicate directly with you or acknowledge our therapeutic relationship with you on social media or any other public platform.

HSI uses the following platforms for communication:

- HIPPA compliant email via Microsoft Office 365
- Zoom Desktop Client for phone, meetings, and chat

Confidentiality

There may be certain circumstances in which we are required by law to release personal information about you to the appropriate authorities. Some of these situations may include:

Mandated Reporting

HSI employees are required by law to report instances of suspected abuse or neglect of a child or of a vulnerable adult. Reports regarding children are made to Child Protective Services (CPS) and/or Law Enforcement; reports regarding vulnerable adults are made to the Idaho Commission on Aging. The definitions of the type of information we are mandated to report are as follows:

- **Neglect:** occurs when a child is not getting the care and protection they need.
- **Physical abuse:** harming a child in a way that leaves physical marks or injuries.
- **Sexual abuse:** may be sexual touching, molestation, incest, rape, or taking pictures of a child for obscene or pornographic purposes.
- **Abandonment:** the failure of a parent to maintain a normal parental relationship with their child including, but not limited to, reasonable support or regular personal contact.
- **Vulnerable Adult:** an adult person who is 18 years of age or older and is unable to protect themselves from abuse, neglect, exploitation due to physical or mental impairment, which affects the person's judgment or behavior to the extent that they lack sufficient understanding or capacity to make or communicate or implement decisions regarding their person.

Suicide and Self-Harm/Homicide and Harm-to-Others

If an individual makes any statement, threat or demonstration of behavior presenting a risk of harm to him/herself or another person, by law we must take the necessary steps to ensure the safety of all individuals involved. It is important that as a recipient of services you are aware of this requirement and understand our role to ensure your safety and the safety of others in the community.

Should a risk assessment or incident present information that you may be a danger to yourself or someone else, or should you become gravely disabled due to a mental illness, we are required to report information to law enforcement, or to another appropriate authority such as Adult Protection or Child Protection authorities.

If you are hospitalized involuntarily, we may provide the hospital with the necessary information to ensure you receive appropriate care/treatment. With your consent, we may also work with you and the hospital towards developing a discharge plan based on your needs at that time.

Other instances in which we may be required to report information to law enforcement or other entities are identified in the Notice of Privacy Practices. If you need clarification on this or any other information contained in this handbook, you need only ask one of our staff to assist you.

Confidentiality of Alcohol and/or Drug Abuse Patient Records

The confidentiality of alcohol and drug abuse patient records maintained by this program is protected by Federal law and regulations (See 42 U.S.C. 290dd-3 and 42 U.S.C. 290ee-3 for Federal laws and 42 C.F.R. Part 2 for Federal Regulations. Approved by the Office of Management and Budget under Control No. 0930-0099). 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.

Circumstances under which we may share your information with others outside the agency include the following:

- You consent in writing;

- The disclosure is allowed by a court order; or
- The disclosure is made to medical personnel for research, audit, or program evaluation.

Federal law and regulations do not protect any information about a crime committed by a patient either at the program or against any person who works for the program or about any threat to commit such a crime. It also does not protect any information about suspected child abuse or neglect from being reported under State Law to appropriate State or local authorities. Individual licensure laws may require the release of confidential information if there is imminent danger of harm to self or others.

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. It also includes your rights regarding how your health information is used.

You have the right to:

- Get a copy of your paper or electronic medical record and other health information we may have about you. (Please see the above section titled “Records Request Policy”).
- Correct your paper or electronic medical record if you believe it is incorrect or incomplete. If we decline your request, we will inform you of the reason within 60 days.
- Request confidential communication in a manner that is best for you (for example, home or office phone, mail to an address other than your home address).
- Get a list of those with whom we’ve shared your information. We are required to document when we have shared your information, with whom we have shared it, and why it was shared. This information is kept for 6 years. All disclosures except those related to treatment, payment, health care operations, and certain other disclosures (such as ones you have asked us to make) will be included. You may request this accounting for free once per year, otherwise a reasonable charge will be required.
- Receive a copy of this privacy notice.
- Choose someone to act for you. If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
- Ask us to limit the information we share. For certain health information, you can tell us your choices about what we share and with whom. If you have a clear preference for how we share your information in the situations described below, please speak with us. We will gladly follow your instructions.
- Sharing information with your family, close friends, or others involved in your care.
- Sharing information in a disaster relief situation.
- If you are unable to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.
- Regarding marketing, sale of your information, and most sharing of psychotherapy notes, we never share your information without your written permission.

- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.
- File a complaint if you believe your privacy rights have been violated. Instructions for how to file a complaint are listed in the above section titled “Grievance Procedure.” You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.

We will not retaliate against you for filing a complaint.

Uses and Disclosures

How do we typically use or share your health information? We may use and share your information to:

- We can use your health information and share it with other professionals who are treating you.
- To run our practice, improve your care, and contact you when necessary.
- Bill for your services to receive payment from your health insurance company or other entity.
- Help with public health and safety issues such as preventing disease, help with product recalls, report adverse reactions to medications, report suspected abuse, neglect or domestic violence, or to prevent or reduce a serious threat to someone’s health or safety.
- Do research.
- Comply with the state or federal laws including with the Department of Health and Human Services.
- Respond to organ and tissue donation requests if you are an organ donor.
- Work with a medical examiner or funeral director in the event of your death.
- Address workers’ compensation claims, law enforcement, health oversight agencies for activities authorized by law, and for special government functions such as military, national security, and presidential protective services.
- Respond to lawsuits and legal actions such as a court order, subpoena, or administrative order.
- We are allowed or required to share your information in other ways – usually in ways that contribute to the public good such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes.

Our Responsibilities

We are required by law to maintain the privacy and security of your health information. We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

We must follow the duties and privacy practices described in this notice and give you a copy of it.

We will not use or share your information other than as described here unless you tell us we can in writing. You may withdraw your consent to share your information at any time. Let us know in writing if you change your mind.

For more information regarding HIPPA or Privacy Practices:

Conflict of Interest, Informed Consent, & Participant Choice

“A conflict (of interest) between the private interests and the official responsibilities of a person in a position of trust.” – Webster’s Dictionary

Human Supports of Idaho, Inc. staff are trained to be alert to and avoid conflicts of interest that interfere with the exercise of their professional discretion and impartial judgment.

In the behavioral health arena where there are several choices of service providers, one risk related to conflict of interest is that of placing restrictions on a participant’s right to self-determination. An example of this type of restriction is in the form of a provider who fails to adequately inform participants of their choice of providers, and/or of their right to refuse services. As a recipient of services, you have choices about who you want to provide your service, what types and amounts of services you want and what goals you would like to work towards achieving.

This handbook provides complete information on the services available at HSI, the purposes of each service and the role of the provider so that you can make an informed choice about the providers and services that will best meet your individual needs. If the service or professional you are seeking is not available at HSI, you may request a list of available service providers in your community from our office or from the agency or insurance company funding your services.

Terms of Notice

HSI reserves the right to change the terms of this notice at any time. The changes will apply to all the information we have about you. A new notice will be available upon request, in our office, and on our website.

This notice is effective May 1, 2023.

The Privacy Officer for Human Supports of Idaho is:

Name:	Steven Mauk, LPC
Phone:	208-321-0160
Email:	smauk@humansupports.com
Address:	4477 W Emerald Street, Suite C100 Boise, ID 83706

Grievance Form

Date:	Time:	Initial Contact Form: ☐ In Person ☐ Telephone ☐ Correspondence ☐ Other:
Grieving Party:		Address: Phone Number:
Relationship: ☐ Recipient of Services ☐ Relative/Friend of Service Recipient ☐ Guardian of Service Recipient ☐ Mental Health Authority ☐ Other Provider: ☐ Other Stakeholder:		
I. Description of Grievance: (Please be as specific as possible, and use additional sheets if necessary)		
What happened?		
Who was involved (Include any witnesses to event)?		
When did the incident take place (Include date and time)?		
Where did the incident take place?		
What was the resulting harm?		
Staff Person Taking Report (type or print): Signature:		Signature of Reporting Party: