

FCC BEHAVIORAL HEALTH MENTAL HEALTH CLINICS

Agency Website – www.fccinc.org
1-800-356-5395 – STATEWIDE CRISIS LINE



Your Contact Person will be: _____

PROGRAM HANDBOOK

Revised: November 14, 2016
Previous Revision: 7/24/2015

MENTAL HEALTH CLINICS LOCATIONS

KENNETT, MO OFFICE

**925 Highway V.V.
Kennett, MO 63857
(573) 888-5925 – PHONE
(573) 888-9365 – FAX**

POPLAR BLUFF, MO OFFICE

**3001 Warrior Lane
Poplar Bluff, MO 63901
(573) 686-1200 – PHONE
(573) 686-1029 – FAX**

CARUTHERSVILLE, MO OFFICE

**915 Highway 84 West
Caruthersville, MO 63830
(573) 333-5875 – PHONE
(573) 333-5876 – FAX**

**Office Hours: Mon – Thurs, 8:00am – 6:00pm
Friday, 8:00am – 3:00pm
(*Caruthersville office is not open on Fridays*)**

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MENTAL HEALTH CLINICS VISION

Through collaborative effort, the Mental Health Clinics team will work to empower individuals, both adult and youth with severe and persistent mental illness, to develop skills and abilities that will allow them to live strong and productive lives within the community through multi-dimensional care.

MENTAL HEALTH CLINICS MISSION

Collaboratively engage persons to improve overall functioning by learning new skills, strengthen positive relationships, and managing both mental and physical health in a healthy manner.

MENTAL HEALTH CLINICS CORE VALUES

- Mental illness can be effectively treated in the community.
- Mental illness can affect all areas of life (physical, psychological, social, and school/work); therefore, treatment services will focus on wellness and integrated care to enhance functioning.
- All people should have access to the most effective, least restrictive care to promote self-determination and independent living to the greatest extent possible.
- The clinical team will assist the person(s)-served with identifying and developing person-centered treatment goals and will provide person-centered treatment via evidence based clinical interventions.

MENTAL HEALTH CLINICS PHILOSOPHY

FCC Behavioral Health's (FCC) Mental Health Clinics believe mental illnesses are treatable. Since mental illness can affect all aspects of life, including physical, psychological, social, and school/work, we believe it is critical to utilize a holistic approach and treat all aspects of functioning. The Mental Health Clinics are committed to providing person(s)-served with the most effective treatment available and/or assisting person(s)-served in finding the most effective treatment available. Further, FCC believes there are family illnesses and the family/significant others of the identified person(s)-served need treatment as well. Every effort is made to involve the family and/or legal guardian(s) of the person(s)-served in the treatment process to provide them with the needed identified service(s).

MENTAL HEALTH CLINICS PROGRAM KEY OUTCOMES

- Person(s)-served will demonstrate an improvement in daily living activities, overall wellness, and stabilization as evidenced by an increase in DLA-20 scores over the course of treatment which will be evaluated quarterly.

MENTAL HEALTH CLINICS PROGRAM ORIENTATION ACTIVITIES

During the intake process, the person(s)-served/legal guardian/referral source receives an orientation to the program which is also included in the handbook. The orientation addresses:

- Rights and Responsibilities of the person(s)-served.
- Grievance Policy and Appeal Procedures.
- How the person(s)-served can provide feedback about his/her treatment experience through the use of the facility suggestion box, satisfaction surveys and participation in program community meetings.
- Rules and Program Expectations.
- Floor Plans and Emergency Evacuation Routes.
- Informed Consent to Treat.
- Consent to Telehealth Services.
- Education on Advance Directives.
- Transition/Discharge Criteria.
- Requirements for reporting and/or follow-up for the mandated person(s)-served, regardless of his/her discharge outcome.
- After Hours/Crisis Contact Information.
- Confidentiality Policy.
- Financial Obligations and Responsibilities.
- Tour of Facility/Floor Plans and Emergency Evacuation Routes.
- Policy Regarding Use of Seclusion and/or Restraint.
- Program policy regarding use of tobacco products, possession of illegal drugs and gambling.
- Prescription medication policy.
- Program policy regarding the possession of weapons.
- Identification of the staff member responsible for service coordination.
- Assessment purpose and process.
- Description of how the person-centered care plan will be developed and the expectation of the person(s)-served to participate in this process.
- The potential course of treatment/services.
- Standards of professional conduct related to services.

STAGES OF CHANGE PHILOSOPHY

We believe in a philosophy of change that is internally motivated from the individual. What's going on in your life that has you or the people around you concerned and how can we work together to reach goals of change in these areas? Many people come to treatment not really sure what the problems are or that they really have a problem at all. The Stages of Change allow people to start right where they are in their own process of change.

PRE-CONTEMPLATION:

"I don't think I have a problem at all, everything is going just fine in my life." Packets and material on this stage of change helps people to take a look at potentially risky behaviors and discuss the pros and cons of behaviors that can be self-harmful. Exercises are designed to encourage individuals to contemplate their lives and set goals for change.



CONTEMPLATION:

"I might have a problem, but I'm still gathering information and thinking about it." Packets and material on this stage of change helps people prepare for change by taking an in depth look at personal substance use behavior, learning about addiction and recovery, identifying triggers, identifying relapse warning signs, identifying barriers to change, and identifying what recovery skills will help to achieve personal goals.



PREPARATION:

"I know I have a problem and I need to learn as much as possible about how to manage my problem so that I can move forward into an active change." Packets and materials on this stage of change helps teach recovery skills that are based in Cognitive Behavioral Therapy such as: Craving Management, Refusal Skills, Trigger Management, Relapse Prevention Skills, Communication Skills, Anger Management Skills, and Stress Management Skills. Recovery support networks are identified and Emergency Plans using these supports are developed.



ACTION:

"I have begun applying the skills that I have learned. I can actually see some of the benefits of my changes and I have a desire to keep moving forward" Packets and materials on this stage of change help individuals on restructuring cues and social supports., helps enhance confidence in dealing with obstacles. Provides support on how to continue developing and refining the skills learned.



MAINTENANCE:

"I am stable and doing well. What can I do to continue with my ongoing recovery?" Packets and materials on this stage of change help individuals continue to build their tool kit of recovery skills. At this stage individuals are increasingly more confident that they can continue on their path of recovery.



DESCRIPTIVE SUMMARY OF SERVICES

Mental Health Clinics offer interventions designed to help person(s)-served with chronic and persistent mental health disorders, to reduce psychiatric hospitalizations, and to continue to live within the community. The Mental Health Clinics is compliant with applicable state and federal Medicaid requirements. Service delivery models and strategies are based on accepted practice in the field and incorporate current research and evidence-based practice. Services are designed and delivered to support the recovery, health, and well-being of the person(s)-served, to enhance quality of life, to reduce needs and build resiliency, to improve functioning, and support community integration. FCC's Mental Health Clinics offer the following services:

Assessment, Evaluation and Consultation Services.

Person(s)-served can meet with a clinician for a thorough assessment of strengths, needs, abilities, and preferences. Upon completion of the assessment, the clinical therapist determines level/intensity of care and presents recommendations to the clinical team for review.

Crisis Assessment and Intervention.

All person(s)-served have access to emergency services, either over the phone or face-to-face, seven (7) days a week, twenty-four (24) hours per day. MOCARS, our access/ crisis hotline provides this service after hours. On some occasions, it is necessary to access involuntary admissions for person(s)-served if they pose a threat to themselves or others; however, this is utilized as a last resort. A Qualified Mental Health Professional (QMHP) makes the final determination regarding this option and follows the protocol as written.

Individual and Family Therapy.

Person(s)-served can meet with a clinical therapist for individual and family therapy (6-8 sessions). Sessions are planned, face to face, goal oriented therapeutic interactions with a qualified staff member in accordance with a person-centered care plan. Throughout the course of treatment, the clinical therapist monitors the person(s)-served and meets with the clinical treatment team regularly to ensure the client is receiving the most effective treatment available.

Group Therapy.

Co-Occurring counseling and group therapy are provided to those identified as having both a substance use diagnosis and a mental health diagnosis. Co-occurring issues are integrated into the person-centered care plan and are provided by qualified personnel. Group Education consists of the presentation of general information and application of the information to participants through group discussion in accordance to the person-centered care plan which is designed to promote recovery and enhance social functioning.

Case Management.

A Physician's Case Manager (PCM) provides case management services to person(s)-served who are receiving medication management services at FCC Behavioral Health's Mental Health Clinics. Mental Health Clinics work closely with the person(s)-served and psychiatrist/PMHNP in the development and maintenance of a person-centered care plan and monitors progress.

Healthcare Information and Community Resource, Support and Referrals.

A Nurse Care Manager (NCM) is available to provide health home services to individuals with certain chronic illnesses. The NCM coordinates care among both primary and specialty medical care services. The NCM also promotes healthy lifestyles and supports person(s)-served in managing their chronic health conditions via education, referrals, and information and handouts.

Medication Management.

Psychiatry services are routinely scheduled at 2-3 month intervals with urgent appointments available every day, if needed. All psychiatrists are board certified and supervise all work of the psychiatric nurse practitioners (PMHNP). Psychiatrists/PMHNP's assume the responsibility for the medication aspects of mental health care, including: Psychiatric evaluations, medication management, review of complex cases where physical and mental health issues intersect, organicity, seizure disorders, psychosomatic disorders, and other medical and psychiatric related disorders.

Medication Assisted Treatment (MAT) is an evidenced based practice that combines pharmacological interventions with substance abuse counseling and social support. Although not for everyone, it is an essential part of the comprehensive array of services available to people struggling with addiction to alcohol or other drugs. The LPN/RN at the Clinic delivers the injection as ordered by the psychiatrist.

Medication administration may include arranging appointments with an RN or LPN for injections of psychotropic medications as ordered by the psychiatrist as well as assistance with Patient Assistance programs for free or discounted medications as ordered by the psychiatrist.

Medication administration support may include coordination of medication needs with families, person(s)-served, and/or pharmacies (including the use of indigent drug programs); setting up medication boxes; monitoring medication compliance, person's vitals, and laboratories ordered by the psychiatrist; and perform metabolic screenings.

FCC Behavioral Health is not a doctor-only facility; therefore, it is our policy the person(s)-served is receiving additional treatment services.

ERE (Emergency Room Enhancement).

Offers term stabilization services for those in crisis by addressing immediate needs, enhancing overall functioning, and reducing psychiatric hospitalizations.

Offers crisis intervention services 24-hours a day. The Crisis Therapist and Intensive Care Coordinators provide the following forms of crisis response: mobile response, walk-in services, face-to-face intervention, and telephone response.

The program also offers intensive case management services. The Intensive Care Coordinator (ICC) coordinates care for the person(s)-served by addressing behavioral/physical health and basic needs. Intensive Care Coordination services, which consist of specific activities in collaboration with the person(s)-served, are delivered in accordance with the person-centered care plan. The Crisis Therapist and Intensive Care Coordinators work closely with the treatment team and make referrals to appropriate services.

The Crisis Therapist provides outreach in the community in effort to meet the needs of those in crisis.

Community Mental Health Treatment (CMHT) offers stabilization, therapeutic, case management and medication management services for offenders (referred by Probation and Parole) who are suffering from marked impairment in social and/or occupational functioning due to a mental illness. Services are delivered by a Qualified Mental Health Professional (QMHP) and in accordance with the person-centered care plan.

The Mental Health Clinics team meet as often as necessary to carry out decision making responsibilities. The results and attendants of these meetings are documented.

Community Mental Health Liaison (CMHL) offers assistance to law enforcement and the courts by providing better access and resources to those individuals who need behavioral health treatment. The CMHL can screen potential and existing consumers for behavioral health needs and follow their cases to monitor treatment. The CMHL also provides and coordinates training with law enforcement and other agencies regarding mental health to improve services and reduce stigma.



SITE POLICY

1. FCC Behavioral Health's Mental Health Clinics and its staff, are not responsible for damage to your personal property or loss due to theft, accident, or illness.
2. Drug screen testing can be conducted at any time during the course of treatment. You are expected to fully cooperate with drug screen requests.
3. You must respect the confidentiality of all other person(s)-served and not disclose information, stories, or names with anyone outside of this facility.
4. Do not verbally, emotionally, or physically abuse another person(s)-served or staff members.
5. You are not to become sexually or romantically involved with staff member. This includes any attempt to initiate an intimate relationship with others by means of talking, physical contact, letter writing, etc. Focus should remain on treatment. If you are seeking an inappropriate relationship with another person, you are unable to focus completely on treatment.
6. All staff at the facility are mandated reporters and required by law to report any information related to child abuse and elder abuse. In addition, staff is also required by law to report any person that makes a threat to harm self or others.
7. Complaints are to be reported to your assigned Counselor and/or Clinical Manager. Do not share complaints with someone that has no authority to deal with the situation.
8. The use of tobacco products is prohibited. This also includes electronic cigarettes.
9. Gambling is not allowed on the premises.
10. In the event that illegal drugs or unauthorized prescription medication is brought into the facility for the purpose of illegal use or distribution, local law enforcement will be contacted and possible charges filed.
11. Weapons of any kind are not permitted. All weapons will be confiscated and the proper authorities contacted as necessary to ensure safety of others.
12. The Stabilization & Crisis Services program does not provide transportation services for therapy or psychiatric appointments; however, a list of resources will be shared with any person who needs assistance with transportation.
13. The Mental Health Clinics does not utilize seclusion or restraint as means of behavior management or modification. All staff is trained in Nonviolent Crisis Intervention Techniques.
14. The Mental Health Clinics does not participate in the writing of Advance Directives; however, all person(s)-served are provided information and education on how to initiate an Advance Directive. If person(s)-served have an Advance Directive, a copy will be obtained and kept in medical records.
15. The Mental Health Clinics has the option to provide telehealth services; however, person(s)-served are not mandated to utilize this service. If a person(s)-served decides to opt out of telehealth services, his/her benefits/treatment will not be affected in any manner.

RIGHTS AND RESPONSIBILITIES

Each person(s)-served will be entitled to the following rights and privileges without limitation:

- to receive prompt evaluation, care and treatment
- to be evaluated and cared for in the least restrictive environment
- to receive services in a safe and clean setting
- to not be denied admission or services because of race, sex, creed, sexual preference, color, religion, marital status, national origin or handicap
- to have records kept confidential in accordance with federal and state law regulation
- to be treated with respect and dignity as a human being in an age appropriate manner
- to be free from abuse, neglect, corporal punishment and other mistreatment such as humiliation, threats or exploitation
- To be free from misuse of funds or property
- to be subject of an experiment only with the consent of the person(s)-served, or the consent of a person legally authorized to act on behalf of Resident
- to medical care and treatment in accordance with the highest standards accepted of medical practice, if the program offers medical care and treatment
- to consult with a private practitioner at the expense of the person(s)-served
- to be free from chemical or physical restraint, seclusion or isolation

When it becomes necessary to limit rights, the limitations will be done on an individualized basis, be clinically justified and such will be documented in your record for administrative review by the Program Director/Supervisor. As soon as it is clinically feasible, the limited right(s) will be restored. Any limitation of a right will be re-evaluated at each review of the treatment/rehabilitation plan, or more often if necessary.

Each individual will be entitled to see his or her own records except to the extent that the individual's primary therapist/counselor determines this would be detrimental. When an individual reviews his/her own record, this will be documented in the case record. If it is determined that review of the case record will be detrimental to the individual, this will be documented in the case record. Because of confidentiality standards, individuals will be advised to contact the original source of any such information. Whenever an individual accesses personal records, a staff member will be present.

Each person will be responsible for the following:

- actively participate in the treatment process
- attend and be on time to all scheduled appointments
- call 24-hours in advance if an appointment must be cancelled
- be sober and alert for all appointments
- treat others with dignity and respect
- present to treatment clean and groomed

TRANSITION CRITERIA

The Mental Health Clinics team monitor the person's progress through ongoing consultation between all service providers, both within the agency and other outside agencies. If the person(s)-served appears to be in need of long term care, he/she will be referred to a more intensive level of care or outside agency deemed more appropriate to meet his/her needs. The person(s)-served may also transition within the program between more or less intensive levels of services.

DISCHARGE CRITERIA

The length of stay in the Mental Health Clinics shall be individualized based on the individual's needs and progress in achieving treatment goals. To qualify for successful completion and discharge from treatment:

- Individual should demonstrate recognition and understanding of his/her mental illness and impact.
- Individual should achieve maintained mental health stabilization.
- Individual has developed a plan for continuing recovery.
- Individual has taken initial steps to mobilize supports in the community for continuing recovery and has demonstrated improvement in functioning as evidenced by the DLA-20.

A person(s)-served may be discharged before accomplishing these goals if maximum benefit has been achieved and:

- There is no further progress imminent or likely to occur;
- Clinically appropriate therapeutic efforts have been made by staff; and
- Commitment to continuing care and recovery is not demonstrated by the person(s)-served.

Person(s)-served may be discharged from outpatient services before accomplishing these goals if:

- Person(s)-served/legal guardian requests discharge.
- Commitment to continuing services is not demonstrated by the person(s)-served.
- No further progress is imminent or likely to occur.

If there is a change in the Medicaid eligibility or financial status of the person(s)-served, the individual shall not be prematurely discharged from the program or otherwise denied services. Clinical staff will proactively advocate for the needs of the person(s)-served.

The treatment team has the discretion to discharge an individual for non-compliance. These decisions will be made on a case-by-case basis.

Reasons for discharge include:

- Successful completion of treatment
- Person(s)-served moves out of service area
- Death of a person(s)-served
- Appointment non-compliance
- Non-compliance with program rules and expectations
- Personal choice of the person(s)-served
- Medical reasons

NO-SHOW POLICY

FCC Behavioral Health (FCC) is dedicated to providing our community with quality mental health services. Appointments that are missed, cancelled or rescheduled without sufficient notice often result in the loss of an hour of therapy. It is difficult to reassign that specific hour to someone else on such short notice. Because of our commitment to serve others, FCC will utilize the following policy:

NOTICE OF PSYCHIATRIC OUTPATIENT NO-SHOW, MISSED APPOINTMENTS SERVICES POLICY

If you see one of the doctors or therapists at FCC please remember that it is important to keep all schedule appointments. Appointments that are missed, cancelled or rescheduled without sufficient notice result in the loss of an hour of therapy. It is difficult to reassign that specific hour to someone else on such notice.

An individual will be discharged from receiving Services for Appointment non-compliance based upon **ONE** of the following:

- 1) If you miss (2) two consecutive appointments;**
- 2) If you fail to participate in face-to-face activity for 180-days;**
- 3) If you fail to provide at least a 24-hour “notice” when you cannot make your schedule appointment;**
- 4) If you fail to respond to FCC Behavioral Health’s efforts to reschedule your appointments.**

If you fit any of the four (4) categories listed above, you will need to find another healthcare provider. Lists of alternate treatment sources in the area are included with this notice.

Should you require **emergency services**, before you have time to transfer your care to another provider, please call our 24-hour mental health **Crisis Hotline at (800) 356-5395** and our staff will assist you.

Your current psychotropic medication prescriptions will be filled for the next **two (2) months** allowing you adequate medication and time to find another treatment source.

Should you require a copy of your **medical records**, please call the office where you have been receiving services: Kennett office, (573) 888-5925, Poplar Bluff office (573) 686-1200, or the Caruthersville office (573) 333-5875, and our staff will assist you.

Your status of discharge will remain in effect indefinitely. Re-evaluation may be requested after one (1) year and will be allowed at the discretion of FCC.

HOW TO GIVE FEEDBACK ABOUT YOUR SERVICES

Whether new to FCC Behavioral Health (FCC) or returning for services, we want to hear your ideas and concerns about how we provide services. Knowing if something is not working, getting ideas for further improvement of services or getting recognized for a job well done is important to us as an agency and for individual staff members.

Following is a list of ways to share your ideas, suggestions and concerns:

- Suggestion boxes are placed in each FCC facility. Please share your opinion and give us feedback about your services.
- A Satisfaction Survey is completed twice (2) a year by those receiving services. These surveys are used to evaluate program services, make needed changes or to recognize when a service or staff member has made a positive impact in your recovery. They also have been helpful in learning ideas for Clubhouse group topics and areas of interest for outings, crafts and personal growth.
- A Community Meeting is held monthly at Clubhouse and provide an opportunity to discuss issues with others attending Clubhouse. A Consumer Advisory Committee is voted on twice yearly to choose three people to discuss clubhouse business, hear problems, and meet with administrative staff to discuss plans and/or problems.
- A Focus Group is held every three (3) months and is an opportunity for people who attend Clubhouse to meet with the PSR Supervisor and/or CPR Program Director to discuss Clubhouse issues.
- Grievance policy and procedures can be found within this handbook.



FCC BEHAVIORAL HEALTH

NOTICE OF ETHICAL PRACTICES



FCC Behavioral Health is committed to providing you with the best available care in a caring, respectful and ethical manner. FCC Behavioral Health has corporate compliance policies in place to assure that billing procedures adhere to legal and ethical rules and standards according to the Missouri Department of Behavioral Health (DBH), Missouri Department of Social Services, and other state and/or federal agencies that fund health care services to community mental health centers.

We want to assure that all person(s)-served have the ability to report any suspicious activity concerning any insurance, Medicaid, Medicare or other claims filed by our organization in our service to you. Reporting can be done in-person, over the phone, by mail, or via email. You have the right to remain anonymous; however, it may prove difficult to investigate anonymous reports.

Should you need to file a complaint or concern about services billed, please use any one of the following methods:

1. Report the incident, **in-person**, to the Facility Director. You may ask the front desk who the Director is and request to see them.
2. Report the incident, **over the phone**, to the Chief Compliance Officer. Please call the toll free number (800) 455-2723 to report a concern over a private line (anonymous) or through the agency phone at (573) 888-6545. You may leave your name and number or, if you choose, you may remain anonymous. Anonymous reports are difficult to investigate, but we will do all that we can to investigate anonymous reports.
3. Report the incident, **by mail**, to the Chief Compliance Officer. Please send your report to:
FCC Behavioral Health, Inc. ATTN: Chief Compliance Officer, 925 Highway V V, PO Box 71, Kennett, MO 63857.
Anonymous reports are difficult to investigate, but we will do all that we can to investigate anonymous reports.
4. Report the incident, **by email**, to the Chief Compliance Officer at compliance@fccinc.org. Anonymous reports are difficult to investigate, but we will do all that we can to investigate anonymous reports.

We appreciate your confidence in FCC Behavioral Health's reputation as a quality provider of behavioral health services to Southern Missouri since 1976. If there is anything that we can do to enhance the services our agency is providing to you, please do not hesitate to let one of our staff members know.

FCC BEHAVIORAL HEALTH

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.

FCC Behavioral Health is committed to providing quality healthcare services to you. An important part of that is protecting your medical information according to applicable law. This notice ("Notice") describes your rights and our duties under Federal Law, as well as other pertinent information. We are happy to answer any questions you may have regarding this Notice. Our staff will briefly review the key points contained herein once you have had an opportunity to read and sign. PHI includes any information that relates to (1) your past, present, or future physical or mental health or condition; (2) providing health care to you; and (d) the past, present, or future payment of your health care. FCC Behavioral Health participates in a clinically integrated health care setting which is considered an organized health care provider. Each entity within the agency's arrangements will be able to access and use your PHI to carry out treatment, payment, or health care operations. The terms of this notice shall apply to FCC Behavioral Health privacy practices until it is changed by FCC Behavioral Health.

DEFINITIONS

1. **Healthcare Operations.** "Healthcare Operations" means business activities that we engage in so as to provide healthcare services to you, including but not limited to, quality assessment and improvement activities, personnel training and evaluation, business planning and development, and other administrative and managerial functions.
2. **Payment.** "Payment" means activities that we undertake as a healthcare provider to obtain reimbursement for the provision of healthcare to you which include, but are not limited to: determinations of eligibility or coverage (including coordination of benefits or the determination of cost sharing amounts), and processing health benefit claims.
3. **Protected Health Information.** "Protected Health Information" or "PHI" means information which identifies you (e.g. name, address, social security number, etc.) and relates to your past, present, or future physical or mental health or condition; the provision of healthcare to you; or the past, present, or future payment for the provision of healthcare to you.
4. **Treatment.** "Treatment" means the provision, coordination, or management of healthcare and related services on your behalf, including the coordination or management of healthcare with a third party; consultation between FCC Behavioral Health and other healthcare providers relating to your care; or the referral by FCC Behavioral Health of your care to another healthcare provider.
5. **Appointment Reminders.** FCC Behavioral Health may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

YOUR PRIVACY RIGHTS

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

- **Get an electronic or paper copy of your medical record.** You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this. We will provide a copy or a summary of your health information, within 30 days of your request. We may charge a reasonable, cost-based fee.
- **Ask us to correct your medical record.** You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this. We may say "no" to your request, but we'll tell you why in writing within 60 days.
- **Request confidential communication.** You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will say "yes" to all reasonable requests.
- **Ask us to limit what we use and share.** You can ask us NOT to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and may say "no" if it would affect your care. 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.
- **Get a list of those with whom we've shared information.** You can ask for a list (accounting of disclosure) of the times we've shared your health information for six years prior to the date you ask, who we shared it with,

and why. We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We will provide accounting once a year for free, but will charge a reasonable, cost-based fee if you ask for another one within 12-months.

- **Get a copy of this privacy notice.** You can ask for a paper copy of this notice at any time, even if you have agreed to receive this notice electronically. We will provide you with a paper copy promptly.
- **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.
- **File a written complaint if you feel your rights are violated.** You may file a written complaint in one (1) of the following ways;

CONTACT FCC BEHAVIORAL HEALTH PRIVACY OFFICER AT:

HIPAA Privacy and Security Officer
925 Highway V V, Kennett, MO 63857
Email: shirleens@fccinc.org
Phone: (573) 888-5925; Ext: 1027

CONTACT THE OFFICER OF CIVIL RIGHTS AT:

United States Dept. of Health and Human Services
www.hhs.gov/ocr/privacy/hipaa/complaints/
Phone: (816) 436-7279

We will **NOT** retaliate or take action against you for filing a complaint.

YOUR CHOICES

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

I. In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care;
- Share information in a disaster relief situation;
- If you are not able to tell us your preference, for example, if you are unconscious, we may 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.

II. In these cases, we will never share your information unless you give us written permission:

- Marketing purposes;
- Sale of your information;
- Sharing of psychotherapy notes

FCC BEHAVIORAL HEALTH USES AND DISCLOSURES:

How do we typically use or share your health information? We typically use or share your health information in the following ways.

The following uses do **NOT** require your authorization, except where required by Missouri law.

- **Treat you.** We can use your health information and share it with other professionals who are treating you. For example: a doctor treating you for an injury asks another doctor about your overall health condition.
- **Run our organization.** We can use and share your health information to run our practice, improve your care, and contact you when necessary. For example, we use health information about you to manage your treatment and services.
- **Bill for your services.** We can use and share your health information to bill and get payment from health plans or other entities. For example, we give information about you to your health insurance plan so it will pay for your services.
- **In the case of fundraising.** We may use your PHI to contact you for fundraising efforts. We must include in any fundraising material you receive a description of how you may opt out of receiving future fundraising communications.
- How else can we use or share your health information? 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. For more information, see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html

Help with public health and safety issues. We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Conducting Research. We can use or share your information for health research.

Comply with the law. We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests. We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director. We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government request.

We can use or share health information about you:

- For workers' compensation claims;
- For law enforcement purposes or with a law enforcement official;
- With health oversight agencies for activities authorized by law;
- For special government functions such as military, national security, and presidential protective services;
- Respond to lawsuits and legal actions.

FCC BEHAVIORAL HEALTH RESPONSIBILITIES

- We are required by law to maintain the privacy and security of your protected 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. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

CHANGE IN NOTICE OF PRIVACY PRACTICES

FCC Behavioral Health reserves the right to change the terms of this notice, and the changes will apply to all information we have about you. The notice will be available upon request, in our office, and on our website.

QUESTIONS

If you have any questions about this notice or would like additional information, please contact the privacy official at the address and telephone number listed below or you may visit our web site at www.fccinc.org.

CONTACT INFORMATION

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your

CHIEF COMPLIANCE OFFICER

Tracy Ellis
925 Hwy V. V.; Kennett, MO 63857
Email: tracye@fccinc.org
Phone: (573) 888-5925

PRIVACY AND SECURITY OFFICER

Shirleen Sando
925 Hwy V. V.; Kennett, MO 63857
Email: shirleens@fccinc.org
Phone: (573) 888-5925 Ext. 1027

FCC BEHAVIORAL HEALTH

FINANCIAL POLICY



Thank you for choosing our Agency as your health care provider. We are committed to your treatment being successful. Please understand that payment of your bill is considered a part of your treatment. The following is a statement of our Financial Policy, which we require you to read prior to any treatment. All person(s)-served must complete our Admission and Insurance Form before seeing a doctor/counselor.

**PAYMENT IS DUE AT THE TIME OF SERVICE.
WE ACCEPT CASH, MONEY ORDERS, CASHIER CHECKS, CHECKS,
etc. SORRY NO CREDIT CARDS.**

DBH PERSON(S)-SERVED:

Regarding Department of Mental Health Standard Means Form (Partial Fee):

FCC Behavioral Health abides by the policy set forth by the State of Missouri. The policy states that the Standard Means must be done on all Missouri residents in our catchment area to determine if they have the ability to partially pay for treatment (the first days of treatment each month, then the State will pay the rest). If an ability to pay is found, the Partial Fee is due upon admission of the person(s)-served and on every month thereafter.

EX: person(s)-served admission 2-28-04, fee \$300.00, person(s)-served discharge 3-1-04, fee \$300.00, Balance Due \$600.00.

The policy also states that the PARTIAL FEE NOT EXCEED CHARGES for any one (1) month.

EX: If person(s)-served has a Partial Fee of \$300.00 per month, but has only accumulated \$100.00 worth of services, then your Partial Fee would be \$100.00 instead of \$300.00 for that month. Only one (1) Partial Fee can be charged per family, please notify us if any other family members are being treated at any DBH facility in Missouri.

NON-DBH PERSON(S)-SERVED:

Regarding Insurance:

All co-pays and deductibles are due at the time of treatment. The balance of charges due is your responsibility, whether your insurance company pays or not.

Usual and Customary Rates:

FCC Behavioral Health is committed to providing the best treatment for our person(s)-served and we charge what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates.

Regarding Insurance Information:

FCC Behavioral Health will accept assignment of insurance benefits. However, we cannot bill your insurance company unless you provide us with your insurance information.

Regarding Failure to Pay: FCC Behavioral Health may take action to collect any unpaid amounts.

Minors: The Parent/Guardian accompanying a minor is responsible for payment.

Thank you for understanding our Financial Policy. Please let us know if you have any questions or concerns.

FCC Behavioral Health's billing department can be reached at (573) 888-9525

FCC BEHAVIORAL HEALTH **GRIEVANCE POLICY AND PROCEDURE**



As a person(s)-served of FCC Behavioral Health, you have the right to be given basic information regarding how complaints and grievances are addressed.

1. FCC Behavioral Health provides you with a means of expressing and resolving complaints or appeals.
2. If you, or your family, have a grievance, you should inform the staff, or the site's Clinical Manager. You may discuss your concerns with the Clinical Manager at your convenience. If the grievance cannot be resolved with the staff, you may request a meeting with the site's Program Director. This will be scheduled at an agreed upon time by both parties.
3. If the grievance cannot be resolved with the staff, you, or your family member, you can complete the agency Complaint/Grievance Form and submit to the

FCC Behavioral Health
Chief Compliance Officer
PO Box 71, Kennett, MO 63857
OR Email complaint to compliance@fccinc.org
OR call toll free number (800) 455-2723

This form can be obtained from program staff upon request.

4. The written grievance will be handled in the following manner:
 - The department program director will be informed of the grievance.
 - You, or your family, will receive a response concerning the grievance from the Chief Compliance Officer within five (5) working days.
 - If you or your family is dissatisfied with the response, a meeting can be arranged within three (3) working days with the Chief Executive Officer and the appropriate staff.
 - The final disposition for grievances rests with the Chief Executive Officer.
 - If you are still dissatisfied with the response obtained in the above stated manner, the Chief Executive Officer will assist you with contacting the Consumer's Rights Monitor at the Department of Behavioral Health (DBH).

Consumer Rights Monitor

*Department of Behavioral Health
P.O. Box 687
Jefferson City, Mo 65102
1-800-364-9687*

MENTAL HEALTH CLINICS

DISASTER PLAN

FIRE: Exit the building through the NEAREST and SAFEST available EXIT.

NOTE: Fire exits and location of fire extinguishers are clearly marked throughout the facility. Never use the elevator in any type of evacuation, ALWAYS use stairs.

Fire safety and evacuation drills are conducted on a regular basis.

NOTE: ASSEMBLY AREA:

Follow directions of Staff Members located at your site during any type of emergency and/or drill.

For further information seek guidance from Staff or look for Emergency Evacuation Plan located throughout the facility as well as in your Handbook given to you upon admission

TORNADO:

All Staff Members on duty shall escort all person(s)-served and visitors to a safe and secure location away from windows and wait for instructions from staff and/or emergency personnel. If time does not allow, escort person(s)-served and visitors to the nearest main hallway. (*Refer to the Emergency Evacuation Plan located throughout the facility*)

EARTHQUAKE:

Take cover under sturdy furniture (desk, flipped couch, etc.) or supported doorway.

STORM:

Stay in building and away from windows.

FLOOD:

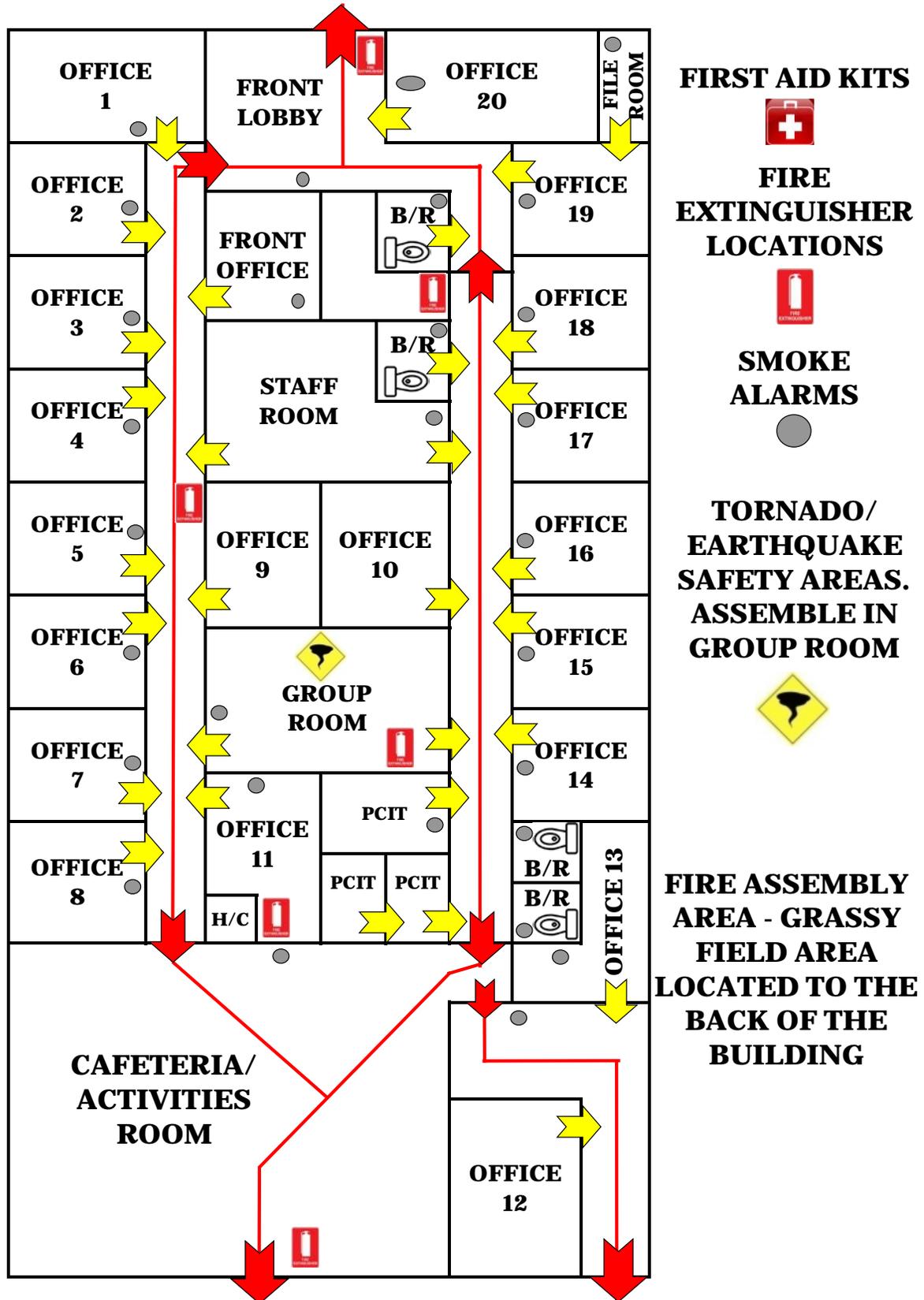
Stay in building and do not attempt to travel in your vehicle.

BOMB:

Exit the building through the NEAREST and SAFEST available exit. Meet in the assembly area, away from the route of emergency personnel/vehicles.

NOTE: DO NOT for any reason use a cellular telephone or any other electronic device, until given the clear from emergency personnel.

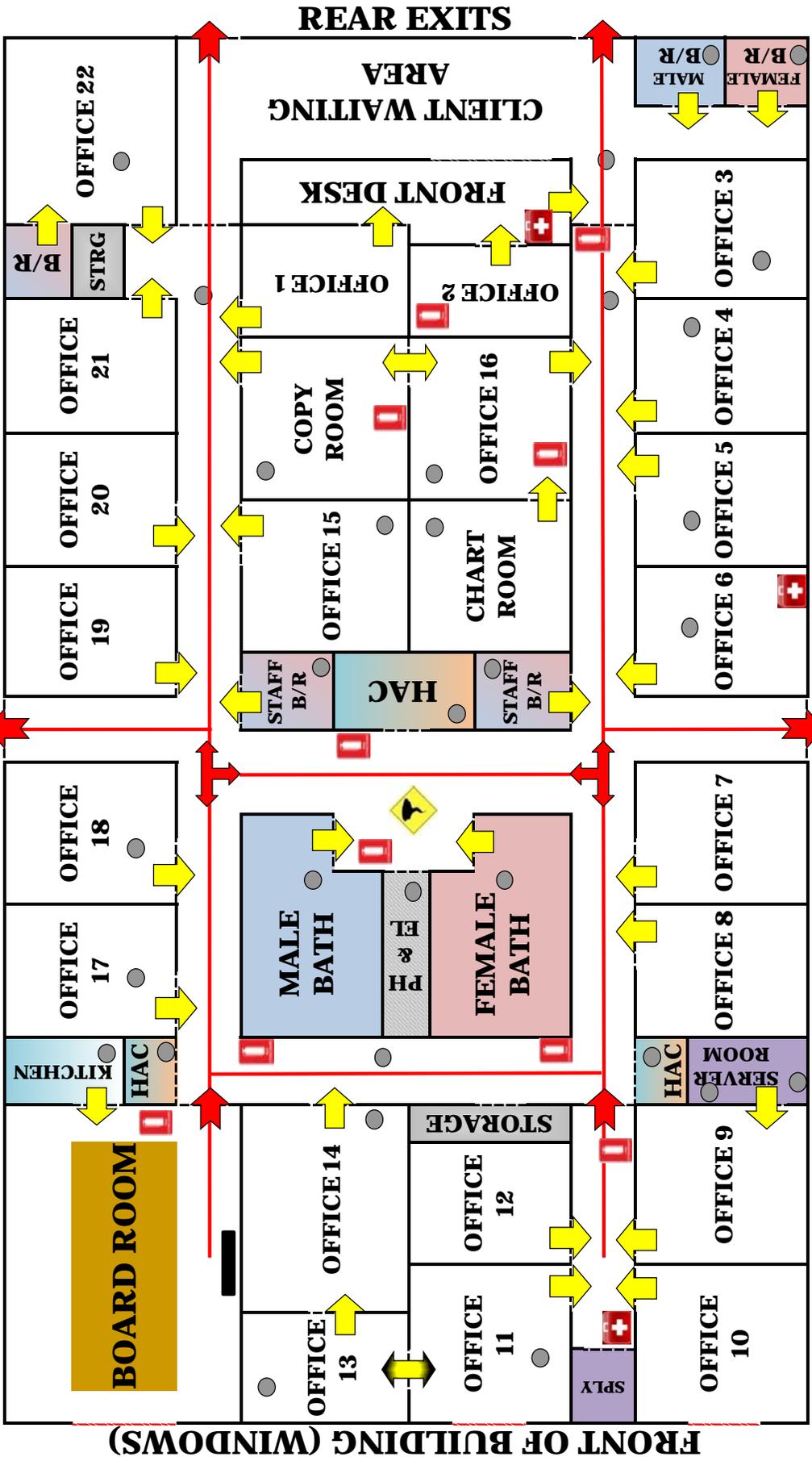
OUTPATIENT AND YOUTH MENTAL HEALTH



*****BACK OF BUILDING*****

**FIRE - EXIT BUILDING AT SAFEST EXIT
(MARKED IN RED)**

KENNETT ADMIN I

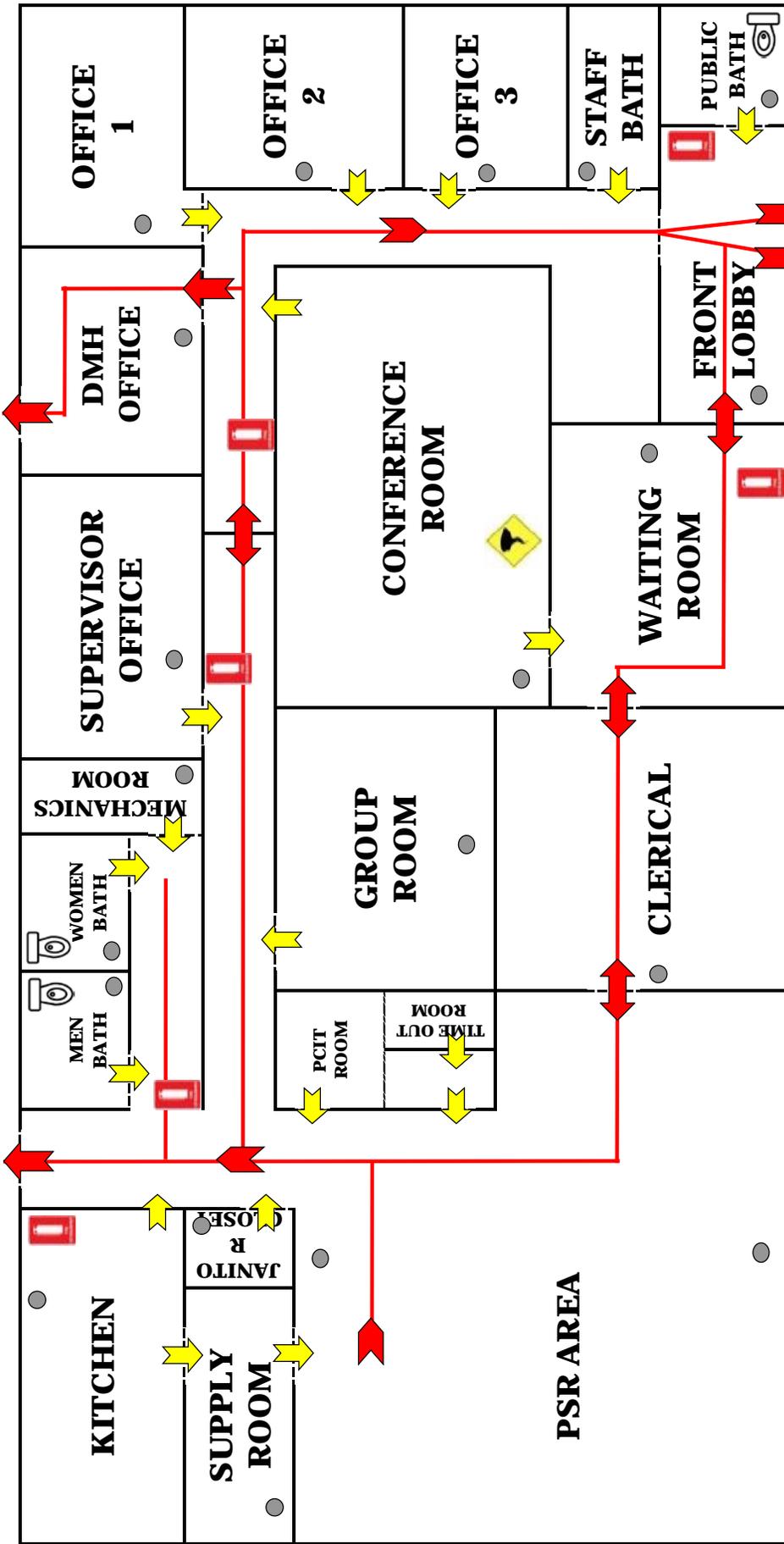


FRONT OF BUILDING (WINDOWS)

REAR EXITS

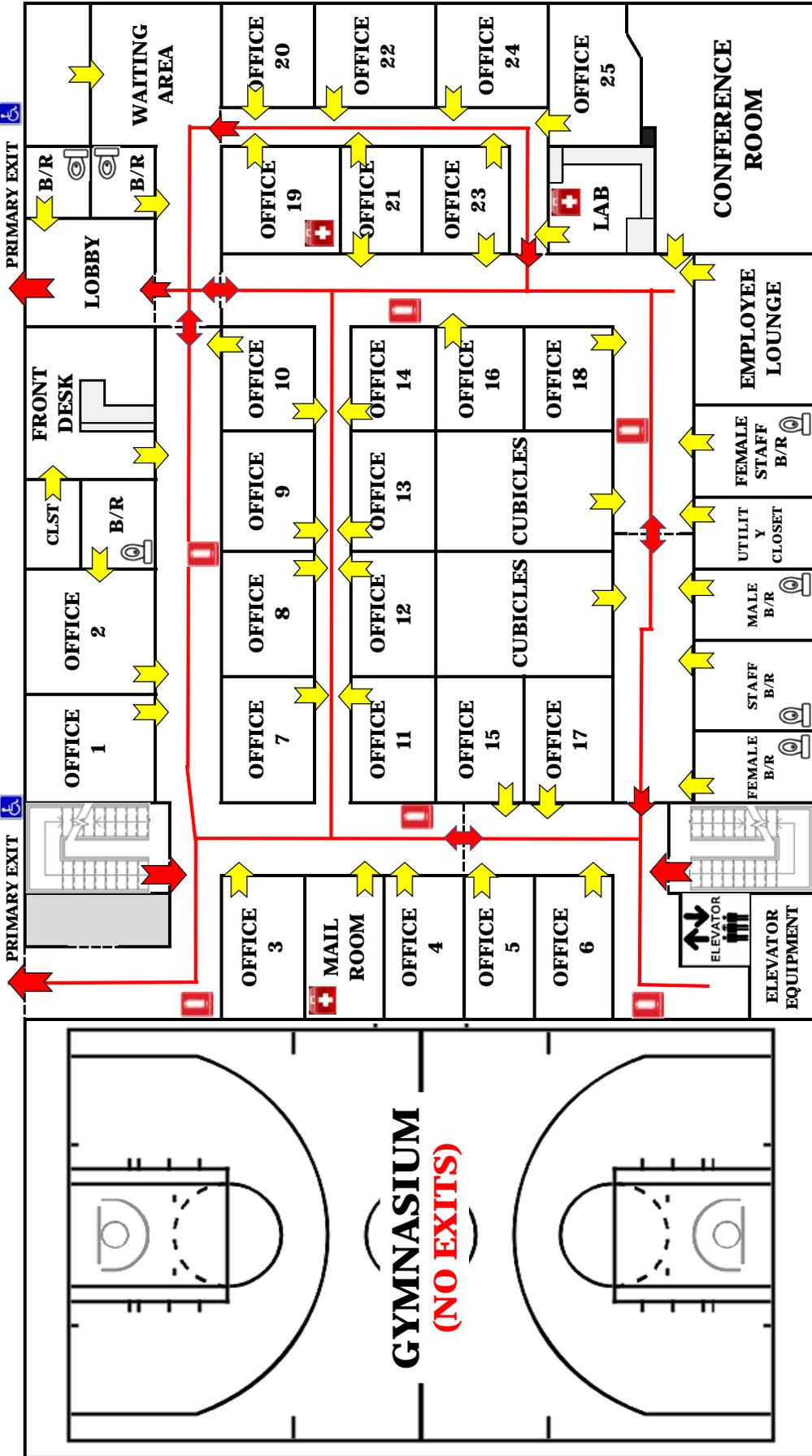
- + FIRST AID KITS
- + FIRE EXTINGUISHER LOCATIONS
- + FIRE - EXIT BUILDING AT SAFEST EXIT (MARKED IN RED)
- ◆ TORNADO/EARTHQUAKE SAFETY AREAS
- SMOKE ALARM LOCATIONS
- FIRE ASSEMBLY AREA - PARKING LOT REAR OF BUILDING
- EARTHQUAKE - UNDER ANY STURDY FURNITURE OR DOOR FRAMES

CARUTHERSVILLE EVACUATION PLAN



-  FIRST AID KITS
-  FIRE EXTINGUISHER LOCATIONS
-  SMOKE ALARM LOCATIONS
-  TORNADO/EARTHQUAKE SAFETY AREAS
-  FIRE - EXIT BUILDING AT NEAREST AND SAFEST EXIT (**MARKED IN RED**)
-  FIRE ASSEMBLY AREA - PARKING LOT FRONT OF BUILDING
-  EARTHQUAKE - UNDER ANY STURDY FURNITURE OR DOOR FRAMES

POPLAR BLUFF (UPSTAIRS) EVACUATION PLAN



- FIRST AID KITS
- FIRE EXTINGUISHER LOCATIONS
- TORNADO/EARTHQUAKE SAFETY AREAS

FIRE - EXIT BUILDING AT NEAREST AND SAFEST EXIT (MARKED IN RED)

FIRE ASSEMBLY AREA - PARKING LOT FRONT OF BUILDING

