

CLIENT COPY

NEW PERSPECTIVE CENTER for Counseling and Therapy

(503) 316-6770

WELCOME

We at New Perspectives welcome this opportunity to assist you in your desire to resolve your problems through counseling. You will be encouraged to clarify your options and make choices that will increase your personal satisfaction and enhance your physical, mental, and emotional health.

APPOINTMENTS

First time appointments will be scheduled with the business office and follow-up appointments will be scheduled by the provider. The appointments usually last 50 minutes for counseling and 30 minutes for medication management. Please be approximately 15 minutes early for the initial appointment to fill out paperwork, and please bring any insurance information at that time, including ID and group numbers.

FEES

Counseling fees per session are:

Initial Session	\$200.00	Over 53 minutes	\$205.00
16-37 minutes	\$ 99.00	Group Sessions	\$ 60.00 per group
38-52 minutes	\$135.00	Couples/Family Counseling	\$175.00 per 50 min.

Medication Management fees

Initial Session- \$390.00

Ongoing fee to see a prescriber will vary depending on time spent and services provided

NO SHOW / LATE CANCEL FEE \$35.00 ----- NSF / BOUNCED CHECK FEE \$20.00

Except for Oregon Health Plan Clients:

Phone consultations with the therapists are billed at \$35.00 per 15 min. and are not billable to your insurance company. Case Management fees are billed at \$34.00 per 15 min. and are not billable to your insurance company.

YOU ARE RESPONSIBLE FOR THE PAYMENT OF ALL CHARGES INCURRED. Our policy is that we request payment at the time of the session. We are happy to assist you by billing your insurance company on your behalf. You will receive a monthly statement of your account, and prompt payment of any outstanding balance is requested.

If you are on the Oregon Health Plan

As long as Oregon Health Plan coverage is in place, individuals are not responsible for fees incurred during that time but are responsible for any charges incurred if coverage is lost. If you are an Oregon Health Plan individual and your coverage is terminated, New Perspectives Center will work with you to assist you in finding alternative resources for coverage and identifying if any other financial assistance programs are available. However, we cannot promise that another insurance program will be available or that we can continue to see you.

CANCELLATIONS

Cancellations require a full 24-hour notification so that we have an opportunity to reschedule that time slot. If this is not observed, you will be charged \$35.00 for the session (except OHP Clients), **and your insurance cannot be billed for that charge.** If three (3) scheduled appointments are missed without 24-hour notice, New Perspectives Center reserves the right to terminate services. Please ask if you have questions regarding this policy, as we do enforce it.

LEAVING MESSAGES BY PHONE

Offices hours are 9am to 5pm, Monday through Friday. **Our answering machine operates 24 hours a day**, so you can leave a message at night, on weekends or holidays, or even during the workday should we be unavailable to answer the phone.

DECLARATION FOR MENTAL HEALTH AND ADVANCED DIRECTIVES

You can make choices about and plan for a time when you may be unable to make your own health and mental health treatment decisions by completing a Declaration for Mental Health Form and/or Advanced Directives Form. Please talk to your therapist if you are interested in receiving more information on this process.

SPECIAL REQUESTS

Fragrances – All Offices: Many people have mild to severe reactions to perfumes and other fragrances, so we ask that you refrain from wearing perfumes or colognes when visiting New Perspectives.

EMERGENCY NUMBERS ON OTHER SIDE.

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EMERGENCY CONTACTS

**IN THE EVENT OF AN EMERGENCY and you need immediate assistance, please call 911
or**

AFTER HOURS – WEEKENDS – HOLIDAYS

If you need to speak to your therapist, nurse practitioner or the therapist on-call regarding a non-life-threatening emergency, you may contact them through the after-hours number that they provided to you in session.

If you are unable to contact your therapist during normal office hours, please give our administrative office a call at: 503-316-6770

OTHER EMERGENCY NUMBERS

Psychiatric Crisis Center	503-585-4949
Northwest Human Services 24-hour crisis hotline	503-581-5535
Bridgeway Detox	503-399-5597
Marion County Drug Treatment	503-588-5358
Marion County Youth & Family Crisis Services	503-576-4673
Center for Hope & Safety	503-399-7722

Thank you,

New Perspectives Staff

NEW PERSPECTIVES CENTER
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NEW PERSPECTIVES CENTER SUGGESTED CLIENT GUIDELINES

As in anything new, there are inherent risks in a treatment relationship. Due to the intense nature of self-evaluation and awareness, clients typically experience a range of emotions coupled with periods of imbalance. These periods can lend themselves to states of confusion and disorganization. However, as in any growth process, the ups and downs usually balance out.

If you choose not to seek treatment or outside assistance, you may find that doing nothing results in no change of your condition or behavior.

You deserve to have a healthier, happier, more functional life. Working together, recovery and better health is possible. You will gain the maximum benefit from our program if you are open, honest, and willingly participate in individual and/or group therapy.

Here are some hints for successful individual and group sessions:

- Stay open to the process
- Be aware of what you are feeling
- Share your trauma history with your provider
- Know that some of the issues/topics that you will deal with may bring up old or forgotten trauma events/issues
- Share your feelings with your therapist or nurse practitioner or group members
- Complete journal and writing assignments; denial has a difficult time surviving in writing
- Ask questions (there are no dumb questions)
- Have the courage to change

Also note...

New Perspectives prescribes and treats addictions under the "Disease Concept Model". Therefore, in most cases, gradual abstention from the activity or substance is required.

Chemically dependent clients may be helped in safeguarding their recovery with random monitored urine analyses.

Continued chemical use, or continued addictive or abusive practices will result in a staff review of your treatment program.

If the aforementioned guidelines are not followed for you to achieve maximum benefit from the treatment, then you and/or your therapist may decide to delay or terminate services. In that case, a referral would be given to you. Or, we will wait until you would like to re-engage.

Alternative support or treatment may be sought through self-help groups, books, clergy, spiritual counselors, physical activities, medication and other forms and styles of therapy.

Our services are designed to assist you during this process so that you can achieve the outcome(s) that you desire.

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INDIVIDUAL'S RIGHTS

New Perspectives Center supports and protects the fundamental human, civil, constitutional and statutory rights of each individual. Every individual will be treated with dignity, hope and respect. Our agency provides each individual with a copy of their rights.

The following is a list of Individual's Rights:

1. Individuals have the right to admission to the treatment center without regard to race, religion, gender, ethnicity, age, AIDS, handicap, national origin or duration of residence;
2. Each individual has a right to receive care provided by a medical/clinical staff member that is competent, qualified and experienced.
3. You have the right to choose from available services and supports, those that are consistent with the assessment and service plan, culturally competent, provided in the most integrated setting in the community and under conditions that are least restrictive to your liberty, that are least intrusive to you and that provide for the greatest degree of independence;
4. You have the right to be treated with respect and dignity;
5. You have the right to participate in the development of a written service plan, receive services consistent with that plan and participate in periodic review and reassessment of service and support needs, assist in the development of the plan and receive a copy of the written service plan;
6. You have the right to have all services explained, including expected outcomes and possible risks;
7. You have the right to confidentiality and the right to consent to disclosure in accordance with ORS 107.154, ORS 179.505, ORS 179.507, ORS 192.515, ORS 192.507, 42 CFR, part 2 and 45 CFR Part 205.50;
8. You have the right to give informed consent in writing prior to the start of services, except in a medical emergency or as otherwise permitted by law. Minor children may give informed consent to services in the following circumstances:
 - Under age 18 and lawfully married;
 - Age 16 or older and legally emancipated by the court; or
 - Age 14 or older for outpatient services only
9. You have the right to inspect your service record in accordance ORS 179.505; Individuals have the right to access copies of their records within 10 working days upon written request;
10. You have the right to refuse participation in experimentation;

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INDIVIDUAL'S RIGHTS (Continued)

11. You have the right to receive medication specific to your diagnosed clinical needs, including medications used to treat opioid dependence;
12. You have the right to receive prior notice of transfer, unless the circumstances necessitating transfer pose a threat to health and safety;
13. You have the right to be free from abuse or neglect and to report any incident of abuse or neglect without being subject to retaliation;
14. You have the right to have religious freedom;
15. You have the right to be free from seclusion and restraint;
16. You have the right to be informed from the start of services, and periodically thereafter, of the rights guaranteed by this rule;
17. You have the right to be informed of the policies and procedures, service agreement and fees applicable to the services provided, and to have a custodial parent, guardian, or representative, assist with understanding any information presented;
18. You have the right to have family and guardian involvement in service planning and delivery;
19. You have the right to have an opportunity to make a declaration for mental health treatment when legally an adult;
20. You have the right to file grievances, including appealing decisions resulting from the grievance;
21. You have the right to exercise all rights set forth in ORS 109.610 through 109.697 if the individual is a child, as defined by these rules
22. You have the right to exercise all rights set forth in ORS 426.385 if the individual is committed to the Authority
23. You have the right to exercise all rights described in this rule without any form of reprisal or punishment.
24. You have the right to refuse treatment (unless court ordered);

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Individual's Grievance Procedure

To be distributed to individuals on their first visit.

- A. Any individual or parent or guardian receiving services may file a grievance with the provider, the individual's coordinated care plan, or the Division.
- B. Any complaint/grievance which is not mutually resolved between individuals or between individuals and staff shall be communicated to any staff member of New Perspectives Center either in writing or orally so that it can be reduced to a clear, concise written report. This will be given to the Complaints Officer to be logged in the Complaints Log.
- C. In response to receipt of such written complaints/grievances, the Complaints Officer and/or Executive Director shall immediately investigate and will try to complete the process in 5 working days. If more time is needed, the individual will be notified in writing. We will inform the individual of reason why and how much more time is needed to resolve the issues. The longest amount of time for the complaint process is 30 calendar days following receipt. This will be recorded in the Complaint Log and a file will be kept of all complaints received for 2 years.
- D. Appeals: Individuals and their legal guardians, as applicable, have the right to appeal entry, transfer and grievance decisions as follows:
- If the individual or guardian, if applicable, is not satisfied with the decision, the individual or guardian may file an appeal in writing within ten working days of the date of the program administrator's response to the grievance or notification of denial for services as applicable. The appeal must be submitted to the CCO that covers that area/region where the provider is located or to the Health Systems Division (HSD) as applicable;
 - If requested, program staff must be available to assist the individual;
 - The CCO or Division (HSD), must provide a written response within ten working days of the receipt of the appeal; and
 - If the individual or guardian, if applicable, is not satisfied with the appeal decision, they may file a second appeal in writing within ten working days of the date of the written response to the Director.
- E. A grievant, witness, or staff member of a provider may not be subject to retaliation by a provider for making a report or being interviewed about a grievance or being a witness. Retaliation may include but is not limited to dismissal or harassment, reduction in services, wage, or benefits, or basing service or performance review on the action. The grievant is immune from any civil or criminal liability with respect to the making or content of grievance made in good faith.

Individual's Grievance Procedure
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F. Individual and their legal guardian may appeal entry, transfer, and grievance decisions as follows:

- If the individual or guardian is not satisfied with the decision, the individual or guardian may file an appeal in writing within ten working days of the date of the program administrator's response to the grievance or notification of denial for services. The appeal shall be submitted to the Division.
- If request, program staff shall be available to assist the individual;
- The Division shall provide a written response within ten working days of the receipt of the appeal; and
- If the individual or guardian is not satisfied with the appeal decision, they may file a second appeal in writing within ten working days of the date of the written response of the Division Director.

PacificSource Community Solutions	541-382-5920
Division of Medical Assistance Programs (DMAP)	1-800-273-0557
Disability Rights of Oregon	503-243-2081 or 1-800-452-1694
Governor's Advocacy Office	503-945-6904
Health Systems Division	503-945-5763

*Complaint Form Included for reference