



Bill of Client Rights

A. Taking part in treatment decisions

You have the right to know your treatment options and take part in decisions about your care. Parents, guardians, family members, or others that you choose may speak for you if you cannot make your own decisions.

B. Respect and non-discrimination

You have a right to considerate, unbiased, and respectful care from your counselors and health plan representatives.

C. Confidentiality (privacy) of health information

You have the right to talk privately with your counselor and to have your health care information protected.

Please understand that confidentiality can be breached under these circumstances:

1. Suspected or factual child abuse/neglect
2. Suspected or factual elder abuse/neglect
3. Threat to harm others or self
4. If subpoenaed before a judge in a court of law

D. Complaints and appeals

You have the right to a fair, fast and objective review of any complaint you have against your counselor or mental health care plan. HUGS' Managing Director, Andrea Epting, will hear any complaints or appeals you may wish to present.

E. Consumer responsibilities

As a HUGS' client, you should expect to take on some responsibilities as addressed in your treatment plan. Having clients actively involved in their care increases the chance of the best possible outcome.

Clients are expected to treat their counselors with respect. Clients should respect the counselor's time...understanding that payment is required for missed appointments without 24 hour cancellation.

F. Termination of services

You have the right to consent or to refuse services and/or terminate treatment at any time.

Please be informed that the HIPPA complaint procedures on the following page may not apply, as Heads Up Guidance Services does not accept insurance or reimbursement from third party payers, and HUGS does not share information with third party payers.

Under the Health Insurance Portability and Accountability Act (HIPAA), consumers have the right to:

- Receive a privacy notice to inform them about how protected information will be used and disclosed;
- Request that uses and disclosure of protected information be restricted (covered entities are not required to always agree to restrictions);
- Inspect, copy and amend their medical records (providers are allowed to charge a reasonable fee for copying expenses);
- Get an accounting of the disclosure of their protected information for the past six years; and
- File a complaint.

Frequently Asked Questions (FAQs) about Client Rights

Q: Can individuals bring a private cause of action against a covered entity?

A: No. A private cause of action is not authorized by the Rule.

Q: Are there other actions an individual can take to file a complaint against a covered entity's failure to comply with the regulation?

A: Individuals can file a complaint against covered entities that they believe have not complied with the regulation. The complaint should be filed with the U.S. Department of Health and Human Services (DHHS).

1) The complaint *must*:

- A. Be filed within 180 days of when the complainant knew that a violation had occurred (unless the Secretary of DHHS waives time limit for good cause);
- B. Be written and submitted via U.S. postal mail or electronically; and
- C. Include the name of the covered entity and a description of the alleged relevant violations.

2) The covered entity *must*:

- A. Provide compliant records and compliance reports to DHHS; and
- B. Cooperate with complaint investigations and compliance reviews.

OTHER RESOURCES: Want more information about HIPAA laws?

- U.S. Department of Health and Human Services, Office for Civil Rights:
<http://www.hhs.gov/ocr/hipaal>
- U.S. Department of Health and Human Services, Administrative Simplification:
<http://aspe.hhs.gov/admsimpl/index.htm>