



CLIENT HANDBOOK

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B. Welcome

We are pleased that you have chosen Milestone Counseling as your provider for mental health services. We want you to become familiar with our treatment philosophy and our practice guidelines.

C. Our Organizational Commitment

1. Mission Statement

The mission of Milestone Counseling is to build healthy communities and improve the quality of life of individuals and families. We strive to achieve our mission by providing affordable quality mental health interventions and prevention services delivered with care and respect through a network of highly trained professional clinicians in a warm and accepting environment. We take pride in our ability to instill hope, changing lives, and promote resilience in the people we serve.

2. Vision Statement

Milestone Counseling will be recognized as the leading provider of high quality, mental health intervention services to individuals and families throughout Central Florida.

3. Goals & Values

Milestone Counseling, Inc.'s goal is to establish a business that serves the community with the best possible mental health services in a warm and friendly environment that feels like home. Milestone aims to provide unprejudiced services to any current and potential clients. We believe in providing a safe atmosphere for our clients and staff members. As a business, we aim to incorporate our mission and vision into all our interactions. We aim to provide an environment in which both staff and clients can work and interact openly and safely with no form of discrimination. Milestone Counseling, Inc. is an equal rights organization that works for the best of the client and only makes decisions with the clients and community in mind.

D. About Us

The vision for Milestone was born in the hearts of Valarie and Geron Rogers while they were still in school preparing for their work in the mental health field. Two factors drove their passion to build Milestone. Both had experienced numerous traumatic experiences in their lives and had always

recognized the value of family in the pursuit of living a fulfilled life. There the vision to work with individuals and their families, especially children, to face their challenges and heal was born.

In 2010 they were given the opportunity to work with a local church who had become overwhelmed with counseling related needs. From that one tiny office Milestone has grown significantly and now serves our community from a 7,500 square foot facility that has allowed us to expand by not only serving more clients, but also offering a growing number of related services.

Milestone currently serves our community with 13 highly qualified and experienced clinicians and provided over 8,000 face-to-face hours to clients in 2017. With state of the art facilities to deliver services to children, families, and adults, Milestone stands prepared to enter an exciting new era in the delivery of premium quality services to current and potential clients.

E. Purpose of Handbook

The purpose of this handbook is to give you, the client, an overview of how Milestone Counseling functions, as well as the rights you have as a client. We wish for you to be fully informed so that any concerns or questions you have may be met with a proper answer and response. Should you have any concern or inquiry at any point during the reading and receipt of this handbook, please feel free to speak with any of our staff members and we will be glad to assist you.

4. Our Definitions

- **Client** is the person receiving services.
- **Appointment** is the time that Milestone Counseling has set aside to provide services to you.
- **Confidentiality** is the personal information that needs to be kept private, not discussed or shared with others in any way.
- **Informed consent** means that you or your legal guardian will know exactly what you are agreeing to do.
- **Confidential information** is all the information that you provide to us in order to treat you.
- **Treatment plan** are the activities and tasks that you, your family and the Milestone Counseling staff agrees that must be achieved to reach your goals.

F. How to Become Engaged in your Treatment

Milestone Counseling has committed staff and resources to help you achieve goals that you set for you and/or your family. Your desire to reach the goals

you have set is the key to success. Be honest about what you want to do and the things that prevent success. This is the time to fully use the helpful services Milestone Counseling provides to make the changes in your life.

You must avoid behaviors that are not good for your health or the health of others. Things like drugs, alcohol and violence are not good for your health or those around you. At Milestone Counseling, we care about you, as well as our staff.

G. Client Rights and Responsibilities

Milestone adheres and complies with the information spelled out in Section 381.026 of the Florida Statutes concerning patient rights and responsibilities. That information is presented below for your convenience.

Patient Rights:

- To be treated with courtesy, dignity, and respect and without regard to race, sex, religion, or handicap.
- To understand the availability of services they need, what services they will be using, and agency expectations and rules for their using of those services as well as clients basic responsibilities.
- To receive high quality service, delivered in a competent ethical manner.
- Be listened to and have staff work with you to make a plan to address your concerns and needs.
- Receive service in an office environment that is safe, clean and accessible.
- Get information and support to help you make decisions to improve your situation.
- To expect that the agency will comply with all laws which protect clients from abuse, neglect, or exploitation.
- Be served without discrimination.
- To have their rights to confidentiality respected (in the office and community) and upheld within the limits of the law, and to provide informed consent when information is released to another organization or individual outside of the agency.
- To participate in the formulation of and to understand the service plan/treatment plan.
- To understand rules related to the discontinuation of service
- To refuse service, unless those rights have been limited by law or court order, and to be informed of the consequences of such refusal.
- To file a grievance.

- Request a change of clinician if you feel that the person assigned to your care is unable to properly address your issues. No changes will be honored if it is identified that your request may be discriminatory in nature or that your request is not clinically appropriate.

Patient Responsibilities:

- Arrive on time, on the day and time of your appointment.
- To contact Milestone Counseling if there is a need to cancel, reschedule an appointment, preferably within 24 hours. After three consecutive missed appointments, counseling services may be discontinued.
- To pay for their service when due, unless other arrangements have been made in advance. Fees and co-payments are collected before each session.
- To supply complete and accurate information that is reasonably requested in order to be accepted for service, and needed to develop a treatment plan.
- Be courteous and respectful while at the office with staff, and other patients and guests.
- Understand the importance of appropriate dress when attending sessions.
- To comply with all reasonable rules, policies and requests.
- To respect the confidentiality of others receiving services.
- To carry out agreed-upon provisions of their treatment plan.
- To refrain from activity which threatens or endangers any other client, or individual associated with the agency, such activity could be a cause for discontinuation of services.
- Not to enter Milestone Property with any type of weapons, drugs and/or illegal substances.
- Participate and comply with your treatment plan.

H. Milestone Counseling, Inc. Rights and Responsibilities

Milestone Rights:

- To serve our patients/clients according to staff and program availability, to set up a waiting list when people needing services are more than a program's capacity.
- To provide our patients/clients with information about other agencies that provide similar services if our programs are full.
- To deny services, whether on a short or long term basis, to anyone who threatens the health or well-being of others or who does not meet his/her obligations with their treatment.

Milestone Responsibilities:

- To offer high quality services and schedule appointments and/or activities that are helpful to you. It is our intention to provide you with services that are accessible and as convenient as possible.
- To protect your privacy/confidentiality except when required by law if you become a threat to self or others and if abuse and/or neglect are suspected.
- To include your ideas and assist our patients/clients in setting up and carrying out your treatment plan.
- To hire qualified clinical staff.
- To provide services in a safe and clean environment.
- To report any suspicion of abuse or neglect.
- To initiate an involuntary hospitalization in the event that it is identified that a patient receiving services presents an immediate danger to themselves or others.

I. Privacy & Confidentiality

At Milestone, protecting your privacy is a primary concern. As licensed/registered providers within the State of Florida we are required to guard your information and adhere to the guidelines set forth in the Laws, Rules, and Statutes set forth in Florida legal codes. Milestone must also adhere to Federal HIPPA legislation enacted to offer an additional layer of protection for clients' information. Additionally, all Milestone Providers must adhere to the ethical code of conduct within their professional association.

Therefore, sometimes we must deny affirmation and/or denial of services when inquiries and/or requests are made by family members, attorneys, advocates, or benefactors. While these efforts may sometime present an inconvenience Milestone's philosophy is to operate with an abundance of caution where our clients' services and/or information is concerned.

However, there are exceptions to State and Federal privacy practices.

Following is a list of those exceptions.

- If we believe that an individual is a danger to themselves we are required to break confidentiality in order to protect that individual.
- If we believe that a client presents a danger to another individual we are allowed by law to break confidentiality in order to protect, without fear of consequences for that breach.
- If we believe that a person under the age of 18 or anyone that qualifies as a "vulnerable adult" under Florida law we are required to break confidentiality in order to protect that individual.

- If we are ordered to testify, communicate and/or present documentation by a judicial authority or a qualified representative of the Florida Department of Children and Families.
- If we are given permission, in writing, by the client or the client's legal representative to release, report, or communicate with an appropriate professions. *Please note, there are exceptions in the case of parents involved in litigation. Also note, that Milestone will NOT release physical records without a court order specifically demanding those records. Milestone will, however, provide a report in lieu of records when appropriate.

J. Request for Release of Patient Information

If Milestone Counseling needs confidential information from another agency or provider, a Milestone Counseling staff member will:

5. Types of Request Forms

- Authorization to Release or Obtain Confidential Information:
Utilized when communication is requested to or from another provider of services.
- Authorization for Release of Information to Non-Medical Individuals:
Utilized when the client or guardian wants to allow a family member or other individuals to represent them in any specific area.

*Any information not produced or generated by us must be requested directly to the original source. We are not allowed to release information we have received by third parties.

K. Patient Grievances/Concerns

Milestone Counseling wants to work with you to find solutions to problems when they happen. We seek solutions that both you and the agency will find satisfactory.

You, your family, your guardian, or primary caretaker has the right to submit a grievance or concern if you are not satisfied with the service or decisions made by a Milestone Counseling staff member. The staff member and/or their supervisor will make every effort to resolve your problem. In the event that a solution is not found, you or your representative is encouraged to provide your concern in writing. It should contain:

- The name of the staff person involved or taking the concern
- Date of the concern,
- Nature of the complaint
- Desired outcome

The written grievance will be given to the Program Supervisor for review in order to find a reasonable solution. The medical director and/or administrator will review all the grievances or concerns in order to determine whether any changes to our process need to be implemented.

L. Notice of Milestone Counseling Privacy Practices

This information notice indicates how medical information received is used, and disclosed, and how you can get access to it. The Notice of Privacy Practices are prominently displayed in our waiting area. You may request a copy from our front desk staff.

M. Client Rights to Review Their Medical Information

In the state of Florida, mental health records (i.e. progress notes) are considered property of the therapist and are only produced pursuant to the following requests; judge's order, insurance company request, Social Security Administration request, Department of Children and Families request, or request from a court appointed Guardian Ad Litem. Any review of records must be done with the therapist present and in the context of a therapeutic session.

N. Client Satisfaction and Quality Improvement

We provide quality services for our clients, and are constantly working towards improving our services. We want to know if our clients are satisfied with our services. You can provide comments or suggestions through our Patient Survey Form which is located at our front desk. We encourage our patients who are satisfied with our service to like us on Facebook and give us your comments.

Should you have any grievances, concerns or recommendations about our service you can also speak to the area supervisor in order to reach a speedy resolution.

O. Important Phone Numbers & Community Resources

These are some important telephone numbers. Please refer to the Community Resource Guide for a more comprehensive list of agencies and services.

LIFESTREAM BEHAVIORAL HOSPITAL.....	352-315-7800
CENTRAL FLORIDA BEHAVIORAL HOSPITAL.....	407-370-0111
LAKE SUMTER CHILDREN'S ADVOCACY CENTER.....	352-323-8303
REPORT ABUSE -	1-800-96-ABUSE (22873)
FLORIDA ADVOCATE -	954-713-3071
DCF SUBSTANCE ABUSE AND MENTAL HEALTH -	407-317-7010

P. General Information about our Services

6. Types of Appointments

a. Initial Evaluation

- The initial evaluation usually consists of a 90-minute appointment with a Mental Health Counselor in order to gather information about your condition. It is important that you bring the completed intake package to the initial appointment.
- At the completion of the initial evaluation a Mental Health Counselor will be recommended to you based on your specific needs.

b. Individual Therapy Session

- This modality of treatment is carried out by a Mental Health Counselor whose purpose is to assist the individual, couple or family through the utilization of various techniques each improvement/resulting of emotional/behavioral symptoms.
- A specific plan of treatment will be developed to meet your therapeutic needs.
- You will be periodically assessed to determine if the goals of treatment have been met or if the treatment plans needs to be modified.
- The information you provide will be essential in reaching a diagnosis.
- We encourage that you ask questions about your condition and treatment.
- A parent or guardian must accompany all patients under the age of 18 years old. The parent or guardian may designate another person to bring the minor to his/her appointment, but must submit to the office authorization to be brought in by another adult.

- In the event that a treating clinician felt the client presents an imminent risk to hurt themselves, or other and/or is unable to care for themselves, an inpatient hospitalization will be recommended. Should the patient refuse, at the Clinician's discretion he/she may initiate an involuntary admission or Baker Act whereby the patient may be held for at least a 72 hour period. After the hospital determines that it is safe for the patient to return to the community his/her mental health treatment may resume.

7. Appointment No Show/Short Cancellations

Any appointment not cancelled 24 hours prior will be considered a short cancellation.

a. Insurance Clients

- Our policy is to forgive up to three missed appointments. Thereafter, any further standing appointments will be removed and services reviewed for possible termination.
- For missed initial intake appointments one attempt to reschedule will be allowed to schedule another intake appointment. If two intake appointments are missed no further appointments will be scheduled.
- Verifiable emergencies will be considered for exclusion from the accrued number of missed appointments.

b. Self-Pay Clients

- Our policy is to forgive one missed appointment per client. After a second missed appointment, clients will be billed the regular rate for that session. If a third missed appointment occurs, pre-payment will be required for any future appointments.
- Verifiable emergencies will be considered for exclusion from the accrued number of missed appointments.

Please understand that most of our therapists have clients on a waiting list. When an appointment is missed it inhibits our ability to serve other clients in a timely manner. Also, please note that you may leave a message with an attendant or on our voicemail service 24 hours a day/ seven days a week. Therefore, we encourage you to communicate with us as soon as you become aware of your inability to attend your appointment.

8. Appointment Confirmation

As a courtesy, we will make every effort to call you to confirm your appointment 24 hours prior. Please understand that this is a courtesy call and if for some

reason we are unable to call you should not consider an indicator that the appointment no longer exists.

9. Financial Policy & Payment

All payments and fees are due at the time of the appointment unless prior arrangements have been approved. Every client and/or client's parent is responsible for paying fees and any balance not covered by his/her insurance at the time of the visit. Knowing your insurance benefits is your responsibility. Please contact your insurance company with any questions you may have regarding your coverage.

If you are not insured by a plan that we do business with, self-payment is expected based on our sliding scale.

a. Insurance

We participate in several insurance plans. Please ask our front office staff regarding which plans we are currently in network with.

b. Co-Payments and Deductibles

All co-payments and deductibles must be paid at the time of service. This arrangement is part of your contract with your insurance company. Failure on our part to collect co-payments and deductibles from patients can be considered fraud. Please help us in upholding the law by paying your co-payment at each visit.

c. Services NOT Covered by Insurance

Please be aware that some – and perhaps all – of the services you receive may not be covered because the insurance company does not consider them reasonable or necessary. You must pay for these services in full at the time of your visit.

d. Proof of Insurance

All patients must complete our patient intake packet before seeing a therapist. We must obtain a copy of your driver's license and current valid insurance card to provide proof of insurance. If you fail to provide us with the correct insurance information in a timely manner, you may be responsible for the balance of a claim.

e. Claim Submission

We will submit your claims to insurance and assist you in any way we reasonably can to help get your claims paid. Your insurance company

may need you to supply certain information directly. It is your responsibility to comply with their request. Please be aware that the balance of your claim is your responsibility whether or not your insurance company pays your claim. Your insurance benefit is a contract between you and your insurance company and we are not party to that contract.

f. Coverage Changes

If your insurance changes, please notify us before your next visit so we can make the appropriate changes to help you receive your maximum benefits. If your insurance company does not pay your claim in 45 days, the balance will automatically be billed to you.

g. Non-Payment

If you fail to make a proper restitution of any pending balance within a reasonable time, we may hold services until any balance is due or the patient and/or caregiver has made a payment plan.

If a balance remains unpaid, we may refer your account to a collection agency under the Fair Debt Collection Practices Act or utilize other legal means necessary to recover the funds. Any cost associated with a collections agency will be the responsibility of the client. Partial payments will not be accepted unless otherwise negotiated.

10. Demographic Information

It is the patient and/or guardian's responsibility to inform Milestone Counseling of any telephone, address, and insurance information changes in order to properly ensure continuation of your appointments. Patients must also provide an alternate phone number to be contacted when necessary.

11. Forms

There will be a specific charge to the patient for the preparation and completion of reports, letters, certification and forms related to the services provided at this office. Please ask our front desk for more information regarding fees. Letters and reports from therapists will be billed at the therapist's prescribed private rate. Forms and materials prepared by the office staff will be billed at \$25 per hour. Any copies requested by client/patients will be charged \$0.25 per page.

12. After Hours Calls

All telephone calls before and after business hours, on weekends and holidays, will be answered by one of our staff members. In the event of an emergency situation (including those in which a person is feeling out of control, unable to

care for him/herself, or having serious thoughts of harming themselves or others), call 911 or go to the nearest emergency room.

13. Patient Identification and Safety

For identification and security purposes, the front desk will make a copy of the client's/guardian's driver's license during the check-in process, which will become part of their medical records. The office reserves the right not to treat an individual who refuses to produce proof of identity. The office adheres to strict confidentiality in accordance with federal and state laws, and the HIPAA regulations.

14. Waiting Room Etiquette

It is the responsibility of all our clients and those who accompany them to be cordial and polite to other clients and staff. In order to maintain a safe and dignified treating environment for our staff and clients each individual who comes whether a client or someone who accompanies them are to conduct themselves in such a manner as to not disrupt the peace and safety of our therapeutic environment. Milestone Counseling staff strives in treating every individual with dignity and respect. In the same manner, in order for our clients to be treated in this outpatient setting we expect that he/she and those who accompany them will conduct themselves in the same manner. Loud or inappropriate conversations will not be tolerated with staff or other patients. Individuals entering these premises must be properly attired, have reasonable hygiene and not conduct themselves in any threatening or aggressive manner. If the individual or their companion violates these basic standards they will be asked to leave the premises and we reserve the right to cancel any future appointments. If they refuse, law enforcement may be contacted. In the event of parents bringing children to the office, it is the responsibility of the caring adult to supervise the minor at all times. If the child/adolescent appears to be out of control or not responding to adult redirection, they may need to wait outside the office until they are seen at the discretion of the counselor.

Milestone Counseling does not allow weapons and/or illegal substances in our facility.

Please leave any weapons outside the facility when you enter our premises. We reserve the right to refuse service for any individual identified as carrying any type of weapon.

Service animals are welcome in our facility as long as they do not cause any disruption or safety hazard to other patients or staff members. At our discretion, you may be directed to wait in a designated area with your service animal.

15. Changes to the Manual

Milestone Counseling reserves the right to amend this Notice at any time in the future, and will make the new provisions available to its patients for all information that it maintains. Upon request, you have the right to a paper copy of this notice at any time.

Q. ACKNOWLEDGEMENT STATEMENT OF RECEIPT

MILESTONE COUNSELING, INC. CLIENT HANDBOOK

I hereby acknowledge that I have received a complete copy of the Milestone Counseling, INC. Client Handbook.

I understand that it is my responsibility to review this Client Handbook in detail and to request any clarifications needed from the organization.

I understand that this acknowledgement shall remain in effect for the duration of my treatment.

I also understand that it is my responsibility to follow the treatment recommendations including participation and attendance to the appointments.

Milestone Counseling, INC. reserves the right to discharge any patient/client who is not able or willing to abide by the established policies.

Name of Client (printed)

Client Signature

Date

Name of Parent/Guardian (printed)

Client Signature

Date

Name of Witness (printed)

Witness Signature

Date