



# Client Handbook

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Your guide to counseling, education,  
and support services offered by  
Family & Children's Services of Mid-Michigan



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## **Welcome to Family & Children's Services of Mid-Michigan (FCS)!**

Since 1925, FCS has been meeting the needs of Mid-Michigan. We are your local, community agency for counseling, education, and support. We are a United Way of Midland County partner agency, a Community Mental Health for Central Michigan (CMHCM) network provider, and a member of the Mid-State Health Network (MSHN). MSHN is a family of mental health and substance use disorder providers joined together to give you access to quality care. Your client handbook has been prepared to give you important information about your services as a client at FCS. We believe it is important for our clients to have information to help make informed decisions about their care. We hope this handbook will help you understand more about your care, so you can get the best possible services for you.

In addition to the information covered in your Client Handbook, clients have the right to information such as:

- how to access primary health care and community services
- the names, locations, and telephone numbers of non-English speaking mental health providers
- FCS' Annual Report, board minutes and meeting schedules, board member lists, and organizational chart
- MSHN and CMH structure and operations



Keep your Client Handbook in a place where you can find it easily. This handbook can be made available in languages other than English (including American Sign Language). Each year we will offer you a replacement guide. Sometimes during the year there may be changes to the Client Handbook, we will offer you a new handbook if this happens. You may also contact us for a new handbook.

If you have additional questions about the Client Handbook or our services, please contact:

Stacey M. Berg, LMSW, CAADC  
Director of Clinical Services  
Rights Advisor & Privacy Officer  
Family & Children's Services of Mid-Michigan  
1714 Eastman Avenue  
Midland, MI 48640  
(989) 631-5390 x. 3311  
[sberg@fcs-midland.org](mailto:sberg@fcs-midland.org)

**Thank you for choosing Family & Children's  
Services of Mid-Michigan!**

## **Our Mission, Vision, & Core Values**

### **Mission**

We inspire hope and well-being for people of all ages by providing counseling, education and support.

### **Vision**

For everyone to feel welcome to come as they are and leave as they want to be.

### **Core Values**

We value high quality client service that enriches/enhances lives through client self-determination. Therefore, we will:

- Recognize, respect, and respond to the unique, culturally defined needs of our clients

We value staff members and their contributions. Therefore, we will:

- Promote a participative workplace where our staff can have input to decisions and planning
- Recognize our staff for their unique contributions to our mission success

We value an atmosphere of teamwork throughout the agency. Therefore, we will:

- Promote staff working together to share expertise
- Recognize team contributions

We value the fact that community relationships and collaboration is essential. Therefore, we will:

- Participate faithfully in our existing partnerships and evaluate the success of those relationships
- Continuously look for ways to collaborate with other individuals or organizations to best meet the needs of our community

We value the public's trust and hold to the highest standard of fiscal and service responsibility and accountability. Therefore, we will:

- Be transparent with our financial information.
- Provide evidence of our impact on those we serve.

## **Appointments & Office Hours**

We are open to serve you Monday – Thursday from 8:00am – 6:00pm, and 6:00pm – 8:00pm by appointment only. We are closed on New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas Day. Weather may also force the agency to close temporarily. If you forget to cancel or reschedule by 8:00am the day of your appointment, you may be charged a \$25.00 fee. This charge is your responsibility. Insurance companies do not pay for these charges. If two appointments are missed or cancelled without notice, or if a pattern of missed



and/or cancelled appointments starts, services may be discontinued and/or other services may be suggested. For Employee Assistance Program clients: a no show or late cancel appointment counts as one of your counseling sessions.

## **Emergency and Crisis Services**

Emergency and Crisis call or walk-in services are available during normal business hours. If you call after normal business hours, your call will be connected to the Listening Ear. You can also go to emergency room at Mid-Michigan Health hospital or dial 911.

## **Confidentiality**

You have the right to have information about your mental health and substance use disorder (SUD) treatment kept private. Generally, information about you can only be given to others with your permission. However, there are times when your information is shared in order to coordinate your care or when it is required by law. If you report child abuse or neglect, or plans to harm yourself or others, we are required to report.

Family members have the right to provide information to FCS about you. However, without a Release of Information signed by you, we may not give information about you to a family member. Parents or guardians must sign a release of information before

information can be shared with others. If you receive SUD services, you have rights related to confidentiality specific to SUD services. Any information released is scanned into your electronic medical record.

Under the Health Insurance Portability and Accountability Act (HIPAA), our Notice of Privacy Practices and Client Rights can be found on page 23.

## **Our Services**

Mental Health Counseling and Therapy – is provided by Licensed Master's level therapists to you and your family.

Youth Services – are for teens, age 12 – 17. Services are provided in confidential sessions at their school. Services are available for up to 4 months. Counselling is provided by licensed professionals or master's level students. Sessions are available to all teens in Midland County. Referrals can be made by the teen themselves, parents, school staff or administration or The ROCK Youth Center.

Addiction & Recovery Services - are offered for you and your family when addiction has impacted your life. Services include outpatient counseling, screening and assessment, drug testing, and driver's license evaluations.





Camp Iknowme – is a five-week summer camp for high-risk teens in our community, ages 13 to 15.

Co-Parenting for Everyone (COPE) – is a program for partners who have experienced divorce or separation and have been referred by the courts.

Employee Assistance Program (EAP) – an employer sponsored EAP offers confidential help to employees and their families. Services include EAP Counseling or employer trainings and presentations.

Community Trainings and Presentations – are offered to community businesses and agencies on a fee basis.

## **Accessing Services**

Accessing our services and supports is just a phone call away. To access our services, please call (989) 631-5390. For a list of current Substance Use Disorder providers, please refer to MSHN's website at [www.midstatehealthnetwork.org](http://www.midstatehealthnetwork.org) or you may ask us for a list.

When you call, one of our friendly Access Specialists will answer. They will ask you questions that will help you access services. Together, you and one of our Access Specialists will determine your next step:

- If the situation you describe is an emergency, you will be offered immediate help
- If your situation is not an emergency, we will work together to setup your first appointment with us. Appointments are made based on priority. If the client is under the age of 18, you may need to provide joint legal custody paperwork, if applicable
- If you are not eligible for services for with us, we will help you find possible community resources.
- If you have a private insurance that we do not accept, we will help. Information can be found by calling the customer service hotline on the back of your insurance card

If you can't call, just walk in. Our Access Specialists are available Monday – Thursday, 8:00am – 6:00pm. When you visit us, it is a good idea to bring your insurance card(s) and proof of income with you. We're here to help you when you need it.

## **What to Expect**

When you first call for services, you will be treated with respect. One of our Access staff will gather your information. They will use your information to match you with a therapist. Your therapist is responsible for your service coordination. All of our therapists have a Master's degree in Social Work or Professional Counseling and have appropriate State licensure or certifications. Our

therapists follow the National Association of Social Workers Code of Ethics.

Once your first appointment (also called an Intake) is scheduled, we ask that you arrive 30 minutes early. When you arrive, please check in at the reception desk. Arriving early will give you time to complete necessary paperwork. Please bring proof of income and your insurance card(s).

During your first appointment, your therapist will answer questions you may have about your services. Your therapist will begin getting to know you by completing an assessment. The process involves gathering information from you and anyone you give permission to obtain/gather information from.

The next step after your therapist completes your assessment, is the Person-centered Planning process. This is the process used to create your Person-centered Plan that is used to guide your counseling. This plan is your right protected by the Michigan Mental Health Code.

The process begins when you decide whom, besides yourself, you would like at the Person-centered Planning meetings. People may include family members or friends, and what staff you would like to attend. Finally, you will decide what

help you might need to help you participate in and understand the meetings.

During Person-centered Planning, you will be asked what your hopes and dreams are. They will help to create goals or outcomes you want to achieve. The people attending this meeting may help you decide what supports, services or treatment you need. They may also help you decide who you would like to provide your services, how often you need the service, and where they will be provided. You have the right, under federal and state laws, to a choice of providers. You will be offered a copy of your Person-Centered Plan that provides all of this information.

While participating in services, every 90 days, or as needed, you and your therapist will review your Person-Centered Plan and discuss your progress.

The last step in counseling, is Transition or Discharge planning. Your therapist will assist you in obtaining services that are needed or in moving from one level of care to another within the Agency. The transition process is planned with your active participation.

Transition may include planned discharge from services or movement to a different level of care. Transition services are important to support your

ongoing recovery and well-being. You have the right to refuse follow-up phone/letter contact.

## **Your Rights**

FCS is committed to providing you the best services based on your needs. As a client, you have certain rights and responsibilities. It is important that you understand them.

### You have the right to mental health services:

Every person who receives public mental health services has certain rights in addition to the right to get the care you need. The Michigan Mental Health Code protects some of those rights. Your rights include:

- The right to receive mental health and substance use disorder services without discrimination of any kind
- The right to be treated with dignity and respect
- The right to treatment suited to your condition and to know the details about your mental health and/or substance use disorder services
- The right to have the same legal rights and responsibilities as everyone else, unless mandated by a court order

- The right to privacy when receiving services
- The right for your personal records to remain confidential
- The right to review your personal records, including all information needed in a timely manner to help you make decisions about services
- The right to be free from physical, verbal, mental, and sexual abuse and neglect
- The right to be free from being taken advantage of financially
- The right to make a complaint without penalty
- The right to receive the service as determined by your support team, which may include, yourself, your parents(s), guardian, or authorized representative
- The right to approve or refuse care, without penalty, based on the provider delivering your services
- The right to access state rules, policies, and procedures pertaining to services
- The right to legal representation
- The right to have advocacy support services assist you to get care
- The right to due process if you believe any limitation of your rights has occurred
- The right to consent or refuse to have your information released, unless required by law

- The right to additional or concurrent services at other Agencies
- The right to refuse participation in research (FCS does not conduct any research at this time)
- The right to have things explained to you so that you understand and receive information and services in a language you understand; interpreters are available free of charge
- The right to seek a second opinion
- The right to receive information in this handbook at least once a year or when requested
- The right to be free from restraint, seclusion, coercion, discipline, provider convenience, or retaliation
- The right to a fair and impartial investigation and resolution of alleged rights violation
- The right to receive services in a safe, clean and caring place
- The right to know who to contact if you think your rights have been violated
- The right to have interpretative services provided for you at no cost to you if English is not your chosen language or you have hearing impairments

## Your Responsibilities

- Making every effort to keep scheduled appointments and arrive on time. If you will be delayed, we ask that you contact our office. If you can't keep an appointment for any reason, we ask that you contact us at least 24 hours in advance. We will help you in rescheduling your appointment for the earliest available date
- Letting us know of a change in name, address, phone number, emergency contact, or insurance coverage
- Participating in your care
- Helping to develop your Person-Centered Plan
- Expressing your opinions, concerns, or suggestions in a helpful manner
- Paying your co-pay before receiving services
- Knowing if your insurance company will pay for part of or your entire bill
- Providing clear and accurate information about yourself
- Following the General Program Rules outlined in this handbook
- Being considerate of the rights and privacy of others



## General Program Rules

As a client at FCS, we ask that you help support a safe, healthy, and supportive environment by following the General Program Rules below:

- No weapons, alcohol, drugs, paraphernalia, or pornography are allowed on the property
- There is no smoking on the property, this includes the use of electronic cigarettes
- Gambling is prohibited within the facility
- Do not leave personal items unattended: FCS is not responsible for personal items lost, damaged, or stolen
- Using foul or disrespectful language is prohibited. This includes threats, abusive jokes or comments, sexual comments, teasing, insulting, or making fun of others.
- You may not be allowed to participate in sessions if you appear to be under the influence of alcohol or other drugs
- Children under the age of 10 can't be left alone in the Waiting Room without a responsible adult
- The use of physical intimidation, and/or aggressive, or threatening behavior is not allowed

If you have questions about the General Program Rules, please ask your therapist or contact the Director of Clinical Services as listed on page 3. If you are unable to meet the General Program

Rules, your services may be terminated. Major rule violations that will lead to discontinuation of services include:

- Intimidating, racial or sexual slurs, aggressive/threatening, or violent behavior
- Criminal activity
- Smoking or chewing of tobacco inside the facility
- Sexual acting out
- Violation of another client's confidentiality or rights

If you would like to return for services after being terminated for violating the General Program Rules, you will need to contact the Director of Clinical Services as listed on page 3 to discuss your options.

## **Health, Safety, and Facility Information**

We encourage you to familiarize yourself with our facility. This includes emergency exits, fire suppression equipment, shelter areas, and first aid kits. If you have any questions, your therapist or a front office professional can help you.

If you notice any safety hazards, such as anything that is a fire hazard, or something in need of repair, please let the Front Office professional or your therapist know.

In the event of a fire or other emergency that requires you to exit the building, please follow the posted emergency exit signs. Staff will be available to help you get to a safe place. For other potentially harmful emergencies, such as a bomb threat or terrorist warning, please remain calm. Do not exit the building on your own. A staff person will assist you to safety.

Although you are not required to disclose medical information, it is important that you disclose any health issue that could be an emergency (e.g. allergic reactions, heart problems, pace makers, or history of seizures). Please tell your therapist, as this will help you in a medical emergency. Please know that no medication, including over-the-counter drugs, are to be administered in the facility. Medically ordered medications such as insulin, nitroglycerin, or EpiPens are allowed.

Infection Control - We also encourage clients to take simple measures to help keep all our clients and staff safe by practicing good handwashing techniques as posted in the restrooms, refraining from handling any needles in the building, disposing of any materials that may have come into contact with bodily fluids in a wastebasket, and informing staff of any concerns.

## **Payment for Services**

At the time of your first scheduled visit with us, you will meet with an agency staff person. The staff person will

review, with you, the financial and insurance information you have been asked to bring. This review will establish your fees, if applicable.

In some cases your services may have a co-pay or cost sharing arrangement. This will depend on your type of insurance coverage. We will give you information about any possible cost-sharing for mental health or substance use disorder services at your first appointment, if applicable. Fees are assessed on a sliding scale based on household income, insurance and MSHN eligibility. Based on annual United Way support, no one is denied service solely on an inability to pay. Unless other arrangements are made, full-session payment or insurance co-payment is due at the beginning of each visit. If your finances change inform the front office professional. They will help in re-assessing your fee. Proof of income in the form of one check stub per working family member or the last year's W-2, must be provided at time of intake. Proof of income will also be needed in the event a fee needs to be re-assessed.

If you pay for services by check, please note there is a \$25.00 charge for an insufficient funds check. Other collection fees may be charged to your account as applicable.

If you are enrolled in Medicaid or Healthy Michigan Plan (HMP) and are authorized and referred by Community Mental Health for Central Michigan



(CMHCM), the total cost of your authorized mental health or substance use disorder treatment will be covered. No fees will be charged to you.

## **Court Testimony & Fees**

For subpoenas related to civil hearings, an hourly fee based on the agency's current rate for an ongoing full individual session, is to be charged to the sender of the subpoena when FCS staff or therapists act as a witness. Billable time includes preparation time and time in the courtroom waiting to testify, with a minimum of one hour charged.

Hourly Fee:	\$165.00
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\*Effective January 2017

## **Language Assistance**

If you are a person who is deaf or hard of hearing, you can use the Michigan Relay Center (MRC) to reach us. Please call 7-1-1 and ask MRC to connect you to the number you are trying to reach.

If you need an interpreter contact the Director of Clinical Services as listed on page 3. Interpreters are available at no cost to you for both phone and in person communication.

## **Accessibility and Accommodations**

In line with federal and state laws, all buildings and programs FCS are required to be physically accessible to all individuals with qualifying disabilities. Any individual who receives emotional, visual, or mobility support from an approved service animal, will be given access to FCS. If you need more information or if you have questions about accessibility or service/support animals you can contact the Director of Clinical Services as listed on page 3.

If you need to request an accommodation on behalf of yourself or a family member or a friend, you can contact the Director of Clinical Services as listed on page 3.

## **Coordination of Care**

To improve the quality of services, we want to coordinate your treatment with your other providers. We'd like to work with the medical providers who care for your physical health. And, if you are also receiving substance use disorder services, we'd like to talk to them too. Your mental health care should be coordinated with your other services. Being able to coordinate with all providers involved in treating you helps improves your recovery. You are encouraged to sign "Releases of Information," so that information can be shared with all of your providers.

If you do not have a medical doctor and need one, your therapist will be able to help you find one. If you would like information about other community services and referrals, we have a Community Resource Guide available.

## **Mental Health/Psychiatric Advance Directives**

Adults have the right under Michigan law (42 CFR 422.128) to a “psychiatric advance directive.” A psychiatric advance directive is a tool for making decisions before a crisis in which you may become unable to make a decision about the kind of treatment you want and don’t want. This lets other people, including family, friends, and service providers, know what you want when you cannot speak for yourself.

“Advance Directives” are special instructions for a medical or mental health emergency. You make this plan before anything happens. Sometimes in a medical or mental health emergency a person cannot talk or give informed consent. So, before anything happens, you agree to let another person make medical or mental health decisions for you for such a situation. Then, if you are unable to tell what you want done and qualified professionals determine that you are unable to do so, the person that you chose to be your advocate will tell the doctors or others your wishes. You can change your wishes or patient advocate at any time, as long as you are of sound mind, by

updating the appropriate legal forms. The decision to have any type of advance directive, if one at all, is completely up to you. If you would like more information on advance directives, please speak with your therapist or medical provider.

There are forms available for both types of advance directives. A copy of the form should be kept in your medical/mental health records, at your doctor's office, in your home, and with your patient advocate. Any changes to Michigan State Law regarding Advanced Directives will be communicated no later than 90 days after the effective date of the change.

If you do not believe you have received appropriate information about advance directives from FCS, MSHN, CMHCM or another substance use disorder provider, or you feel that your provider did not follow your advance directive, please contact the Rights Advisor listed on page 32.

## **Cultural Sensitivity**

The goal of FCS is to provide culturally sensitive services to your needs. Our staff and network providers are trained to respect you and your family. If you feel that a provider is not being sensitive to your culture and you would like to file a grievance, please contact the Director of Clinical Services as listed on page 3.



## **Your Input is Valued**

FCS has designed ways for you to share your experiences and/or provide feedback on how we may improve our services. From time to time, we will seek your feedback about services that you have received. The information you provide is important to let us know what is working and what is not. The results are used to make informed decisions about our services and processes. Please take advantage of these opportunities and be honest in your feedback. Contact the Director of Clinical Services as listed on page 3 for more information.

## **Notice of Privacy Practices & Client Rights, effective 01/2017**

### **Your Information. Your Rights. Our Responsibilities.**

This notice describes how medical information about you may be used and disclosed. It also describes how you can get access to this information. Please review it carefully.

### **Your Rights**

You have the right to:

- Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication

- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

### **Your Choices**

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- Include you in a hospital directory
- Provide mental health care
- Market our services and sell your information
- Raise funds

### **Our Uses and Disclosures**

We may use and share your information as we:

- Treat you
- Run our organization
- Bill for your services
- Help with public health and safety issues
- Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director
- Address workers' compensation, law enforcement, and other government requests

- Respond to lawsuits and legal actions

## **Your 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.

If you would like to review or obtain a copy of your mental health records, contact the Director of Clinical Services as listed on page 3. All requests need to be submitted in writing and signed by you or your parent or guardian. Request forms can be obtained by contacting FCS.

Once we receive your request, it can take up to 30 days to complete your request. There is a charge for copying of records as allowed by law. Initial Fee of \$25.06 will be required prior to the copy being made. Additional Fees are as follows: \$1.25 per page for the first 20 pages; \$.63 per page for pages 21-50 and \$.25 per page for pages 51+.

Please note that you do not have the right to access your therapist's psychotherapy notes. Psychotherapy notes are notes that a mental health professional

takes during a conversation with a client. They are kept separate from your medical and billing records. HIPAA also does not allow us to make most disclosures about psychotherapy notes about you without your authorization.

### **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 communications**

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 or 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 we 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 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'll provide one accounting 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 separate paper copy of this notice at any time, even if you have agreed to receive the 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 complaint if you feel your rights are violated**

You can complain if you feel we have violated your rights by contacting us using the information listed in the “Welcome” section.

### **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.

### **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
- Include your information in a hospital directory

If you are not able to tell us your preference, for example, if you are unconscious, we may go ahead and share your information if we believe it is in your best interest.

We may also share your information when needed to lessen a serious and imminent threat to health or safety.

## **In these cases we never share your information unless you give us written permission:**

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

## **In the case of fundraising:**

We may contact you for fundraising efforts, but you can tell us not to contact you again. If you do not wish to be contacted as part of any fundraising activities, please contact our Director of Fund Development at (989) 631-5390.

## **Our 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:

### **Treat you**

- We can use your health information and share it with other professionals who are treating you with your written permission

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.

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.

Example: We give information about you to your health insurance plan so it will pay for your services.

### **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.

### **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



## **Comply with the law**

We will share information about you if federal or state 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 requests**

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**

We can share health information about you in response to a court or administrative order, or in response to a subpoena.

### **Our 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

For more information see:

[www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html).

Or contact:

Privacy Officer  
Family & Children's Services of Mid-Michigan  
1714 Eastman Avenue  
Midland, MI 48640  
(989) 631- 5390

## Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.

Additional laws may further protect your private information. These laws include the Michigan Mental Health Code and 42 CFR Part 2.

## Grievances & Appeals

It is the desire of Family & Children's Services that relationships with clients are positive and mutually supportive. Therefore, the exploration of problems and disagreements is welcomed. Due process shall be provided to current and potential clients for appeals.

### Definitions:

**Grievance:** A grievance is a client's expression of dissatisfaction about any matter at FCS other than an Adverse Benefit Determination. Possible subjects for grievances include, but are not limited to, quality of care or services provided, aspects of interpersonal relationships between FCS staff and the client, failure to respect the client's rights regardless of whether remedial action is requested, or a client's dispute regarding an extension of time proposed by FCS to make a service authorized decision.

a. Filing A Grievance:

1. If you are unhappy with your services or supports or the staff who provide them, you can file a grievance any time by calling, visiting, or writing to FCS.
2. Clients are asked to communicate grievances with the appropriate staff first, before making a formal grievance. If client/staff are still unable to reach a satisfactory resolution, the client may contact the Director of Clinical Services, listed on page 3, to discuss the situation and/or file a formal grievance.
3. In the event that the grievance is against the Director of Clinical Services, the grievance will be submitted to the Chief Executive Officer.
4. If the issue is not satisfactorily resolved, the client may file a formal grievance with the Chief Executive Officer.
5. The Chief Executive Officer will notify the grievant of the decision no later than 90 days from the date filed.
6. If your services are funded by MSHN, you may also contact the Rights Advisor below:

Dan Dedloff  
Customer Service & Rights Specialist  
Mid-State Health Network  
530 W. Ionia, Suite F  
Lansing, MI 48933

**Appeal:** A review at the local level by FCS of an Adverse Benefit Determination, as defined above.

b. Filing An Appeal:

1. Clients are asked to communicate concerns with the appropriate staff first, before making a formal appeal. If client/staff are still unable to reach a satisfactory resolution, the client may contact the Director of Clinical Services, listed on page 3, to discuss the situation and/or file a formal appeal.
2. Formal appeals must be filed within 60 calendar days of the date on the Adverse Benefit Determination Notice. In the event that the appeal is against the Director of Clinical Services, the formal appeal will be submitted to the Chief Executive Officer.
3. Within 30 calendar days of receipt of the appeal, the designated staff will review the dispute and notify the provider in writing of the resolution.
4. If the issue is not satisfactorily resolved, the client may, within 10 business days, file an appeal with the Chief Executive

Officer.

5. The Chief Executive Officer will notify the grievant of the determination of the appeal within 10 business days upon receiving the request for appeal.
6. If the grievant is not satisfied with the Chief Executive Officer's determination, he/she may further appeal to the Board of Directors. The Board may choose to designate select members of the Board to act as an Appeals Committee.
7. The request for reconsideration of the Chief Executive Officer's decision shall be submitted in writing by the grievant to the Board within ten (10) business days of the Chief Executive Officer's denial notice.
  - a. Both the client and the agency may be represented by advocates at a meeting with the Board or Appeals Committee.
  - b. Both the client and the agency may present a reasonable number of witnesses at this meeting.
  - c. Both the client and the agency may file written documents at this meeting.

- d. The Board or Appeals Committee shall review the evidence presented and shall be solely responsible for determining the outcome of the appeal. Notice of the Board's determination shall be provided to the grievant within ten (10) business days of the review meeting.
- e. If the grievant is not satisfied with the findings, they can file for a State Fair Hearing with the Michigan Department of Health and Human Resources. The grievant has 120 days from the date of the Notice of Resolution Letter.
- f. Expedited Appeal Resolution
  1. Available where the client determines that the time for a standard resolution could seriously jeopardize the Client's life, physical or mental health, or ability to attain, maintain, or regain maximum function.
  2. FCS may not take punitive action against a client who requests an expedited resolution or supports a Client's appeal.
  3. If a request for expedited resolution is denied, FCS must:

- a. Transfer the appeal to the timeframe for standard resolution.
  - b. Make reasonable efforts to give the Client prompt oral notice of the denial.
  - c. Within 2-calendar days, give the Client written notice of the reason for the decision to extend the timeframe and inform the Client of the right to file a Grievance if they disagree with the decision.
  - d. Resolve the Appeal as expeditiously as the Client's health condition requires but not to exceed 30 calendar days (Medicaid) or 45 calendar days (non-Medicaid).
4. If a request for expedited resolution is granted, FCS must resolve the Appeal and provide notice of resolution to the affected parties no longer than 72-hours (Medicaid) or 3 calendar days (non-Medicaid) after CMHCM or MSHN receives the request for expedited resolution of the Appeal.



## Community Resource Information

### 24-hour crisis services

- Community Mental Health (989-631-2320 – ask for a member of the crisis team)
- Listening Ear (2-1-1)

### Basic needs

Income eligibility may apply for these services.

Always call first to determine if you qualify and to find out what documentation might need to be brought to an appointment.

- Blessed Sacrament: 989-835-6777
  - Utility and other temporary financial assistance
- Caregiving Network, Inc.: 989-837-9757
  - Food, rent, and utility assistance, gas cards and personal need supplies
- Department of Health and Human Services: 989-835-7040
  - Food, rent, and utility assistance
- Emergency Food Pantry: 989-486-9393
  - Food, cleaning, and personal need supplies
- Midland County Health Department:

989-832-6380

- Confidential health services for people, including immunization supports, hearing and vision, and other health education information.
- Helping Hands Dental Center: 989-837-9740
  - Dental assistance
- Midland Area Homes: 989-496-9550
  - Used furniture, home repairs, and homeless prevention services
- Mid-Michigan Community Action Agency: 989-832-7377
  - Heat, utility and rent assistance, homelessness support
  - For WIC call 989-832-7310
- Salvation Army: 989-496-2787
  - Food, rent, and utility assistance

Temporary housing

- Good Samaritan Rescue Mission, Bay City (family shelter): 989-893-5973
- House of Mercy, Midland (for women): 989-631-2346
- Open Door, Midland (for men): 989-835-2291

- Shelterhouse, Midland: 989-835-6771 or  
24/7 Crisis Line 877-216-6383
- Innerlink, Saginaw (youth runaway):  
989-753-3431

Revised December 2019  
S: P&P\Clinical