Heart 2 Heart Behavioral Health

Client Admission Agreement

Review each section carefully. For a secure digital copy and electronic signature, use the Review & Sign link on the Heart 2 Heart admissions page. For paper completion, print this agreement, complete the client fields, and sign and date the acknowledgment at the end.

Client Information

Full name

Date of birth

Address

Phone number

Email address

Emergency Contact Information

Emergency contact name

Relationship to client

Emergency contact phone

Insurance Information

Insurance provider

Policy number

Member ID

Referral source (if applicable)

2. Program Overview

Program Name:

Heart 2 Heart Behavioral Health - Intensive Outpatient Treatment (IOT) located at 24230 Barton Rd Ste A. Loma Linda, CA 92354-3232

Program Description:

An IOT program structured and focused on the therapeutic services provided (e.g., group therapy, individual counseling, family therapy), case management, frequency of sessions (minimum of 9 hours per week maximum of 19 hours per week).

3. Admission Criteria

Eligibility Requirements:

- The client must meet the ASAM Level II.1: Intensive Outpatient Treatment criteria.
- The client must be at least 18 years of age.
- The client must have a primary diagnosis of substance use disorder (SUD) and/or alcohol-related problems.
- The client must be medically and mentally stable to participate in IOT.

Non-Discrimination Clause:

Heart 2 Heart Behavioral Health does not discriminate on the basis of ethnic group identification, religion, age, sex, color, or disability.

Special Populations:

Reasonable accommodations will be provided for individuals with disabilities or from diverse cultural, racial, linguistic, or sexual backgrounds.

4. Services Provided

Clinical Services:

- Individual and group counseling
- Substance use disorder education
- Family therapy (if applicable)
- Relapse prevention
- Coping skills training
- Aftercare planning and referral

Medical Services:

- Regular assessments of the client's physical and psychological condition
- Medical evaluations (as needed)

Case Management:

Coordination of care, including referrals to community resources, psychiatric services, and medical professionals (as necessary).

5. Client Rights

Right to Confidentiality: All personal information and treatment records are confidential and protected by 42 CFR Part 2 and HIPAA. Records will not be shared without written consent unless required by law (e.g., threat to self or others, court order).

Right to Non-Discrimination: Clients have the right to access services without discrimination based on race, ethnicity, religion, sexual orientation, or disability.

Right to Informed Consent: Clients will be informed of all aspects of their treatment and must provide informed consent prior to receiving services.

Right to Participate in Treatment Planning: Clients have the right to actively participate in their treatment plan, including the development and modification of their individualized treatment goals.

Right to Refuse Treatment: Clients may refuse treatment at any time, though they will be informed of potential consequences.

6. Client Responsibilities

Attendance Requirements:

- Clients are expected to attend all scheduled therapy sessions, including individual and group sessions.
- If a client is unable to attend a session, they must notify the program 24 hours in advance.

Program Rules:

Clients are expected to comply with all program rules, including but not limited to:

- No possession or use of drugs or alcohol while enrolled in the program.
- Participation in all required activities and assignments.
- Respectful and non-disruptive behavior towards staff and fellow clients.

Financial Responsibility/ Refund Policy:

Clients must provide accurate insurance information and are responsible for co-payments or fees not covered by their insurance provider. If uninsured, a sliding fee scale may be applied based on the client's ability to pay.

Refund Eligibility:

Refunds will be considered under the following conditions:

1. **Voluntary Withdrawal or Termination of Services:** If a client voluntarily withdraws or is discharged prior to completing the agreed-upon treatment plan, a prorated refund may be issued for any prepaid services that were not rendered. The amount refunded will be based on the difference between the total amount paid and the cost of services already provided up to the date of withdrawal or termination.
2. **Cancellation Before Admission:** If a client cancels their admission before any services have been rendered, the client may receive a full refund of any payments made, minus any non-refundable administrative fees that were disclosed prior to payment.
3. **Non-Delivery of Services:** If Heart 2 Heart Behavioral Health is unable to provide the agreed-upon services due to unforeseen circumstances (e.g., facility closure or service unavailability), clients will be eligible for a full refund of any prepaid fees for services not delivered.
4. **Medical Necessity or Transfer:** If a client is transferred to a different level of care or a different facility due to medical necessity, the client may receive a prorated refund for any prepaid services not rendered at Heart 2 Heart Behavioral Health, excluding costs for services already provided.

Refund Requests: All refund requests must be submitted in writing to Heart 2 Heart Behavioral Health's billing department. Requests should include the client's name, admission date, reason for withdrawal or cancellation, and a copy of the receipt or proof of payment. Refunds will be processed within 30 days of receiving the written request and all necessary documentation.

Non-Refundable Fees: Certain fees, such as assessment fees, intake fees, and administrative processing fees, may be non-refundable. These fees will be clearly disclosed during the intake process and prior to admission.

Compliance with DHCS Standards: This refund policy is in strict compliance with DHCS AOD standards, Section 15000, which requires transparency in billing practices and clear communication of any potential refunds or non-refundable fees. Heart 2 Heart Behavioral Health maintains the right to amend this policy as needed to comply with state or federal regulations.

7. Program Rules and Regulations

Drug and Alcohol Policy:

- Clients must abstain from drugs and alcohol while enrolled in the program.
- Random drug testing may be required as part of the program participation.
- Clients will be searched upon entering the facility alcohol and drugs are prohibited.

Consequences of Relapse:

Immediate Response and Assessment: Upon discovery of a relapse, the client will meet with their primary counselor or case manager as soon as possible to assess the situation. A Relapse Risk Assessment will be conducted to determine the extent of the relapse, potential triggers, and any risks to the client's safety or the safety of others.

Temporary Suspension of Program Privileges: If a relapse is confirmed, the client may temporarily lose certain privileges within the program, such as passes for off-site activities or group activities, while the situation is evaluated.

Treatment Plan Review and Adjustment: The client's treatment plan will be reviewed and modified based on the nature of the relapse. This may include increasing the intensity of services (e.g., more frequent counseling sessions, additional group therapy, or placement in a higher level of care). The counselor will work with the client to identify new triggers and coping strategies, focusing on relapse prevention.

Continued Participation in the Program: Clients who relapse will generally be allowed to remain in the program, provided they agree to the updated treatment plan and demonstrate a commitment to recovery. If necessary, the client may be referred to additional support services, such as medication-assisted treatment (MAT), psychiatric services, or external support groups like Alcoholics Anonymous (AA) or Narcotics Anonymous (NA).

Relapse Recovery Contract: The client may be required to sign a Relapse Recovery Contract, which outlines the expectations moving forward, including commitments to sobriety, additional treatment recommendations, and potential consequences for further relapses.

Transfer to a Higher Level of Care: If the relapse indicates that the current level of care is no longer appropriate for the client's needs, a referral to a higher level of care (e.g., residential treatment or detoxification services) may be made. The client's safety and clinical needs will be the primary factor in determining the appropriate level of care.

Termination of Services: Termination from the program is considered a last resort. If a client repeatedly relapses and refuses to engage in treatment, or if their behavior poses a danger to others in the program, Heart 2 Heart Behavioral Health reserves the right to discharge the client in accordance with DHCS guidelines. A discharge plan will be provided, including referrals to alternative programs or community resources that may better serve the client's needs.

Safety and Behavioral Expectations:

- Any behavior deemed dangerous to self, others, or staff will result in immediate removal from the program.
- Compliance with safety protocols, including emergency procedures, is mandatory.

8. Discharge Criteria

Successful Completion: Discharge will occur when the client has met all treatment goals and successfully completed the program.

Voluntary Discharge: Clients may choose to terminate their participation at any time, though they will be encouraged to discuss their decision with their counselor prior to discharge.

Involuntary Discharge: A client may be discharged if they repeatedly fail to comply with program rules, pose a threat to staff, other clients, or themselves, or have a medical or psychological condition that cannot be managed within the IOT setting and requires a higher level of care.

Referral to Other Programs: If the client cannot be accommodated in the IOT due to medical, psychological, or logistical reasons, they will be referred to an appropriate level of care (e.g., inpatient treatment, residential care).

9. Consent for Treatment

Informed Consent: The client must provide informed consent prior to starting treatment. The consent will include a clear explanation of the nature and purpose of the treatment program, potential risks and benefits of participation, and consent for collection of personal and medical information.

Consent for Communication: The client must provide written consent for any communication or sharing of personal information with family members, legal representatives, or other agencies involved in their care.

10. Grievance Procedure

Client Grievance Process: Clients have the right to file grievances if they feel their rights have been violated or if they are dissatisfied with their treatment.

- Grievance can be submitted in writing to the Program Director or Agency Administrator.
- Grievances will be addressed promptly and fairly, with a written response provided to the client.
- If the client is not satisfied with the resolution, they have the right to appeal the decision to state regulatory authorities.

11. Signatures and Acknowledgments

Client Acknowledgment: The client acknowledges that they have received, read, and understand the terms of the admission agreement, their rights, and responsibilities, and agree to participate in the program as outlined.

Client name (printed): _____
Client signature: _____
Date: _____

Staff completion and staff signature are handled separately by Heart 2 Heart personnel.

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