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PATIENT SIGNATURE PAGE

I have received the UAMS Psychiatric Research Institute WFC patient handbook, which includes the following:

- Patient Rights and Responsibilities
- Initial Appointment/Clinic Fees
- Policy on Cancellations and No Shows
- Inclement Weather
- Crisis Services
- Communication Outside of Sessions
- Concerns and Feedback
- Smoking Policy
- Weapons
- Notice of Privacy Practices

Patient/Guardian Name (Printed)

Patient/Guardian Name (Signature)

Date

Walker Family Clinic Patient Handbook

My therapist: _____

Phone number: _____

My doctor/ PA: _____

Phone number: _____

Walker Family Clinic: 501-526-8200

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Section 1: About Walker Family Clinic

This handbook will help you learn about Walker Family Clinic at the UAMS Psychiatric Research Institute (PRI).

Who can go to the clinic?

Anyone can go to the Walker Family Clinic. We will treat you no matter your age, race, creed, color, sex, national origin.

Can I smoke at the clinic?

No. All PRI buildings and offices are smoke free. This includes lounges and waiting rooms. If you want information about smoking cessation (how to quit smoking) ask your doctor.

Can I bring a weapon to the clinic?

No. You cannot carry handguns or other weapons on any UAMS program campus.

Can I bring my service animal to the clinic?

Yes. You can bring a service animal trained to assist you with a disability. You must care for it and clean up after it.

A service animal can be a dog of any breed or size. They do not include household pets, therapy animals, or lab animals. Dogs used for comfort or emotional support do not qualify as service animals.

If you bring a service animal, you must control it. If you do not, we will ask you to leave. You may not allow your service animal to:

- Bark or growl non-stop
- Bite or show their teeth
- Urinate (pee) or poop inside
- Have an active skin infection or fleas

Section 2: Program Cost

How much do services at the Walker Family Clinic cost?

Your 1st clinic visit will cost \$429. Most health insurance mental health plans cover this cost. Talk to your insurance company to see if it covers this service. Ask if you need a referral or pre-authorization.

Return visit fees: less than the 1st visit
Ask for a fee schedule at the front desk.

What other charges will I need to pay?

You must pay any other charges (such as deductible and co-payments) at the time of service. If you do not pay, we will have to refer you to a collection agency.

What form of payments do you accept?

You can pay with cash, check, or all major credit cards.

What happens if I cannot pay for my services?

If you cannot pay, we have programs that can help you. A financial counselor can help you fill out applications for Medicaid and our discount program. We can also help you set up a payment plan.

How do I contact a financial counselor or set up a payment plan?

You can ask for help with these at the reception desk, or:

- To get help with your Medicaid application, call: **501-626-7680**.
- To get up a payment plan, call: **501-614-2160**.

What else should I expect to pay?

After your insurance pays their amount, you may get 2 bills.

- Medical College Physician Group (MCPG) bills the doctor charges.
Phone: 501-614-2160
- Patient Business Services bills for charges such as labs or radiology.
Phone: 501-614-2888

We will file most insurance claims. We will ask you to sign an authorization and consent form for services. You may also need to contact your insurance company to make sure they process your claim timely.

Section 3: About Your Appointment

What will happen at the 1st visit?

At your 1st visit, we will do a patient intake. This is where we assess your needs and create a treatment plan.

How do I cancel my appointment?

If you need to cancel or reschedule a therapy appointment, you must call our office at least 24 hours before your scheduled appointment. This allows us to see another patient who needs our services.

What will happen if I miss a scheduled appointment?

If you do not contact us at least 24 hours before your appointment and do not keep your scheduled appointment, we will count you as “no-show” for that visit.

If you have 3 “no-shows”, you may no longer be a PRI patient. We will ask you to use another mental health facility. [If you’d like additional information, you may request to see UAMS Policy A.1.18]

If you use Medicaid (Tier 1), you must get a referral from your doctor to get treatment. If you use Medicaid (Tier 2 or 3), you must have a Psychiatric Diagnostic Assessment within 45 days of starting services and every year after that. If you miss a visit, we cannot see you again until the Psychiatric Diagnostic Assessment is complete.

What will happen if I miss a medicine appointment?

You must keep your medicine appointments so we can see how well your medicine works and adjust it if needed. We may ask you to schedule a medicine check in order to get a refill.

If there is inclement (unsafe) weather, will my you cancel my appointment?

During inclement weather, traveling to and from PRI program sites may be tough. Think about your safety before you travel to your appointment. Please call to confirm that the clinic site is open and that your doctor is present. Telehealth services are now available in most cases, but some payor restrictions and state laws restrict this option.

Section 4: Know Your Patient Rights

How do I get the most out of my PRI services?

You and your family are important members of your care team. To get involved in your care:

- Ask questions if you do not understand something your provider says.
- Learn about your care plan.
- Ask a trusted family member or friend to be your support person.
- Know what medicines you take and why you take them. Medicine errors are the most common health care mistake.

What are my patient rights and responsibilities?

As a patient, you have rights and responsibilities.

Patient rights

You have the right to:

- Give permission to UAMS to photograph you. This picture will go in your chart so we can identify you.
- Get appropriate, psychiatric care regardless of race, disability, color, religion, national origin, sexual orientation, spiritual beliefs, or the way you pay for services.
- Be treated with respect. This means we will respect your name, listen to you, and respond in a good timeframe.
- Have privacy. This means:
 - Your records are confidential.
 - You may have closed doors during exams.
 - Staff should tell you who they are and why they are in your room.
 - You can ask anyone to leave your room.
 - We will not share any alcohol and drug treatment records without your written permission.
- Ask someone to explain the costs you need to pay.
- Know the name of your doctors or nurses and talk to them about your health problems.
- Have an advance directive (living will, health care proxy, or power of attorney) that PRI will honor.
- Learn about your treatment. If you need an interpreter, we will get one for you.
- Be involved in decisions about your care, treatment, and services.
- Refuse treatment.
- Learn when your doctor wants you to join a clinical research study. You must give permission before you join a research study. You can refuse to join or decide to leave from the research study at any time. That will not change your right to get care at UAMS.
- Tell us about any problem at our clinic without being punished. You also have a right to talk about your concerns with your doctor, nurse, or therapist. If we do not handle your concerns, you can contact the PRI Director of Outpatient Clinics at 501-526-8100.
- Find a personal advocate (someone to help speak up for you) at any time.
- Get help with your pain.

Patient responsibilities

You are responsible for taking part in your care. You should be responsible to:

- Tell us about:
 - Past and current health issues
 - Hospital stays
 - Medicines
 - Other emotional wellness concerns
 - Changes in your mental health
 - What you need and expect from us
- Ask questions when you do not understand something about your care.
- Follow your care plan.
- Accept the outcomes if you do not follow your care plan.
- Follow rules at UAMS as well as other clients and their property.
- Respect UAMS staff and property.
- Attend your visits. When you cannot come for any reason, call to cancel.
- Know if your insurance company needs a pre-certification or a referral from your doctor (PCP). Complete this process before your 1st appointment. You will need a referral from your doctor for Medicaid Tier 1 services. Check with your insurance company to find out what services they cover.
- Pay for of all services that your insurance does not cover. This includes services not covered by the Medicaid program and services received beyond your benefit limits. Make sure you understand that if you get services outside a UAMS mental health facility, this may result in denial of benefits from your insurance company, and you agree to pay for these denied services. Your insurance may not pay for the care provided at UAMS mental health clinic.

Section 5: What to Do Between Therapy Visits

What is a mental health crisis?

A mental health crisis is any time your mental health may cause you to:

- Hurt yourself
- Hurt others
- Not be able to care for yourself
- Not do your daily activities

Who do I call if I have a mental health crisis?

If you think about harming yourself, call:

- Arkansas Crisis Hotline: 1-888-274-7472
- National Suicide Prevention Lifeline: 1-900-273-8255

If you have a mental health crisis **after-hours or need to talk to someone right away**, call the Walker Family Clinic at 501-526-8200.

You may also message your doctor or therapist through UAMS MyChart.

If you are in medical crisis or at risk of harming yourself or others, call 911 or go to your nearest ER.

Who do I contact if I need help between my visits?

You may need to talk to your doctor or therapist between visits. If so, call the clinic at 501-526-8200 and leave a message for them. You may have their email address or direct phone line, but they may not check those often. It is best to call the clinic. We cannot give you their cell phone number.

Section 6: About Psychiatric Advance Directives

What is a psychiatric advance directive (PAD)?

A PAD is a legal document you can create to state how you want others to care for you during a mental health crisis.

In Arkansas, you must decide who will be in charge of your PAD. This person is your agent. A durable power of attorney document has information about your agent and your PAD.

How does a PAD work?

It is a tool used to plan for a mental health crisis. The doctor will use the instructions in the PAD left for your agent to guide their treatment plan. You should create it when you are well.

Why do I need a PAD?

A PAD gives you more control over your treatment. It will tell the hospital staff how best to help you when you have a mental health crisis. Your PAD states:

- The treatments you want
- The medicines that work best for you
- Who you want to know you are having a mental health crisis
- Who to call if you need to stay in the hospital

How do I create a PAD?

Start by choosing a family member or friend who knows your treatment history to be your agent. You can get fill-in-the-blank PAD forms from your doctor or the Division of Behavioral Health Services. You may also write your own PAD and title it “Psychiatric Advance Directive”. Your PAD must include:

- The date
- Your agent’s name
- Your agent’s signature
- Your signature name
- Signatures of 2 witnesses (age 18 or older)

What should I do with my PAD after I finish it?

You should make copies of the PAD when it is complete and:

- Put your copy somewhere you can get it when you need it
- Give a copy to your agent, doctor, therapist, hospitals you have gone to in the past, and family or friend.
- Ask your doctor to put a copy in your medical records.
- Write on an index card that you have a PAD and put it in your wallet.

To learn more about PADs, visit, and search psychiatric advance directives:

- Mental Health America: <https://mhanational.org/psychiatric-advance-directives-faqs>
- SAMHSA: https://www.samhsa.gov/sites/default/files/a_practical_guide_to_psychiatric_advance_directives.pdf
- Bazelon: <http://www.bazelon.org/wp-content/uploads/2017/04/PAD-Template.pdf>
- National Resource Center on Psychiatric Advanced Directives: www.nrc-pad.org

Section 7: Other Resources

There may be times where you need other types of support. This section gives you a list of who to call for different services.

Who should I contact if I have concerns, ideas, or complaints?

If you have any concerns about safety in the clinic, or the care you got from PRI that we have not made better, call:

- PRI Administration (Director of Outpatient Programs): 501-526-8100
- Arkansas Division of Behavioral Health Services: 501-683-6903
- The Joint Commission: 800-994-6610
- Office of Patient Experience: 501-296-1039

Who do I contact for Protection and Advocacy Services?

Protection and Advocacy Services offers legal support to patients. Contact these services if you need help with:

- Child or dependent care issues
- Reporting abuse
- Neglect, or
- Concerns about client rights

These services include:

- Arkansas Department of Human Services
501-682-8650
- Adult Protective Services
800-482-8049
- Child Abuse Hotline
800-482-5964
- Disability Rights Center
800-482-1174
- National Alliance for Mentally Ill
501-661-1548

Section 8: Outpatient Behavioral Health Services (OBHS)

OBHS Disclosure:

The Outpatient Behavioral Health Services Program provides care, treatment and services which are provided by a certified Behavioral Health Services provider to Medicaid-eligible beneficiaries that have a Behavioral Health diagnosis as described in the American Psychiatric Association Diagnostic and Statistical Manual (DSM-5 and subsequent revisions).

- Eligibility for services depends on the needs of the beneficiary. Counseling Level Services and Crisis Services can be provided to any beneficiary as long as the services are medically necessary.
- Please notify Walker Family Clinic Program Manager if you want a copy of the OBHS service rules.
- Services available include:
 - Mental Health Diagnosis
 - Interpretation of Diagnosis
 - Psychiatric Assessment
 - Medication Management
 - Individual Therapy
 - Marital/ Family Therapy, with and without patient present
 - Group Therapy
 - Psychoeducation
 - Crisis Services
 - If appropriate, for Tier 2 and 3, Qualified Behavioral Health Provider services