Statement of Patients Rights and Responsibilities

Patients have the right to:

1. Be treated with dignity and respect.
2. Be treated fairly, regardless of their race, religion, gender, sexual orientation, ethnicity, age, disability, or source of payment.
3. Have their treatment and other member information kept confidential. Only where permitted by law may records be released without the member's permission.
4. Easily access care in a timely fashion.
5. Know about their treatment choices. If Mr. Norgaard has other treatment options, he will let the patient know about these options.
6. Understand the cost or coverage by their benefit plan.
7. Share in developing their plan of care.
8. Receive information in a language they can understand.
9. Receive a clear explanation of their condition and treatment options.
10. Receive information about clinical guidelines used in providing and managing their care.
11. Ask their provider about their work history and training.
12. Give input on the Members' Rights and Responsibilities.
13. Know about advocacy and community groups and prevention services.
14. Freely file a complaint or appeal and to learn how to do so.
15. Know of their rights and responsibilities in the treatment.
16. Decline participation or withdraw from therapy at any time

NOTE: All patients are given a copy of hipaa and Mr. Norgaard's Consent for Services form which outline some of the above responsibilities and rights.

Patients have the responsibility to:

1> Treat those giving them care with dignity and respect.

2> Give providers the information that they need. This is so providers can deliver quality care and deliver appropriate services.

3> Ask questions about their care. This is to help them understand their care.

4> Follow the treatment plan. The plan of care is to be agreed upon by the member and provider.

5> Follow the agreed upon medication plan.

6> Tell their provider and primary care physician about medication changes, including medications given to them by others.

7> Keep their appointments. Members should call their provider(s) as soon they know they need to cancel visits. Mr. Norgaard requires 24 hours notice for cancellations. The member is responsible for the full fee of the session if the cancellation is not within 24 hours.

8> Let their provider know when the treatment plan is not working for them.

9> Let their provider know about problems with paying fees.

10> Report abuse and fraud.

11> Openly report concerns about the quality of care they receive.

12> Read and understand all of Mr. Norgaard's office policies as outlined in the Consent for Services form. The consent for services form is updated constantly in keeping with the best practices of this profession. Please Mr. Norgaard's website for the latest, updated version.

NOTE: All patients are given a copy of hipaa and Mr. Norgaard's Consent for Services form which outline some of the above responsibilities and rights for the patient.

Mr. Norgaard reserves the right to terminate the psychotherapy relationship with the patient if the patient is unable to follow the office polices.

Mr. Norgaard also reserves the right to terminate the psychotherapy relationship with a patient if he believes in his best clinical judgement and in keeping with the best practices of the profession, that he can no longer help the member. In such cases, Mr. Norgaard will offer resources and referrals to the member and do so in a timely manner.