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PURPOSE OF THE CONSUMER AND FAMILY HANDBOOK

This handbook is written to:

• Spread the word that there is HOPE for persons living with mental illnesses! Mental Health Recovery is real and it is for everyone!

• Make it easier for you to know how to get public mental health services

• Tell you about resources to help you live, learn, work and participate fully in the community

• Help you make good choices about your mental health care.

• Tell you your rights and responsibilities when you are getting public mental health services

• Invite you to let us know that you think about our services, your mental health care, or the care of your child or family member.
CRISIS SERVICES

In the event of a Medical Emergency call 911

Maryland Crisis and/or Youth Suicide Hotline (24 hours) 1.800.422.0009

National Suicide Prevention Hotline
1.800.273.8255 (24 hours)

Suicide Prevention Hotline for Gay Youth
1.800.850.8078 (24 hours)

ALLEGANY COUNTY
Western Maryland Health System Crisis Counselor: 301.723-5274

ANNE ARUNDEL COUNTY
Crisis Response System Warm line: 410.768.5522
Psychiatric Emergencies
Mobile Crisis Team: 410.768.5522

BALTIMORE CITY
Psychiatric Emergencies
Crisis Hotline: 410.433.5175 or 410.752.2272
Mobile Crisis Team:
Baltimore Child and Adolescent Response: 410.433.5175
Baltimore Crisis Response Inc: 410.433.5175

BALTIMORE COUNTY
Crisis Hotline: 410.931.2214
First Step Youth Crisis Center Hotline: 410.655.7655
Psychiatric Emergencies
Mobile Crisis Team: 410.931.2214

CALVERT COUNTY
Walden Crisis Hotline: 301.863.6661
Psychiatric Emergencies
Calvert Memorial Hospital,
Emergency Department: 410.535.8344 ext: 156
100 Hospital Road
Prince Frederick, MD 20678

CAROLINE COUNTY
Life Crisis Center Hotline: 1.800.422.0009
CARROL COUNTY
Maryland Crisis Hotline: 1.800.422.0009
Carroll Hospital Center Emergency Department: 410.871.6700
200 Memorial Avenue Westminster, MD 21157

CECIL COUNTY Psychiatric Emergencies
Union Hospital of Cecil County: 410.398.4000 or 443.406.1370
106 Bow Street
Elkton, MD 21921

CHARLES COUNTY Psychiatric Emergencies
St. Mary’s Hospital: 301.475.8981
25500 Point Lookout Road
Leonard Town, MD 20650

DORCHESTER COUNTY
Life Crisis Center Hotline: 1.800.422.0009

FREDERICK COUNTY Psychiatric Emergencies
Mobile Crisis Team: 301.662.2255
Frederick Memorial Hospital, Emergency Department: 240.566.3904
400 W.7th Street
Frederick, MD 21701

GARRETT COUNTY Psychiatric Emergencies
Garrett County Memorial Hospital, Emergency Department: 301.533.4000 ext 4554
251 N. 4th Street
Oakland, MD 21550

HARFORD COUNTY Psychiatric Emergencies
Mobile Crisis Team: 410.638.5248 and
Upper Chesapeake Medical Center,
Emergency Department: 443.643.2000
500 Upper Chesapeake Drive
Bel Air, MD 21014

Harford Memorial Hospital,
Emergency Department: 443.843.5500
501 South Union Avenue
Havre de Grace, MD 21078
**HOWARD COUNTY**
Grassroots Crisis Intervention Center: 410.531.6677 or 410.531.6006
**Psychiatric Emergencies**
Mobile Crisis Team: 410.531.6677

**MID-SHORE COUNTIES**
*(Caroline, Dorchester, Kent, Queen Anne, Talbot)*
**Psychiatric Emergencies** 1.800.422.0009 or 1.800.310.7273
**24-7 Eastern shore Helpline** 1.888.407.8010

**MONTGOMERY COUNTY**
Crisis Center Hotline: 301.738.2255
**Psychiatric Emergencies**
Mobile Crisis Team: 240.777.4000

**PRINCE GEORGE’S COUNTY**
Crisis Response System Hotline: 301.927.4500
**Psychiatric Emergencies**
Mobile Crisis Team: 301.429.2185

**SAINT MARY’S COUNTY**
Walden Crisis Line: 301.863.6661
**Psychiatric Emergencies**
St. Mary’s Hospital: 301.475.8981
25500 Point Lookout Road
Leonard Town, MD 20650

**SOMERSET COUNTY**
Department of Emergency Services:
After Hours Dispatcher 410.651.2633

**WASHINGTON COUNTY**
**Psychiatric Emergencies**
Washington County Health System, 
Emergency Psychiatric Services: 301.790.8688
251 East Antietam Street
Hagerstown, MD 21740

**WICOMICO COUNTY**
Life Crisis hotline: 410.749.4357 or 1.800.422.0009
**Psychiatric Emergencies**
Regional Medical Center: 410.543.7160
100 E. Carroll Street
Salisbury, MD 21801
**WORCESTER COUNTY**
Crisis Hotline: 410.749.4357

**Psychiatric Emergencies**
Peninsula Regional Medical Center: 410. 543.7160 or 410.546.6400
100 E. Carroll Street
Salisbury, MD 21801

Atlantic General Hospital: 410.641.1100
9733 Healthway Drive
Berlin, MD 21811
Mental Health Recovery

As long as there have been mental illnesses there has been recovery. For years it was not widely understood. Today is an exciting time for anyone who cares about their mental health. Research shows that people with mental illness do recover. Consumers have new tools to improve their lives and make a difference in the public mental health system. Together we are expanding opportunities for consumers to live full lives in their communities and recover from illnesses once thought to be incurable.

Recovery Defined:
Recovery refers to the process in which persons are able to live, work, learn and participate fully in their communities. For some individuals, recovery is the ability to live a fulfilling and productive life despite a disability. For others, recovery implies the reduction or complete remission of symptoms. Science has shown that having HOPE plays an integral role in an individual’s recovery.

*The President’s New Freedom
Commission on Mental Health

Recovery Vision
A vision is a clear picture of the future or the ideal present. A vision inspires and guides our actions. ValueOptions* vision for mental health recovery is: The Expectation is Recovery! All people with mental illnesses can recover and participate fully in a life in the community.

Having a vision for your own life can help you to achieve great things.

* View full report at: www.mentalhealthcommission.gov or call 1.877.726.4727 to order a copy.
Hope
Having a vision that includes your hopes and dreams! Setting your own goals and staying free from negative predictions

Personal Responsibility
Relying on yourself, with help from others, while working to control your life and your symptoms. Making choices that reflect your life priorities.

Support
Recognizing that recovery is not a journey that anyone walks alone. Drawing on support from friends, family and healthcare professionals.

Education
Learning all there is to know about your health, wellness, symptoms and treatment, in order to be equipped to make good decisions

Self-Advocacy
“Going for it” with courage, persistence and determination. Expressing yourself clearly and calmly in order to get your needs met.

Spirituality
Finding meaning and purpose in your life. Gaining a sense of identity, based on your own values and beliefs, which may include your relationship with the divine or a power greater than yourself.
Consumer Recovery in Maryland

Recovery is a reality experienced daily by people diagnosed with a mental illness. It is important to know that recovery is unique to each person. Your recovery will be different than your peers. Read what some consumers in Maryland shared with us about their recovery. We invite you to think about and write down your own definition.

“Recovery is being able to understand my illness and being able to live with it, not be controlled by it. Recovery means being able to cope in a positive way with life and the natural triggers that come with having a mental illness. It is accepting one’s past faults and embracing the everyday progress and successes. Recovery is a life-long process and each day I wake up ready to go further on that journey.”

• “Recovery means rising above my shortcomings while recognizing my vulnerability and coming out stronger on the other side to be my own personal role model to follow.”

• “Recovery is a life-long journey of discovering who I am as a person regardless of what mental illness label I wear.”

• “Recovery: having a peaceful mind, utilizing my choices in my recovery. And realizing, it’s not what’s wrong with me, but understanding what happened to me.”

• “Recovery from mental illness is like recovery from any other chronic illness. By controlling symptoms one gets on with quality living. Controlling symptoms may include lifestyle changes and new professional goals as well as medication. Recovery is getting back to quality of personal life and contributing to the community.”

• “Work and purpose are integral to my recovery, including control over finances, economic independence, and saving for the future. Accumulation of assets and property, unfortunately, are denied to the majority of people with psychiatric disabilities (especially those on needs-based programs), so that recovery without these aspects, is, well, a difficult road indeed. Economic empowerment is a key element in recovery from severe mental illness; poverty is antithetical to wellness, unless one is exceptionally well adjusted and/or enlightened!”

• “Recovery is recognizing that life is a struggle that I can bare”

• “Recovery sometimes is two steps forward, one step back. When it is that way, if one is truly in recovery, one would choose to feel pride about the one step forward, not waste time lamenting about the one step back. Recovery is about learning—and forgetting—and learning, and re-learning. Its’ about realizing that people really can change—again, it’s about what a person chooses to see.”
• “Before I knew what was wrong with me, mental-illness-wise, I was just out there feeling, thinking, behaving like anyone else but not feeling very good about the responses I was getting from other people or how I was feeling myself. There was a lot of confusion, shame, low self-esteem and seeming failure. As the process of getting a diagnosis— a name for all this—and finding the right medication, therapy and support has proceeded. I have begun to understand I am not alone; that there are others like me; there are things that work to help me live a fulfilling life, despite having a chronic illness; I can learn to manage. I can now not be so hopeless, hard on myself or carry the burden of the dichotomy of perfect or failure. I am finding my way to a comfortable competence and confidence while taking care of myself when I am unable to be best.” Sandra Rogers

Recovery in Your Own Words:
Resilience

The word “resilience” describes the ability of an object to resume its previous shape after being hit or damaged. Picture a stress ball or a basketball. You can squeeze it or throw it against the wall. Temporarily the ball may be damaged; but it returns to its previous round shape.

Research shows that resilience also applies to children, youth and adults. Resilient people have the ability to survive and overcome their problems and live successful lives. Problems such as chronic illness, mental or emotional issues, poverty, trauma, disabilities, etc. cannot keep a resilient person down forever.

Do you know why? Resilient people have protective factors. These factors help you go through the tough times and go on to achieve your goals. Protective factors come from inside of you and outside. Inside factors can include hope, a positive attitude, self-confidence, strong faith and self-determination. Outside factors can include, a loving family, friends, teachers, peer support and health providers. Advocacy groups such as On Our Own of Maryland, National Alliance on Mental Illness and Maryland Coalition of Families are great examples of peer support that can help enhance and build resilience in consumers and families.

What protective factors help you overcome problems and succeed in your life? How do they help you? Make a list and share with your mental health providers.
ValueOptions® is the nation’s largest independent behavioral health company. Our mission is to help people live their lives to the fullest potential. We are experts in the management of behavioral health, mental health and substance abuse issues. We provide services through public and commercial contracts. Our service centers are located in various states.

What is ValueOptions® Maryland?

ValueOptions® Maryland provides services to people enrolled in the public mental health system. We have a contract with the State Department of Health and Mental Hygiene. Our job is to help Mental Hygiene Administration and the Core Service Agencies manage public mental health services. Our goal is to ensure you get the right services at the right time and in the right amount.

What Services Does ValueOptions® Maryland Provide?

- Clinical care managers take calls 24 hours 7 days a week
- Receive requests to authorize services from your provider
- Confirm that services requested are based on your goals and needs
- Verify that you were involved in the decision to request services
- Ensure that services requested meet medical necessity
- Help you find providers
- Provide 24 hour internet access to mental health benefits information through MemberConnect
- Mail Explanation of Benefits letters every 6 months
- Provide up-to-date health information and resources through AchieveSolutions®
- Advocacy and support to you and your family
- Process complaints, grievances and appeals
- Training and Education

Contact Us:

Toll Free: 1.800.888.1965 TTY: 1.866.835.2755

Hours of Operation: Monday through Friday 8:00am to 6:00pm

1099 Winterson Road, Suite 200, Linthicum, MD 21090

Visit our Website: http://maryland.valueoptions.com
Maryland Public Mental Health System

Mental Hygiene Administration

Mental Hygiene Administration (MHA) is responsible for public mental health services in Maryland. Most services are funded through a fee-for-service system. Fee-for-service is a payment system where payments are made for each service at a pre-set amount. Services are provided through facilities run by MHA or community agencies. MHA operates psychiatric hospitals and residential treatment centers for children and youth.

In the community, MHA funds mental health services for people with Medicaid. MHA also provides services to people, who because of the severity of their illness and financial need can get help from the State. Core Service Agencies (CSA) provide these services. CSAs contract for services that are not paid by the Fee For Service system.

Contact Information

Mental Hygiene Administration
Spring Grove Hospital Center – Dix Building
55 Wade Avenue
Catonsville, MD 21228
Website: www.dhmh.state.md.us/mha/

General Questions: 410.402.8300, TTY/MD Relay number: 1.800.735.2258

Adult Services: 410.402.8463

Child and Adolescents: 410.402.8462

Compliance: 410.402.8448

Consumer Affairs: 410.402.8447 or 410.402.8407

Forensic Services: 410.724.3242

Special Needs Populations: 410.724.3242
Core Service Agencies
www.behavioralhealth.org

Core Service Agencies (CSA) are local mental health authorities that plan and manage mental health services at the city or county level. CSAs are part of local governments and work closely with the Mental Hygiene Administration, providers and ValueOptions® Maryland to help you get the best services.

ALLEGANY COUNTY
Allegany County Mental Health System’s Office
P.O. Box 1745
Cumberland, Maryland 21501
Phone: 301.759.5070    Fax: 301.777.5621

ANNE ARUNDEL COUNTY
Anne Arundel County Mental Health Agency
Box 6675, MS 3230
1 Truman Parkway, Suite 101
Annapolis, Maryland 21401
Phone: 410.222.7858    Fax: 410.222.7881

BALTIMORE CITY
Baltimore Mental Health Systems, Inc.
201 East Baltimore Street, Suite 1340
Baltimore, Maryland 21202
Phone: 410.837.2647    Fax: 410.837.2672

BALTIMORE COUNTY
Bureau of Mental Health of
Baltimore County Health Department
6401 York Road, Third Floor
Baltimore, Maryland 21212
Phone: 410.887.3828    Fax: 410.887.3786

CALVERT COUNTY
Calvert County Core Service Agency
P.O. Box 980
Prince Frederick, Maryland 20678
Phone: 410.535.5400    Fax: 410.535.5285

CARROLL COUNTY
Carroll County Core Service Agency
290 South Center Street,
Westminster, Maryland 21158-0460
Phone: 410.876.4440    Fax: 410.876.4929
CECIL COUNTY
Cecil County Core Service Agency
401 Bow Street
Elkton, Maryland 21921
Phone: 410.996.5112 Fax: 410.996.5134

CHARLES COUNTY
Department of Health Core Service Agency
P.O. Box 1050
10480 Theodore Green Blvd.
White Plains, Maryland 20695
Phone: 301.609.5757 Fax: 301.609.5749

FREDERICK COUNTY
Mental Health Management Agency of Frederick County
22 South Market Street, Suite 8
Frederick, Maryland 21701
Phone: 301.682.6017 Fax: 301.682.6019

GARRETT COUNTY
Garrett County Core Service Agency
1025 Memorial Drive
Oakland, Maryland 21550-1943
Phone: 301.334.7440 Fax: 301.334.7441

HARFORD COUNTY
Office on Mental Health
125 N. Main Street
Bel Air, Maryland 21014
Phone: 410.803.8726 Fax: 410.803.8732

HOWARD COUNTY
Howard County Mental Health Authority
9151 Rumsey Road, Suite 150
Columbia, Maryland 21045
Phone: 410.313.7350 Fax: 410.313.7374

MID-SHORE COUNTIES
(Includes Caroline, Dorchester, Kent, Queen Anne and Talbot Counties)
Mid-Shore Mental Health Systems, Inc.
28578 St. Mary’s Court, Suite 1
Easton, Maryland 21601
Phone: 410.770.4801 Fax: 410.770.4809
MONTGOMERY COUNTY Montgomery County Government
Department of Health & Human Services
Montgomery County Government
401 Hungerford Drive, 1st Floor
Rockville, Maryland 20850
Phone: 240.777.1400 Fax: 301.279.1692

PRINCE GEORGE’S COUNTY
Department of Family Services
Mental Health & Disabilities Division
Prince George’s County Core Service Agency
6420 Allentown Road
Camp Springs, MD 20748
Phone: 301.985.3890 Fax: 301.985.3889

ST. MARY’S COUNTY
St. Mary’s County Department of Aging and Human Services
23115 Leonard Hall Drive, PO Box 653
Leonardtown, Maryland 20650
Phone: 301.475.4200 ext. 1680 Fax: 301.475.4000

WASHINGTON COUNTY
Washington County Mental Health Authority
339 E. Antietam Street, Suite #5
Hagerstown, Maryland 21740
Phone: 301.739.2490 Fax: 301.739.2250

WICOMICO/SOMERSET COUNTIES
Wicomico Somerset Regional Core Service Agency
108 East Main Street
Salisbury, Maryland 21801
Phone: 410.543.6981 Fax: 410.219.2876

WORCESTER COUNTY
Worcester County Core Service Agency
P.O. Box 249
Snow Hill, Maryland 21863
Phone: 410.632.1100 Fax: 410.632.0065
Who is Eligible to Receive Services?

You must meet certain conditions to receive services. The conditions may vary depending on the type of service. Medicaid recipients are eligible to receive full benefits and do not pay copayments or deductibles.

A. If you do not receive Medicaid you may be eligible if you meet ALL of the conditions listed below:

• You require treatment for a mental health disorder covered by the PMHS
• You meet financial need criteria. Your income is at 200% of the Federal poverty level
• You have a Social Security Number that can be verified
• You are a Maryland resident

• You applied for Medicaid, Social Security Insurance or Social Security Disability Insurance because you have an illness/disability for a period of 12 months or more (or are expected to)

B. In addition to meeting the above conditions, you must meet ONE condition below:

• You received services in the PMHS in the past two years
• You receive Social Security Disability Insurance for mental health reasons
• You are homeless within the state of Maryland
• You were incarcerated within the last 3 years
• You were discharged from a Maryland state hospital within the last 3 months
• You are on a conditional release from a Maryland state hospital
• You have an urgent need for outpatient mental health services and received approval from a Core Service Agency
• You are a Veteran

You may have insurance and be eligible for services. You must meet conditions A and B above and the conditions below:

• You are a Medicare beneficiary
• Medicare does not cover the service being requested by your provider
• You do not have other insurance to cover this service
• Your private insurance mental health benefits are exhausted

Contact your Core Service Agency if your circumstances are different than the ones listed above.
Service Authorization

Here is how it works:

Call ValueOptions® Maryland Toll Free: 1.800.888.1965 or TTY: 1.866.835.2755 to request services or:

1. Call a provider and make an appointment
2. Your provider can request authorization for services
3. Family members, primary care physicians, or members of the community can also call and request services for someone
4. We confirm that the request is based on your needs and goals and that you were involved in the decision. Services requested must meet medical necessity.
5. In most cases, we authorize services requested by a provider
6. If not, we will work with you and your provider to find a service that meets your needs
7. Our goal is not to deny service, but to work together to find the best fit with your care

Medical Necessity

Medical necessity means providing services that best fit your health needs. At times mental illness can make it hard for you to remember all of the steps to take care of yourself or to get a job. Psychiatric Rehabilitation Programs and Supported Employment Programs can help you learn and practice ways to overcome such negative effects. These services help you gain skills, use resources and find the support needed to achieve your goals. Medical necessity ensures that a service does not get in the way of your ability to live, work, learn and fully take part in community life. Learning about medical necessity can help you work with your providers to make better choices about your mental health care. You are not required to participate in services that are not clinically indicated for you.

HealthChoice Members

HealthChoice is the name of Maryland’s managed care program. HealthChoice provides health care to most Medicaid recipients. Members can access public mental health services by following the steps outlined above. ValueOptions® will work with you and your primary care provider to coordinate care.

Contact ValueOptions® Maryland

Call Toll Free: 1.800.888.1965 or TTY: 1.866.835.2755

Service Center Hours of Operations: Monday through Friday 8:00 am to 6:00 pm EST Clinical staff can be reached 24 hours 7 days per week.

Website at http://maryland.valueoptions.com
# Key Public Mental Health Services

You must meet eligibility and medical necessity to receive services. For detailed descriptions call ValueOptions® Maryland 1.800.888.1965

<table>
<thead>
<tr>
<th>Service</th>
<th>Description</th>
<th>People Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Management</td>
<td>Connects you to community services and resources</td>
<td>Children, Youth, Adults</td>
</tr>
<tr>
<td>Community Support</td>
<td>Helps you put new skills into practice so you can participate in your community</td>
<td>Children, Youth, Adults</td>
</tr>
<tr>
<td>In-patient Psychiatric Services</td>
<td>Treatment provided in hospitals</td>
<td>Children, Youth, Adults</td>
</tr>
<tr>
<td>Mental Health Vocational Programs (Supported Employment)</td>
<td>Helps you prepare for work, find and keep a job and make job decisions</td>
<td>Ages 16 yrs +</td>
</tr>
<tr>
<td>Mobile Crisis Services</td>
<td>Mental health teams go to community locations where a person is in crisis. Services help consumer reduce uncomfortable symptoms and get back to feeling safe</td>
<td>Children, Youth, Adults</td>
</tr>
<tr>
<td>Outpatient Mental Health Centers</td>
<td>Treatment provided by mental health professionals in a community clinic or group practice</td>
<td>Children, Youth, Adults</td>
</tr>
<tr>
<td>Psychiatric Day Treatment (partial hospitalization)</td>
<td>Intensive, non-residential treatment for at least 4 consecutive hours per day in a hospital or free standing community mental health program</td>
<td>Children, Youth, Adults</td>
</tr>
<tr>
<td>Psychiatric Rehabilitation Program</td>
<td>Services improve or restore skills needed to live work, learn and participate in the community</td>
<td>Adults</td>
</tr>
<tr>
<td>Psychiatric Rehabilitation Program for Minors</td>
<td>Services develop or restore age appropriate skills needed to live, learn and participate in school, family and community</td>
<td>Children, Youth</td>
</tr>
</tbody>
</table>
### Evidenced Based Practices

Evidenced-based practices (EBP) are treatment approaches shown through research to improve outcomes for people receiving them. These treatment approaches can help you develop skills and get resources and supports to live the life you want in the community. Mental Hygiene Administration (MHA) worked closely with the University of Maryland to implement three EBP for adults in the public mental health system. MHA monitors EBP programs closely to ensure that services are being delivered according to guidelines from the research that established the EBP.

**Assertive Community Treatment (ACT)**

ACT is intensive community services for people with severe mental illness who may be homeless and at high risk for hospital admission. ACT uses a team approach. The team usually includes a psychiatrist, nurse and case managers. Staff is available 24-hours. Team members share caseloads. They work together to deliver services rather than referring consumers to other agencies. Services are provided for as long as they are needed.

<table>
<thead>
<tr>
<th>Psychiatric Residential Facility Demonstration Waiver (also called “RTC Waiver”)</th>
<th>Services provide community-based alternatives to placement in a residential treatment center (RTC)</th>
<th>Children and Youth Ages 16 – 21 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Crisis Services</td>
<td>Short term intensive mental health services and support to prevent unnecessary psychiatric inpatient admissions</td>
<td>Children, Youth, Adults</td>
</tr>
<tr>
<td>Residential Treatment Centers (RTC)</td>
<td>Campus-based intensive treatment setting. Children may be admitted to RTCs when services available in the community cannot meet their needs</td>
<td>Children, Youth Ages 16 - 21 years</td>
</tr>
<tr>
<td>Residential Rehabilitation Programs</td>
<td>Consumers live in a supportive environment that enables them to develop daily skills for independent living</td>
<td>Transition-age Youth Ages 16 - 24, Adults</td>
</tr>
<tr>
<td>Respite Services</td>
<td>Enhanced support to caregivers and temporary relief from the responsibilities of caring for someone with a mental illness</td>
<td>Children, Youth, Adults</td>
</tr>
<tr>
<td>Therapeutic Nursery Programs</td>
<td>Developmental and mental health services for children at risk for or who are emotionally disturbed and families</td>
<td>Children Ages Birth – 5 years</td>
</tr>
</tbody>
</table>
Family Psychoeducation (FPE)

Having a mental illness can be hard on the whole family. Do you ever feel like your family doesn’t understand what you are going through or how to help you? Family Psychoeducation is a way your family can learn what kind of help you would like from them. Together you learn ways to support your recovery. You learn how to solve problems that interfere with your recovery and family relationships. Research shows that when you and your family learn to solve problems related to your illness you will have fewer relapses, improved health for family members, less hospital admissions and other benefits.

Supported Employment

Research shows that people with mental illness want jobs and can work with the right support. Supported Employment helps you find and keep jobs in the community that pay at least minimum wage. The job search begins soon after you express an interest in working. Money earned from a job can provide you with more choices about where to live, how to spend your free time and what to buy. Many people find the structure and routines that come with working a helpful part of recovery.

Find Approved Programs

Call ValueOptions® Maryland Toll Free: 1.800.888.1965 or TTY 1.866.835.2755

Your Rights

You are a partner in your mental health care and have the right to:

- Be in a safe environment and be treated with respect and dignity
- Receive appropriate humane treatment and services in the least restrictive setting that is consistent with your treatment needs and legal requirements
- Know the names and titles of providers providing care and treatment
- Obtain medically necessary services that are a covered benefit from participating Medicaid providers
- Refuse to participate in physically intrusive research conducted by a Provider or facility
- Ask questions and discuss your care and treatment with your doctor and provider(s) including potential risks and benefits of prescribed treatment
- Privacy and confidentiality related to all aspects of care
- Be protected from neglect and physical, emotional, sexual or verbal abuse
- Be free from restraints and seclusion except in certain emergency situations when the consumer presents a danger to self, others or the therapeutic environment
- Visit and have private conversations with a lawyer or clergy of your choice
- Participate in developing your individual treatment goals and/or service plan and all decisions made regarding your mental health care
- Get information about any co-payments/fees that must be paid
- Refuse treatment or medications unless ordered by the courts, or when there is an emergency, or if you are admitted to the hospital involuntarily and medication is approved by a clinical review panel
• Be given information about the Public Mental Health System, its services and providers, as well as your rights and responsibilities as a consumer
• Choose providers from the Maryland Public Mental Health System approved provider network
• Refuse care and services from a provider
• Voice complaints and be told how to file grievances and appeals about the Public Mental Health System or services provided
• See and read your medical/treatment records, unless the provider determines it may be harmful, and then the provider will explain this to you
• Vote
• Receive, hold and dispose of personal property unless restricted for medical and/or security reasons

**Your Responsibilities**

Because you are a partner in your mental health care you also have responsibilities to:

• Take charge of your recovery each day. Make choices that help you stay healthy and meet your goals
• Participate in activities that promote physical, emotional, and spiritual health
• Learn about your mental illness and treatment options
• Understand benefits, risks and side effects of medication so you can make informed choices. Tell your health care provider and/others if you are having side effects from medications
• Ask for support when needed and accept support from people you trust
• Give your therapist or doctor the information he or she needs to provide you with the best care
• Actively participate in treatment decisions. Ask questions and offer suggestions to your therapist or doctor. Remember it is your recovery
• Be on time for appointments. Call the office if you cannot keep an appointment
• Eat well, exercise, and get enough rest
• Plan ahead for psychiatric emergencies with people you trust to carry out your desires and give them a copy of your crisis plan
• Apply for entitled benefits (e.g., Medicaid, Medicare, etc.)
• Report suspected fraud or abuse
Confidentiality

Your Protected Health Information

We keep some Protected Health Information (PHI) about persons served in the public mental health system. We can use it to give you good care, and for activities of payment. We can only use PHI in the following ways:

- For treatment, we may share your health information with those who are involved in providing your healthcare
- For coordinating your care among providers, or between a provider and an insurance company
- With health professionals who have given you services to pay claims
- To look at how consumers use services so we can provide better care
- When required by law. We will share PHI when federal, state or local law requires it. We will share PHI if we get a court order or if your records are subpoenaed
- To collect information about disease or injury to report it to a public health authority
- In order to avoid a serious threat to health or safety, we may share PHI with law enforcement or other persons who might prevent or reduce the threat of harm

Mental Hygiene Administration’s Office of Consumer Affairs Advisory Council developed the Community Mental Health Programs Model Bill of Consumer Rights and Responsibilities. You can view the full document in the Appendices section of the handbook.
YOUR INPUT IS VALUED

Complaints

ValueOptions® Maryland wants to hear from you. Contact us if you have concerns about our services or your mental health services. We will work to resolve your concerns right away when possible. Please review the information below to learn how to file a complaint. Complaints are handled by our Quality Management Department.

Quality of Service Complaints

This type of complaint relates to not being satisfied with a service or process from ValueOptions® Maryland.

Quality of Care Complaints

This type of complaint relates to not being satisfied with treatment or services from a mental health provider or facility.

What to Include in Your Complaint

• Briefly describe the incident or your concern
• Dates and time
• People involved
• Contact information (optional): name, telephone, mailing address

How to Submit a Complaint

You have several choices:
• In person at our office
• Telephone: Toll Free 1.800.888.1965 or TTY: 1.866.835.2755
• Fax: 1.877.381.5571
• Mail to: ValueOptions® Maryland
  Attention: Complaints
  1099 Winterson Road, Suite 200
  Linthicum, Maryland 21090

What Happens After You Submit a Complaint?

Quality of Service Complaints – Staff coordinates the investigation of these complaints.

Quality of Care Complaints – Staff forwards these complaints to the Core Service Agency to investigate.
Time Frames

Staff sends a letter within (5) calendar days to let you know we received your complaint. We investigate and resolve complaints within (30) calendar days. We mail another letter to you within this time period that explains:

• Action taken and/or planned to resolve complaint
• If no action is possible or appropriate
• Your right to request a Resolution Review if you do not like the decision
• You have 90 calendar days of receipt of our letter to make your request

Resolution Review Process

A resolution review is similar to an Appeal. Our Director of Quality Management coordinates this level of review. We mail a letter within (5) calendar days informing you that we received your request. We complete our investigation and send you another letter with the decision within (30 days) of receipt of your request.

Collaboration on Complaints

We forward all complaints to Mental Hygiene Administration (MHA) daily. MHA has a Complaint Review Committee that meets monthly with ValueOptions and Core Service Agency representatives.

Office of Health Care Quality

You have a right to file a complaint with the Office of Health Care Quality (OHCQ). OHCQ is a State agency within the Department of Health and Mental Hygiene. They monitor the quality of care in health care facilities and community residential programs. They are the licensing and approval agent for Mental Hygiene Administration. Contact information for OHCQ:

Office of Health Care Quality
Community Mental Health Unit
Spring Grove Hospital Center
Bland Bryant Building
55 Wade Avenue
Catonsville, Maryland 21228

Call Toll Free: 1.877.402.8218 or 410.402.8218
Submit a complaint form on the internet: http://www.dhmh.state.md.us/ohcq/

Provider Complaints

You have a right to file a complaint with your provider if you are not satisfied with services or have a concern about staff. Health care programs licensed or approved by the OHCQ are required to have a written complaint process. Programs must provide you with a copy if you ask for it. Provider must resolve your complaint in (30) days.
Grievances and Appeals

In the public mental health system you have the right to file a grievance if you disagree with a decision by ValueOptions® to not authorize services requested by a provider. This section provides answers to general questions about filing grievances and appeals. We encourage you to discuss specific questions with your provider or contact ValueOptions® or your Core Service Agency.

Definitions

Denial

A denial is a decision by ValueOptions® to not authorize services requested by a provider. Our psychiatrist will deny services if they review your medical information and find that the level of services requested are not medically necessary. Only psychiatrists may deny services based on medical necessity. ValueOptions® will work with you, the provider, Core Service Agency and others to find services that are available and appropriate.

Grievance

A grievance is a process available to consumers to request a formal review of a decision by ValueOptions® to deny services because of medical necessity issues. ValueOptions® provides two levels of grievance following the initial decision to deny services. You may file a grievance when you disagree with the decision.

Appeal

An appeal is a formal process available to request the Core Service Agency, Mental Hygiene Administration, and/or the Office of Administrative Hearings to review a ValueOptions® decision to deny services. You may appeal directly to the Office of Administrative Hearings and skip earlier steps if you are Medicaid recipient.

Office of Administrative Hearings (OAH)

The Office of Administrative Hearings, an independent state agency provides quality, fair and impartial hearings to resolve disputes about action taken by an agency. Administrative Law Judges travel throughout the state to provide hearing in locations that are convenient for Maryland citizens.

Service Authorization

Clinical care managers (CCM) are mental health professionals employed by ValueOptions®. CCMs review and authorize requests for services from providers. Sometimes a CCM is unable to authorize services based on the information received. They will ask your provider for more information. The CCM will authorize services if the additional information supports medical necessity. If not, the CCM may suggest a different level of care and work with your provider to find other services. If the CCM is unable to authorize services he/she will refer your case to a ValueOptions® psychiatrist. If the psychiatrist denies services you will receive a letter from ValueOptions®. The letter explains the reason services were denied and how to file a grievance and Appeal.
File a Grievance

Consumers, providers, and advocates submit grievance request to ValueOptions® by telephone, fax, email or postal mail. Most grievances are filed by providers on your behalf because they understand the policies and procedures in the public mental health system. If you decide to file a grievance, you may request assistance at any time from your provider or advocate of your choice. Here is what happens: If you disagree with the decision you may take either or both of the steps below:

File an Appeal Directly with the Office of Administrative Hearings (OAH).
Medicaid Fair Hearing Appeals are handled by the OAH and must be submitted in writing within (10) business days of the decision to deny services. OAH decisions are FINAL.

File a Level I Grievance with ValueOptions®
Level I grievances must be submitted within (10) business days of the denial. A psychiatrist will review the information and make a decision within (1) hour if the request is for inpatient or urgent services. A decision will be made in (24) hours for non-urgent services. The psychiatrist may refer you to other community support services. ValueOptions® will mail you and your provider a letter with the outcome of the Level I grievance within (2) business days of when the decision is made.

If the Level I grievance decision is to deny services (or approve only part of the services) the letter will inform you of your right to file a grievance at the next level.

File a Level II Grievance
Level II grievances must be submitted within (3) business days of the denial. A different psychiatrist will review your request and make a decision within (1) hour if the request is for inpatient or urgent services. A decision will be made within (24) hours for non-urgent services. ValueOptions® will mail you and your provider a letter with the outcome of the Level II grievance within (2) business days of when the decision is made.

If the Level II grievance decision is to deny services (or approve only part of the services) the letter will inform you of your right to Appeal to the Core Service Agency or the Office of Administrative Hearings.

Appeal Grievance Decisions

File a Level III Appeal- Core Service Agency (CSA)
Level III Appeals must be submitted within 10 business days of the denial. If the CSA authorizes services they will notify ValueOptions® immediately to arrange services. The CSA notifies you of the decision within 5 business days for inpatient or urgent services and within 10 business days for non-urgent services.

If the CSA upholds the denial of services, they will notify you of your right to Appeal to Mental Hygiene Administration.
File a Level IV Appeal – Mental Hygiene Administration (MHA)
Appeals must be submitted in writing within **5 business days** after receipt of the CSA decision. MHA will make a decision and notify you in writing within **15 business days**. MHA’s decision is FINAL for uninsured eligible consumers. MHA will notify Medicaid recipients of their right to a Medicaid Fair Hearing at the Office of Administrative hearings.

File a Level V Appeal – Medicaid Fair Hearing Appeals - Office of Administrative Hearings
Medicaid Fair Hearing Appeals must be submitted in writing within **45 days** of a decision to deny services. Your expenses in connection with the hearing such as transportation and baby-sitting cost will be paid by the Department of Health and Mental Hygiene (DHMH). Attorney fees are not paid. You may call witnesses and present evidence to support your appeal.

Contact Information

ValueOptions Maryland
Toll Free: 1.800.888.1965
Telephone: 410.691.4049 or 410.691.4034
Fax: 1.877.381.5571
Email: Grievances@valueoptions.com
Website: [http://maryland.valueoptions.com](http://maryland.valueoptions.com)
Mail: ValueOptions Grievance Department
1099 Winterson Rd., Suite 200
Linthicum, MD 21090

Core Service Agencies
CSA contact information is listed in the *Maryland Public Mental Health System* section of this handbook.

Mental Hygiene Administration
Telephone: 410.402.8300
TTY/MD Relay: 1.800.735.2258
Website: [www.dhmh.state.md.us/mha/](http://www.dhmh.state.md.us/mha/)
Mail: Mental Hygiene Administration, Attention: Grievances and Appeals
Spring Grove Hospital Center – Dix Building
55 Wade Avenue, Catonsville, MD 21228

Office of Administrative Hearings
Toll Free: 1.800.388.8805
Telephone: 410.229.4100
TTY: 410.229.4267
Fax: 410.229.4111
Website: [www.oah.state.md.us](http://www.oah.state.md.us)
Mail: Office of Administrative Hearings
11101 Gilroy Road
Hunt Valley, Maryland 21031-1301
Choices in your Treatment

Working with providers who believe you can get better is helpful to your recovery. In Maryland, you have the right to choose your providers. It’s okay if your first choice doesn’t work out. Sometimes you may decide to involve family and others with a direct interest in your well-being in your care.

Prepare for Doctor Appointments

Doctor appointments are opportunities for you to exercise choice in your treatment. You will have limited time to share all your thoughts and concerns. Be sure to arrive on time. Preparing ahead will help you and your doctor work as a team. Here are some things you can do to make the most of your time:

• Prior to the appointment write down what you want to talk about
• Practice what you would like to say before your appointment
• Educate yourself about medications. Research current information at the library or on the internet

Shape Your Treatment Plan

Choosing to take more responsibility for your recovery is one of the best gifts you can give to yourself and people you care about. We invite you to shape your treatment plan. One important way to shape your treatment is to be actively involved in creating and updating the plan. A good treatment plan is based on your hopes and dreams. You can work with your treatment team and people you trust to think of goals that will help you reach those hopes and dreams and overcome problems that may be keeping you from them for now.

Treatment plans are most effective when they are:

• Written in your own words
• Built upon your personal strengths
• The result of real teamwork between you and your treatment team
• Based on your choices within the options that are medically appropriate

On the next pages are recovery tools that can help you shape your treatment plan and develop life goals. Make blank copies of the Personal Strengths and Getting Down to Goals forms. Answer the questions and jot down any thoughts. Keep this information as a reminder of what you want to accomplish and what you need to do it.

Wellness and Recovery Centers are encouraged to use the Personal Strengths and Getting Down to Goals tools during peer support groups to stimulate general discussions and ideas around setting goals.
Getting down to Goals

Figuring out your goals can be a challenge. Sometimes it’s easy to know exactly what you want and where to start. Other times it may be hard. The following questions may help you decide what you want to work on right now in your life.

**Interests and Activities**
This might include your hobbies, like playing music, writing, collecting, or whatever else you like to do. What are some of your interests or hobbies? What do you love to do? Are there things you would like to do more of?

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Is this something you want to work on right now?
☐ Yes ☐ No/Maybe

If yes, write a GOAL:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Who can help you?

**Living Environment**
Are you satisfied with your living situation right now? Do you like your neighborhood? Maybe you want to get your own place, or improve relations with your roommate? How would you like to change your living situation, if at all?

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Is this something you want to work on right now?
☐ Yes ☐ No/Maybe

If yes, write a GOAL: Who can help you?
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
**Employment**
Would you like to work? What would you like to do? If you’re working, do you enjoy your job? What would you like to improve about your work situation?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Is this something you want to work on right now?
☐ Yes  ☐ No/Maybe  If yes, write a GOAL:
______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Who can help you?
______________________________________________________________________________

---

**Learning**
Are you interested in going back to school? Would you like to get your GED or go to college? What kinds of things are you interested in studying?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Is this something you want to work on right now?
☐ Yes  ☐ No/Maybe  If yes, write a GOAL:
______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Who can help you?
______________________________________________________________________________
**Financial**
How is your financial situation? Is money something you worry about? Would you like help in managing your money or budgeting?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Is this something you want to work on right now?
☐ Yes  ☐ No/Maybe  If yes, write a GOAL:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Who can help you?

**Lifestyle and Health**
Do you have any concerns about your overall health? What do you do to take care of your health? Are you interested in taking better care of your health? Are there any habits you’d like to change, such as smoking?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Is this something you want to work on right now?
☐ Yes  ☐ No/Maybe  If yes, write a GOAL:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Who can help you?
**Faith and Spirituality**
How important is faith/spirituality in your life? What type of spiritual or faith activities do you participate in? How satisfied are you with the opportunities to participate in your spiritual practice or attend the congregation of your choice right now?


**Is this something you want to work on right now?**

☐ Yes  ☐ No/Maybe  If yes, write a GOAL:


**Relationships**
Who are the most important people in your life right now? Who do you spend your time with? Do you have a romantic or intimate relationship? Are you satisfied with your sex life? Is there anyone you’d like to spend more time with?


**Is this something you want to work on right now?**

☐ Yes  ☐ No/Maybe  If yes, write a GOAL:


Who can help you?
Psychiatric Treatment and Mental Health Symptoms
How much are your psychiatric symptoms interfering with your life? How much are your medications helping you? Are you being bothered by medication difficulties or side effects? How do you cope with your symptoms?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Is this something you want to work on right now?
☐ Yes  ☐ No/Maybe  If yes, write a GOAL:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Who can help you?

______________________________________________________________________________

Make copies and share with your treatment team and family and friends involved in your recovery. Keep a copy for yourself and review regularly as a reminder of what you want to accomplish.

Date: ______________________________

Personal Strengths

We all have different personal strengths and abilities. These are what make us unique. Sometimes it can be hard to remember though. Write them down. Knowing your strengths will help you work towards and accomplish the things you want from your life. The following statements may help you identify some of your own:

My best qualities as a person are:

__________________________________________________________________________________________
__________________________________________________________________________________________

Something I would NOT change about myself is:

__________________________________________________________________________________________
__________________________________________________________________________________________

I am most proud of:

__________________________________________________________________________________________
__________________________________________________________________________________________

My Sense of humor is:

__________________________________________________________________________________________
__________________________________________________________________________________________

The times I am most at peace are when:

__________________________________________________________________________________________
__________________________________________________________________________________________

People like that I am (people say they like my . . .)

__________________________________________________________________________________________
__________________________________________________________________________________________

I feel really good about myself when:

__________________________________________________________________________________________
__________________________________________________________________________________________

Prevent and Prepare for a Crisis

You may never need to use a crisis hotline or a mobile crisis team. Preparing for a crisis does not mean that one will occur. However, it is wise to prepare for a crisis ahead of time so you have the support and plan if you ever need them. You have access to a number of resources to help you prevent and prepare for a crisis.

- Advance Directive for Mental Health
- Doctor
- Family and friends
- Mental health workers
- Peers
- Treatment plan
- ValueOptions®
- Wellness and Recovery Action Plan (WRAP®)
- Wellness and Recovery Centers

You can have a say in how you are helped, and by whom, if you experience a crisis. You can share what has worked and not worked for you in the past. Your crisis plan may include things that are not health related such as; who do you want to take care of pets or check on your home while you are away? A crisis plan is NOT a legal document. A crisis plan is not the same as a Wellness Recovery Action Plan (WRAP®). However, WRAP® includes a detailed section for crisis planning and other information to help you live well every day. You can use the outline below as a guide to develop your crisis plan. Discuss your crisis plan with the people you want to help your during a crisis such as family, friends, therapist, psychiatrist and others.

Sample Crisis Plan Outline

Name:_____________________________________________________________________________________

Address:___________________________________________________________________________________

Phone:_____________________________________________________________________________________

My Mental Health Treatment Supports includes (list in order of contact):

Therapist:__________________________________________________________________________________

Phone:_______________________________________EmergencyPhone________________________________

Psychiatrist:________________________________________________________________________________

Phone:__________________________________EmergencyPhone____________________________________

PrimaryCarePhysician:________________________________________________________________________

Phone_____________________________________________________________________________________
My Other Support Team includes (list in order of contact):

If possible, include five people. This will increase the chances that someone is available should you need them. Having five people allows you to divide the tasks among the group, helps to ensure someone is available and prevents one person from becoming overwhelmed.

1. Name:_____________________________________ Relationship:__________________________
   Address:________________________________________________________________________
   Phone:__________________________________________________________________________

2. Name:______________________________________ Relationship:__________________________
   Address:_________________________________________________________________________
   Phone:___________________________________________________________________________

3. Name:______________________________________ Relationship:___________________________
   Address:_________________________________________________________________________
   Phone:____________________________________________________________________________

4. Name:_______________________________________ Relationship:____________________________
   Address:____________________________________________________________________________
   Phone:______________________________________________________________________________

5. Name:________________________________________Relationship:______________________________
   Address:_____________________________________________________________________________
   Phone:_____________________________________________________________________________
What I want to happen if I am experiencing a mental health crisis?

Suggestions: Use separate sheets of paper for various types of crisis situations and your plans to resolve them. Focus on specific situations and the resolution for each including the support persons who can best help you in each particular situation.

Crisis: ____________________________________________________________

The Situation: _____________________________________________________

My Plan: __________________________________________________________

Support Person(s) Name: ____________________________________________

Phone: ____________________________________________________________

Crisis: ____________________________________________________________

The Situation: _____________________________________________________

My Plan: __________________________________________________________

Support Person(s) Name: ____________________________________________

Phone: ____________________________________________________________

Signature___________________________________________

Date______________________________________________
NOTICE: This is an important legal document. 
Before signing this document, you should know these important facts.

Introduction
Maryland law gives the right to anyone 16 years of age and over to be involved in decisions about their mental health treatment. However, a parent or guardian of a person under the age of 18 years may authorize treatment, even over the objection of the minor. The law also notes that at times, some persons are unable to make treatment decisions. Maryland law states that you have the right to make decisions in advance, including mental health treatment decisions, through a process called advance directive. An advance directive can be used to state your treatment choice or can be used to name a health care agent, that is someone that will make health care decisions for you.

A. If you are a person with a mental illness, this document provides you the chance to take part in a major way in your mental health care decisions when you are not able to. This document allows you to express your consent or refusal to medications for your mental illness and other health care decisions, including use of seclusion and restraints. Please know that Maryland law allows a health care provider to override your refusal for medication for a mental disorder in limited situations if you are involuntarily committed to a psychiatric hospital.

B. This document may be completed by any individual 18 years of age and has not been determined to be not capable of making an informed decision. An advance directive may be oral or written. If written, it must be signed and dated. Two witnesses must also sign the document. The health care agent may not be a witness. And, at least one witness may not be a person who is knowingly entitled to benefit by your death, for example inherit money, insurance benefits. The witnesses must sign the document stating that the person making the directive is personally known them and appears to be of sound mind.

C. If you wish to guide your health care providers on what treatment you wish to have if you should become unable to give consent, and you DO NOT WANT A HEALTH AGENT, fill out the form titled “Advance Directive for Mental Health Treatment”. If you want an agent to make the choice
for you, fill out the form “Appointment of Health Care Agent.” You may fill both forms if you want an agent to make the choices and you also want to assist in those choices. If the directive is made orally, it must be made in the company of your attention physician and one witness.

D. You can also make an advance directive naming a person as your health care agent, to make mental health decisions when you are not able to do so. The agent must make choices in line with any desires you have expressed in this document, or if your wishes are not expressed and are not known by the agent, the agent must act in good faith in what he/she believes to be in the best interest for you. It is your job to inform the agent that the agent has been named in your advance directive, and to make sure he/she agrees to be your agent. It is important that your health care agent be informed about your mental illness and the decisions you have made in this form. It is highly recommended that you discuss the contents of this form with your family and close friends and your mental health providers.

E. The Office of the Attorney General has issued an opinion that a healthcare agent may sign an individual into a facility, including a psychiatric hospital. If you wish your healthcare agent to be able to make this choice, you should so specify.

F. Maryland law allows giving a medication for the treatment of a mental disorder over the person’s expressed wishes, or placing a person in seclusion or restraints against the person’s expressed wishes, under certain conditions.
Advance Directive for Mental Health Treatment

I (name) being an adult, and emotionally and mentally able to make this directive, willfully and freely complete this health care advance directive to be followed if it determined by two physicians that I am not able as a result of a psychiatric or physical illness to assist in my health care treatment. (The second physician may not be involved in my treatment). It is my intent that care will be carried out despite my inability to make choices on my own behalf. In the event that a guardian or other decision-maker is chosen by a court to make health care choices for me, I intend this document to take priority over all other means of discovering intent while able. The usual symptoms of my identified mental disorder may include:

__________________________________________________________________________________

__________________________________________________________________________________

I direct my health care providers to follow my choices as set forth below:

**Medications for treatment of my mental illness:**

If I become unable to make informed choices for treatment of my mental illness, my wishes regarding medications are as follows:

__________________________________________________________________________________

__________________________________________________________________________________

I may be allergic to the following medications:

<table>
<thead>
<tr>
<th>Medication</th>
<th>Reaction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The following medications have been helpful in the past and I would agree to them if prescribed:

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________
Initial all that apply:

_____ I agree to the performance of all tests and other means to identify or assess my mental health.
____ I agree to the performance of all tests and other means to check how well the medications are working and their effect on my body, i.e. blood tests.
_____ I specifically do not agree with dispensing the following medications, or their own brand-name, trade name or generic equal.

Medication Reasons for not agreeing

__________________________________________

__________________________________________

__________________________________________

__________________________________________

_____ I agree with dispensing all medications prescribed by my treating psychiatrist, unless listed above.

Admission to and continuation of Mental Health Services from a facility other than an inpatient hospital.

Check one

_____ I do not have a preference about receiving mental health services from a facility or other provider than a psychiatric hospital, i.e., clinic, PRP, mobile treatment.
_____ I agree to receive services from a facility, which is not a hospital.
_____ I do not agree to receive mental health services from a provider or facility other than a hospital.

Conditions/ Limits:

__________________________________________

__________________________________________

__________________________________________

Others Choices

If I am unable to make informed decisions about my mental health choices, my wishes regarding other information or options are listed below:
Release of Records

I authorize the release of (check one):

_____ any and all mental health records

_____ the following mental health record/records of the following providers:

__________

__________

to:

__________

(name of person records may be released to)

Appointment of Health Care Agent

I select the following person as my agent to make health care choices for me:

Name

Address

Work Number ___________________ Home Number ___________________

If this agent is unable, unwilling, or elsewhere engaged to act as my agent, then I select

the following person to act in this role:

Name:

Address

Work Number ___________________ Home Number ___________________

My agent has full power and right to make health care choices for me:

_____ Just in regards to the instruction above.

_____ If my wishes are not expressed above, and my wishes are not otherwise known to my agent, or if
my wishes are unknown or unclear, my agent is to make health care choices for me with my best interest
in mind, to be determined by my agent after reviewing the benefits, burdens, risks that might result from a
given treatment of course of treatment, or from the withholding or withdrawal of a treatment or course
of treatment. The authority of my agent is subject to the following conditions and limits:
My agent has full power and right to:

1. Request, receive and review any information, oral or written, regarding my physical or mental health, including, but not limited to, medical and hospital records, and the right to disclose this information.
2. Employ and release my health care providers.
3. Approve my admission to or release from any facility (other than psychiatric hospital or unit), nursing home, adult home or other supervised housing or medical care facility.

Circle One:
My agent HAS HAS NOT the power and authority to approve my admission to or release from a psychiatric hospital or unit.

Check one:
My agent’s powers and rights become active:

[ ] when my attending physician and a second physician decide that I am unable to make well-versed choices regarding my health care;

[ ] When this document is signed.

My agent shall not be responsible for costs of care based just on this agreement.

________________________________________

Date Signature

The above named person signed or acknowledged signing this advance directive in my company and based upon my personal study appears to be a capable person.

________________________________________  ______________________________________

Witness name Witness signature

________________________________________  ______________________________________

Witness name Witness signature
PEER SUPPORT AND YOUR RECOVERY

Mutual support is important to recovery. Consumers encourage and engage others in recovery and provide each other with a sense of belonging. Peer support groups are self-help groups that provide a safe and confidential place to share common experiences without judgment. The following is a partial list of peer support groups available.

Peer Support Groups

Celebrate Recovery
Christian based self-help recovery groups for men and women in recovery from hurts, habits and hang ups
www.marylandcelebraterecovery.org

Children and Adults with Attention Deficit/Hyperactivity Disorder (CHADD)
www.chadd.org

Depression and Bipolar Support Alliance
Toll-free: 1.800.826.3632
www.dbsalliance.org

Double Trouble in Recovery
This support group is a 12 step group of people in recovery for mental illness and substance abuse
www.doubletroubleinrecovery.org

Gay, Lesbian, Bi-sexual, Transgender and Questioning Adults Support Group
Hearts and Ears Wellness and Recovery Center Baltimore City – Phone: 410.523.1694 or www.heartsandears.org
On Our Own of St. Mary’s County in Leonardtown - Phone: 301.997.1066 or www.onourownofstmarys.org

National Alliance on Mental Illness of Maryland

• NAMI Connections – A recovery support group for adults with mental illness in which people learn from each other’s experience

• NAMI Hearts and Minds – Learn about healthy, accessible and affordable lifestyle changes designed to reduce cardiac risk among people with mental illness

• NAMI In Our Own Voices – An interactive, multi-media presentation by consumers for consumers and general public about living with mental illness.

• NAMI Peer to Peer – A 9 week education course on recovery for adults diagnosed with a mental illness teaches strategies for personal and interpersonal awareness, coping skills and self-care.
On Our Own of Maryland  
Phone: 1.800.704.0262 or 410.646.0262   www.onourownmd.org

• Discovering Your Muse - Consumers learn how to use creative processes such as art, dance, music and writing to enhance their recovery.
• Steps to a Healthier You – This workshop will inspire you to make better food choices and other lifestyle changes that promote recovery and wellness

**Wellness and Recovery Action Plan (WRAP) support groups** for consumers in recovery who have created a WRAP or are interested in learning more about WRAP. Contact a wellness and recovery center for schedules.

**Peer Support Resources**

• Achieve Solutions®  
  ValueOptions® Achieve Solutions® (AS) is an award winning free health and wellness website http://maryland.valueoptions.com. Click on “consumers and families”. Click on “AchieveSolutions”.

• Benefits Counseling – Maryland Ticket to Work Program.  
  On Our Own of Maryland (OOO-MD) works with Core Service Agencies and Maryland’s Ticket to Work program to provide benefits counseling. Staff help consumers use work incentives to transition from dependence on social security programs to financial independence. Call: Toll Free: 1.800.704.0262 or 410.646.0262. Email ooomd@earthlink.net, www.onourownmd.org

• Consumer Advisory Council  
  The Consumer Advisory Council (CAC) advises and consults Mental Hygiene Administration Office of Consumer Affairs. The council looks at policies and procedures and quality initiatives that focus on consumer rights and community building. Membership is open to all consumers. Call: 410.402-8407 or 410.402-8447.

• Employed Individuals with Disabilities (EID) Workshops  
  On Our Own of Maryland offers consumer-focused workshops and training for providers on the EID program. Call: Toll Free: 1.800.704.0262 or 410.646.0262. Email ooomd@earthlink.net, www.onourownmd.org

• Empowerment Partnership Project  
  The Empowerment Partnership Project is run by On Our Own of Maryland. They offer a series of workshops and trainings for consumers and providers. Call: Toll Free: 1.800.704.0262 or 410.646.0262. Email ooomd@earthlink.net, www.onourownmd.org
• **Explanation of Benefits** ValueOptions® Maryland mails Explanation of Benefits (EOB) to consumers every six months. The EOB lists services and payments to mental health providers in the previous six months. If you did not receive a letter or have questions about your EOB, Call Toll free: 1.800.888.1965 or TTY 1.866.835.2755.

• **Leadership Empowerment and Advocacy Program (LEAP)** LEAP trains consumers for leadership and advocacy roles in the public mental health system and community. Call 410.402-8407 or 410.402.8447.

• **Maryland Consumer Volunteer Network (MCVN)** The Office of Consumer Affairs established the MCVN to increase opportunities for consumers to volunteer and make positive changes in public mental health services and the community. Call 410.402.8447 or 410.402.8407.

• **Maryland Association of Peer Support Specialists (MAPSS)** MAPSS is an organization that was formed out of the Maryland Consumer Leadership Coalition to train consumers to become credentialed as Certified Peer Support Specialists (CPSS). The training curriculum is designed to offer peers the tools needed to provide meaningful support whether they are working in mental health settings or with each other in their communities. Call Toll Free: 1.800.704.0262 or 410.646.0262. Email ooomd@earthlink.net, www.onourownmd.org

• **Maryland Consumer Leadership Coalition (MCLC)** Mental Hygiene Administration, Office of Consumer Affairs established the MCLC in 2008. Membership is open to consumers by invitation. The MCLC provides leadership, guidance and support for existing projects and new initiatives that empower consumers and promote recovery. In 2010 MCLC elected officers and transferred responsibility to these consumer leaders. Call: 410.646-0262.

• **MemberConnect** is a confidential website that lets you access your public mental health benefits information 24 hours 7 days per week. You will need your Medicaid or PAC ID number to set up an account. Go to the ValueOptions® Maryland website: http://maryland.valueoptions.com. Click on the “consumers and families”. Click on “MemberConnect”. For more information and training: Call Toll Free: 1.800.888.1965 or 410.691.4017 or 443-827-2174.

• **Mental Hygiene Administration Office of Consumer Affairs (OCA)** The OCA has a leadership role within MHA in health policy and program development. The OCA strives to empower consumers and promote mental health recovery and practices throughout the public mental health system. Call 410.402.8447 or 410.402.8407.
• **Olmstead Peer Support Project**
  On Our Own of Maryland coordinates the Olmstead Peer Support Project. Peer counselors are hired to help consumers in a psychiatric hospital transition back to the community. Call Toll free: 1.800.704.0262 or 410.646.0262 Email: ooomd@earthlink.net, www.onourownmd.org

• **Prevention Education and Outreach (PE&O) Services – ValueOptions®**
  PE&O services are provided by a consumer/family member. Services include education, trainings and advocacy for consumers and their families. Educational offerings cover a range of topics including; accessing public mental health services, principles of recovery and resilience, mental illness, ValueOptions® MemberConnect and AchieveSolutions® products and more. Services are offered throughout Maryland and also available to providers and the general public. Staff works closely with the Office of Consumer Affairs and advocacy organizations to promote wellness and eliminate stigma. Call Toll Free: 1.800.888.1965 or 410.691.4017 or 443-827-2174.

• **Self-Directed Care Pilot Project**
  Peer advocates help consumers develop and implement their own recovery plans and direct the use of their benefits. Flexible funding allows consumers to access public mental health services and non-traditional supports. Call 410-262-0262.

**Wellness Recovery Action Plan® (WRAP)**

WRAP® was developed by people with mental health challenges. These people learned that they could identify what makes them well and use the information to handle difficult feelings and maintain wellness. The result has been recovery and long term stability. WRAP® does not replace traditional treatments. You can use it as a compliment to treatment options you have chosen.

WRAP® classes are taught by consumers. It is important that you develop your own WRAP®. It will help you to monitor and relieve distressing feelings and behaviors and choose the best course of action. A WRAP® helps you become who you want to be and make your life the way you want it to be.

A WRAP® begins with an individual Wellness Toolbox, filled with practical ideas to help you feel good, and even feel better when the going is hard. Here are some ideas that consumers have put in their Wellness Toolboxes; walking, writing, yoga, medication, biking, prayer, family, meditation, time with friends, sleep, planting flowers and more.

**Key elements of WRAP®**

- Wellness Toolbox
- Daily Maintenance Plan (what you need to do every day to stay well)
- Identifying Triggers and an Action Plan (what things upset you)
- Identifying Early Warning Signs and an Action Plan (feelings, behaviors)
- Identifying When Things Are Breaking Down and an Action Plan (feelings, behaviors)
Crisis Planning (signs that you are experiencing a crisis and what your supporters can do to help)

- Post Crisis Planning (What do you need after a crisis (e.g., hospitalization) to return to daily routine?)

- What might you put in your Wellness Toolbox?

WRAP® classes and support groups are available at Wellness and Recovery Centers. Contact a Wellness and Recovery Center for class schedules. To learn more about the development of WRAP® go to www.mentalhealthrecovery.com.
Consumer Operated Programs and Services

In Maryland, consumer operated programs are peer run organizations or groups that are administratively and financially controlled by consumers and/or family members. In general, these organizations offer a variety of programs and services that empower consumers and promote recovery. We encourage you to contact these organizations to learn more about their services.

ON OUR OWN OF MARYLAND

On Our Own of Maryland (OOO-MD), Inc. is a statewide mental health consumer education and advocacy organization. They promote equality in all aspects of society for people who receive mental health services. OOO-MD is considered a national leader in the consumer movement and known for its innovative recovery-oriented programs. OOO-MD provides education, training and technical assistance to consumers, providers and the general public throughout the U.S. They are a key partner with Mental Hygiene Administration. The staff works closely with the Office of Consumer Affairs to develop and implement new programs that empower consumers.

OOO-MD lead efforts to transform consumer drop in centers into wellness and recovery centers (W&R centers). W&R centers provide recovery oriented programs and services. OOOMD has a network of 22 W&R center affiliates. Mike Finkle is the Executive Director.

Call 410.646.0262 or Toll free: 1.800.704.0262. Visit their website: www.onourownmd.org.

MAIN STREET HOUSING

Main Street Housing (MSH) is part of On Our Own of Maryland. MSH mission is to develop quality, safe, affordable, and permanent housing for people with mental illness. They offer affordable rental units solely to individuals and families with mental illness. MSH is a unique housing program. First, it is run by mental health consumers. Secondly, tenants are not required to receive mental health services from MSH. Consumers have a high degree of independence. MSH operates under a principle of “supportive accountability.” If problems arise, the organization intervenes in support of the tenant only to the extent necessary.

Ken Wireman is the Executive Director.

Call 410.646.0262 or 1.800.704.0262. Visit their website: www.onourownmd.org/msh
The Consumer Quality Team of Maryland (CQT) employs consumers and family members to conduct announced and unannounced site visits to mental health facilities throughout Maryland. CQT began as a pilot project in January 2007. They received additional funding from Mental Hygiene Administration to expand state-wide later that year. CQT unique method of evaluation of Maryland’s public mental health services includes peer to peer interviews. Consumers volunteer to be interviewed and talk about their satisfaction with services, concerns or personal needs. They may choose other topics. The identities of consumers are kept confidential. CQT submits reports to program directors and Core Service Agencies for follow up. The team meets monthly with Mental Hygiene Administration, Core Service Agencies, providers and advocates. The group reviews site visit reports and outstanding issues. Call 410.235.1314. Visit their Website www.cqtmd.org.

Wellness and Recovery Centers

Wellness and Recovery Centers (W&R centers) offer education, training, peer support and social activities. Services vary by center. Most W&R centers provide support groups, warm-line support, WRAP® classes and support groups, employment assistance. W&R centers receive funding from Mental Hygiene Administration.

(On Our Own of Maryland Affiliates)

ALLEGANY COUNTY
HOPE Station (part of OCA inc.)
632 N. Centre Street
Cumberland, MD 21502
Phone: 240.362.7168 Fax: 240.362.7170

ANNE ARUNDEL COUNTY
On Our Own of Anne Arundel County, Inc.
134 Holiday Court, #304
Annapolis, MD 21401
Phone: 410.224.0116 Fax: 410.224.0991
BALTIMORE CITY
Hearts & Ears, Inc.
1133 Pennsylvania Avenue, Suite 204
Baltimore, MD 21201
Phone: 410.528.0444

BALTIMORE CITY
On Our Own, Inc.
6301 Harford Road
Baltimore, MD 21214
Phone: 410.444.4500 Fax: 410.444.0239

BALTIMORE CITY
On Our Own Charles Street Center
101 W. 23rd Street
Baltimore, MD 21218
Phone: 410.235.0273

BALTIMORE CITY
Helping Other People Through Empowerment
2828 Loch Raven Road
Baltimore, MD 21218
Phone: 410.327.5830 Fax: 410.327.5834
BALTIMORE CITY
Transitional Age Youth
On Our Own, Inc.
6301 Harford Road
Baltimore, MD 21214
Phone: 410.444.4500 Fax: 410.444.0239

BALTIMORE COUNTY
On Our Own Catonsville Center
5-7 Bloomsbury Drive
Catonsville, MD 21222
Phone: 410.747.4492 Ext. 1203

BALTIMORE COUNTY
On Our Own Dundalk Center
63 Shipping Place, 2nd floor
Dundalk, MD 21222
Phone: 410.282.1701 Fax: 410.282.2431

BALTIMORE COUNTY
On Our Own Towson Center
Shepherd Pratt, Building D
Room D020
6501 N. Charles St.
Baltimore, MD 21204
Phone: 410.494.4163
CALVERT COUNTY
On Our Own Calvert County Inc.
P.O. Box 2961
Prince Frederick, MD 20678
Phone: 410.535.7576 Fax: 410.535.0984

CARROLL COUNTY
On Our Own of Carroll County, Inc.
P.O. Box 1174
Westminster, MD 21158
Phone: 410.751.6600 Fax: 410.751.2644

GARRETT COUNTY
Mountain Haven (part of OCA, Inc.)
14719 Garrett Highway
Oakland, MD 21550
Phone/Fax: 301.334.1314

HOWARD COUNTY
On Our Own of Howard County
6440 Dobbin Road, Suite B
Columbia, MD 21045
Phone: 410.772.7905 Fax: 410.772.7906

MONTGOMERY COUNTY
On Our Own of Montgomery County
434 East Diamond Avenue
Gaithersburg, MD 20877
Phone: 240.683.5555 Fax: 240.683.5461
PRINCE GEORGE COUNTY
On Our Own of Prince George’s County
6513 Queens Chapel Road
University Park, MD 20782
Phone: 301.699.8939 Fax: 301.699.5378
Contact Person: Daphne Klein

ST. MARY’S COUNTY
On Our Own of St. Mary’s County
41660 Park Avenue
P.O. Box 1245
Leonardtown, MD 20650
Phone: 301.997.1066 Fax: 301.997.1065

WASHINGTON COUNTY
Office of Consumer Advocates, Inc.
265 Mill Street, Suite 200
Hagerstown, MD 21740
Phone: 301.790.5054 Fax: 301.791.3097

WASHINGTON COUNTY
Soul Haven
12 West Franklin Street
Hagerstown, MD 21740
Phone: 301.733.6676 Cell: 301.697.2813
ADDITIONAL PEER SUPPORT PROGRAMS

Baltimore County
MARTY LOG – Lewis Rothschild Wellness & Recovery Center
3 Milford Mill Road
Pikesville, MD 21208
Phone: 410.653.6190

Charles County
Our Place Wellness & Recovery Center at Freedom Landing
400 Potomac Street
La Plata, MD 20646
Phone: 301.932.2737

Harford County
SPIN, Inc. (Support Peer Independence Now)
11 Franklin Street
Aberdeen, MD 21001
Phone: 443.327.7810

Kent County
Chesapeake Voyagers, Inc. Wellness & Recovery Center
903 Washington Avenue Suite 2
Chestertown, MD 21620
Phone: 410.822.1601
MONTGOMERY COUNTY
Sante Group - Silver Spring Drop In Center
1400 Spring Street, Suite 100
Silver Spring, MD 20910
Phone: 301.589.2303 ext. 108  Fax: 301-585-2965

TALBOT COUNTY
Chesapeake Voyagers, Inc.*
342-C N. Aurora Street
Easton, MD 21601
Phone: 410.822.1601 Fax: 410.822.1621
Maryland Medical Care Programs

Employed Individuals with Disabilities (EID)

Want to work and still keep your benefits? Employed Individuals with Disabilities provides Medical Assistance for people with disabilities who work. It is sometimes called the “Medicaid Buy-In”. You pay a monthly premium based on your income. It may be $0, $25, $40 or $55 per month. Income can be as high as $66,000 for a single person. Married couples can earn up $88,440. For more details:

Call Toll Free: 1.800.637.4113 TTY/Voice: 443.514.5034 or 410.767.3360 Email: eid@mdod.state.md.us
Website: www.mdeid.org

Health Choice

HealthChoice is the name of Maryland’s mandatory managed care program. HealthChoice provides health care to most Medicaid recipients. Members must enroll in a managed care organization and select a primary care doctor. For more details:

Call Toll Free: 1.800.977.7388 TDD: 1.800.977.7389 Website: www.dhmh.state.md.us/mma/healthchoice/

Maryland Children’s Health Plan (MCHP)

Maryland Children’s Health Plan provides health coverage to children up to age 19. It also covers pregnant women of any age who meet income guidelines. You can be eligible for MCHP even if you health insurance. For more details:

Call Toll Free: 1.800.456.8900 TDD: 1.800.735.2258 Website: www.dhmh.state.md.us/mma/mchp/

Medical Assistance (Medicaid)

Medicaid is a joint federal and state program. It pays medical bills for people who have low incomes. Each state administers its own program under broad federal guidelines. To apply, go to your local Department of Social Services or health department. For more details:

Call Toll Free: 1.800.492.5231 Phone: 410.467.5800 Website: www.dhmh.state.md.us/mma/mmahome.html
Medical Assistance for Families

Medical Assistance for Families provides health care to parents or family members caring for children. The program provides free health services, low-cost or free prescriptions, emergency room visits, lab work and more. For more details:

Call Toll Free: 1.800.456.8900
http://www.dhmh.state.md.us/ma4families/index.html

Primary Adult Care (PAC)

Primary Adult Care provides health services to people 19 and over with limited income. PAC offers free doctor visits and outpatient mental health services. Medications are provided at low or no cost. For more details:

Call Toll Free: 1.800.226.2142
www.dhmh.state.md.us/mma/pac/

To view all Maryland Medical Care Programs visit www.dhmh.state.md.us/mma/
Children Youth and Families

What To Do If You Suspect Your Child Has A Mental Health Condition

If you suspect that your child may have a mental health condition; talk with their pediatrician or primary care physician. Ask for an evaluation by a mental health professional. During the evaluation, the clinician will talk to you, your child and other family members as needed. He/ She will ask questions about your child’s development and their behavior both at home and at school. They may also ask about family history and whether or not there are issues at home that may be affecting the child’s behavior. With this and other information, the clinician can begin to form a mental health diagnosis.

Learn as much as you can about your child’s diagnosis and recommended treatments. Give your child unconditional love and acceptance. Insist on being involved in decisions affecting their lives. Remember, as parents, you are an invaluable resource to your child and treatment team. Contact a family advocacy organization and/or join a family support group. Meeting families with similar experiences can help to eliminate feelings of shame or isolation. The following is a list of resources for families and caregivers.

Family and Caregiver Support

Achieve Solutions®
ValueOptions® Achieve Solutions® is an award winning health and Wellness website. Find information on various health topics and lifestyle issues visit: http://maryland.valueoptions.com. Click on “consumers and families”. Click on Achieve Solutions® from the box on the left.

ADDITUDE- Living Well With Attention Deficit
www.additudemag.com

American Academy of Child and Adolescent Psychiatry
www.aacap.org

American Foundation for Suicide Prevention
A national organization dedicated to understanding and preventing suicide through research, education, and advocacy and to reaching out to people with mental disorders and those impacted by suicide. Phone: 1.888.333.2377 – www.afsp.org

Black Mental Health Alliance for Education and Consultation
Promotes holistic and culturally relevant mental health programs for African Americans and other people of color. Phone: 410.338.2642 – Email: bhealthall@blackmentalhealth.com – www.blackmentalhealth.com
Children and Adults with Attention Deficit/Hyperactivity Disorders

Child Care Providers Licensed in Maryland
www.mdchildcare.org/findchildcare/

Depression and Related Affective Disorders Association (DRADA)
Find support groups in the Baltimore-Washington DC area Phone: 410.955.4647 or 202.955.5800 - www.med.jhu.edu/drada/

Federation of Families for Children’s Mental Health:
www.ffcmh.org

Governor’s Office for Children
This office coordinates child and family-oriented care within the State’s Child-Serving Agencies by emphasizing prevention, early intervention and community-based services for all children and families. Phone: 410.767.4160 - http://goc.maryland.gov

Maryland Association of Resources for Families and Youth (MARFY)
Phone: 410.974.4901 - www.marfy.org

Maryland Coalition of Families for Children’s Mental Health
A state-wide family network dedicated to improving services for children with mental health needs and their families. They provide advocacy, education, resources, training and support for families-Phone: 410.730.8267, Toll Free: 1.888.607.3637, Email: info@mdcoalition.org – www.mdcoalition.org

Maryland Transitioning Youth
This website is for families and youth with disabilities. Search the site to find information and resources for transition planning, postsecondary education, employment services and more. www.mdtransition.org
**MemberConnect**
ValueOptions® MemberConnect is a confidential website that lets you access public mental health benefits information **24 hours 7 days per week**. You will need your child’s Medicaid ID number to set up an account. Visit: http://maryland.valueoptions.com Click on “consumer and families. Click on “MemberConnect” from the box on the left. For more information or training Phone: 410.691.4017

**Mental Health Association of Maryland**
A statewide education and advocacy organization concerned with all aspects of mental health and illness. Provide educational programs, information and referral services for children, adults, and older adults. Phone: 410.235.1178 or Toll free: 1.800.572.6426 or E-mail: info@mhamd.org or Website: www.mhamd.org

**National Alliance on Mental Illness of Maryland (NAMI-MD)**
A grassroots organization dedicated to education, support and advocacy for persons with mental illnesses, their families and the wider community. NAMI offers free training, educational programs, support groups, and information about mental illness. Phone: 410.884.8691 or Toll Free: 1.877.878.2371 or Website: http://namimd.org, www.nami.org

- NAMI Basics A support group for parents and other caregivers of a children or adolescent with mental illness
- NAMI Family to Family A 12 week course for family members, partners and friends of someone with a mental illness (all ages). The class discusses the latest treatments and knowledge and skills families need to cope more effectively.
- NAMI Family Support Group A support group for parents, partners and friends of someone living with a mental illness (all ages) Share and receive support from other families. Learn about stages of emotional responses and more.

**Parents Place of Maryland**
Provides information to Maryland families of children with all disabilities and special health care needs. They are the state-wide Parent Training and Information Center and the Family-to-Family Health Information Center. Phone: 410.768.9100 (Voice or TDD) Email: info@ppmd.org or Website: www.ppmd.org

**Promising Practices Network on Children, Families and Communities**
www.promisingpractices.net

**Sex Offenders in Maryland Website**
www.socem.info
**Family Navigator Services**

**What is a Family Navigator?**

Family Navigators (FNs) are parents or primary caregivers with lived experience caring for a child with special needs. FNs are trained to help other families of children with intensive needs to navigate the social and health systems to find appropriate services and supports. Services may include advocacy, one to one support, guidance in completing forms and applications, education and more. FNs are not therapists or counselors and do not provide legal advice. Family Navigator services are FREE to all families. There are no eligibility requirements. To learn more about Family Navigators how to access services, contact one of the agencies below:

- **Allegany County MD Coalition-The Family Network**  
  301.784.7142
- **Anne Arundel County Network of Care**  
  410.266.5105
- **Baltimore City MD Coalition**  
  410.235.6340
- **Baltimore County Villa Maria Continuum**  
  410.252.4700, x265
- **Calvert County Center for Children**  
  410.535.3047, x104
- **Caroline County MD Coalition of Families**  
  410.479.1146
- **Carroll County Get Connected Family Resource Center**  
  410.871.0008
- **Cecil County MD Coalition – The Family Link**  
  410.871.0008
- **Charles County Center for Children**  
  301.609.9887
Dorchester County MD Coalition of Families 410.901.1007
Frederick County Mental Health Association 301.663.0011
Garrett County The Garrett Co. Partnership for Children and Families, Inc. 301.334.1189
Harford County MD Coalition of Families 410.420.9880
Howard County MD Coalition of Families 410.730.8267
Kent County MD Coalition of Families 410.810.2673
Montgomery County Federation of Families 301.681.8929
Prince George’s County The Family Tree 301.909.2318
Queen Anne’s County MD Coalition of Families 410.810.2673
Somerset County Somerset Family Link 410.623.2906
St. Mary’s County The Family ACCESS Center 301.863.6664
Talbot County MD Coalition of Families 410.901.1007
Washington County MD Coalition – The Family Network 240.313.2086
Wicomico County Wicomico Partnership for Families 410.546.5400, x101
Worcester County Worcester Youth and Family Counseling Services 410.641.4598
YOUTH M.O.V.E (Motivating Others through Voices of Experience)

Youth M.O.V.E. Maryland is a youth led organization that helps create positive change in the lives of youth. The group works with youth who have been involved in child serving systems. This may include mental health, juvenile justice, child welfare or others. Visit Youth M.O.V.E. Maryland on Facebook: http://www.facebook.com/YouthM.O.V.E.Maryland. To learn about the National organization visit http://www.youthmovenational.org and/or http://www.facebook.com/YouthMOVENational

Calvert County
Advocacy and Mental Health Awareness
410.474.6151

Carroll County
Transitional Age Youth
410.795.2965

Charles County
Transitional Age Youth
301.609.9900

Mid-Shore
Advocacy, Awareness, and Transitional Age Youth
410.479.1146

Montgomery County
Transitional Age Youth
410.706.3522

Prince George County
Awareness and Support for Youth Currently in the System
301.265.8446

St. Mary’s County
Transitional Age Youth
301.475.4200 ext. 1682

Washington County
Advocacy and Mental Health Awareness
240.818.3537

Wicomico County
Transitional Age Youth
410.219.5070

For more information: University of Maryland School of Medicine, Innovations Institute, http://medschool.umaryland.edu/innovations/move.asp
Conclusion

We hope that this handbook is a source of hope and practical help to you on your recovery journey. Whether you are seeking services for the first time, learning about recovery, making choices in your treatment, wanting to give feedback about your care in the public mental health system, ValueOptions® and Mental Hygiene Administration are here to assist you.

Science has shown that having hope plays an integral role in a person’s recovery. We want you to know that you can recover and live life fully in the community. We are here to support you when you need us in that journey. May this handbook be a helpful guide to you along the way.

“The Expectation is Recovery!”
APPENDICES

National Consensus Statement on Mental Health Recovery (SAMHSA)

The 10 fundamental components of mental health recovery include the following principles:

**Self-Direction:** Consumers lead, control and determine their own path of recovery. The person defines his or her own life goals. They design a unique path towards those goals.

**Individualized and Person-Centered:** There are many pathways to recovery. Each is based on a person’s unique strengths and resiliencies. They are also based on cultural background, needs, choices, experiences, including past trauma.

**Empowerment:** Consumers have the authority to participate in all decisions that will affect their lives. They are educated and supported in this process. They are urged to speak up through empowerment, a person gains control of their own destiny.

**Holistic:** Recovery includes all parts of the person’s life. This includes mind, body, spirit and community. Recovery embraces all aspects of life: family, housing, jobs, education, healthcare, religion, social networks. The person decides the importance given to each of these.

**Non-Linear:** Recovery is not a step-by step process. It is based on continual growth, some setbacks and learning from experience.

**Strengths-Based:** Recovery focuses on reinforcing the person’s worth. This is done by valuing and building on abilities, resiliencies and strength to cope. The process of recovery moves forward through interaction with others in supportive, trust-based relationships.

**Peer Support:** Mutual support plays an invaluable role in recovery. It includes sharing knowledge gained from experience. Consumers encourage each other and provide a sense of belonging. They offer supportive relationships and a sense of community.

**Respect:** A sense of community, acceptance and appreciation of consumers is vital to achieve recovery. This includes protecting their rights and getting rid of discrimination and stigma. Acceptance and belief in one’s self are particularly vital. Respect is vital for consumers to participate fully in all aspects of their lives.

**Responsibility:** Consumers have a responsibility for their own self-care and journeys of recovery. They must find coping strategies and healing processes to support their own wellness.

**Hope:** Hope provides the essential and motivating message of a better future. It is a vital part of the recovery process. Hope is a belief deep inside. Peers, families, friends, providers and others can foster hope.
Additional Resources

DEAF AND HARD OF HEARING

Deaf Independent Living Association, Inc.
Phone: 202.832.6681
Toll Free: TTY/Voice - 1.866.947.6923
Website: www.dila.org

Maryland Department of Disabilities
Phone: 410-767-3660
Toll Free: TTY/Voice - 1.800.637.4113
Website: www.mdod.maryland.gov

Deaf-REACH
Phone: 202.832.6681 (Voice/TTY) Website: www.deaf-reach.org

EDUCATION

Maryland State Department of Education
Phone: 410.767.0600
Website: www.marylandpublicschools.org

EMPLOYMENT

Job Accommodation Network (JAN)
Toll Free: 1.800.526.7234
TTY: 1.877.781.9403
Email: jan@askjan.org
Website: http://askjan.org

Maryland Department of Disabilities
Toll Free/Voice: 1.800.637.4113
Website: www.mdod.maryland.gov

Maryland State Department of Education Division of Rehabilitation Services (DORS)
Toll Free: 1.888.554.0334
Website: http://www.dors.state.md.us/

Mental Health Vocational Programs (Supported Employment)
To locate providers
Toll Free: 1.800.888.1965
Website: www.networkofcare.org
Maryland Technology Assistance Program (MDTAP)
Toll Free: 1.800.832.4827 TTY
Toll Free: 1.866.881.7488

Maryland Ticket to Work Program
Toll Free: 1.888.554.0334
TTY/TDD: 410.554.9411
Email: dors@dors.state.md.us
Website: www.dors.state.md.us

GAY/LESBIAN/BISEXUAL/TRANSGENDER

Association of Gay and Lesbian Psychiatrists
Phone: 215.222.2800
Email: info@aglp.org
Website: http://www.aglp.org

Hearts and Ears Wellness and Recovery Center
Baltimore City, MD
Phone: 410.523.1694
Email: Heartsandears@toastnet.org
Website: www.heartsandears.org

National Coalition LGBT Health
Phone: 202.558.6828
Email: coalition@lgbthealth.net
Website: www.lgbthealth.net

On Our Own Wellness and Recovery Center of Saint Mary’s County
Leonardtown, MD
Phone: 301.997.1066
Email: oooinsmc@verizon.net
Website: www.onourownofstmarys.org

The Trevor Project (support LGBT Youth up to 24 years)
Toll Free: 1.800.850.8078 or 1.866.488.7386
Website: http://thetrevorproject.org

GRIEVANCES –MHA INPATIENT FACILITIES

Resident Grievance System Director
Phone: 410.767.6888
Toll Free: 1.800.747.7454
HEALTH CARE/OTHER SERVICES

Directory of Local Departments of Social Services
Website: http://www.dhmh.state.md.us/mma/dss/

Directory of Local Health Departments
Website: http://www.dhmh.state.md.us/html/org-lhd.htm/

Maryland Alcohol and Drug Abuse Administration
Phone: 410.402.8600
Website: http://maryland-adaa.org/

Maryland Community Services Locator
Phone: 301.405.9796
Email: mdcsl@cesar.umd.edu
Website: www.mdcsl.org

Maryland Developmental Disabilities Administration
Phone: 410.767.6500
Toll Free: 1.877.463.3464
Website: http://dhmh.maryland.gov/dda_md

Network of Care
Website: http://networkofcare.org

HOUSING

Affordable Apartment Search (HUD)
Website: www.hud.gov/apps/section8/

Community Housing Associates (Baltimore City)
Phone: 410.545.4429
Website: www.chaincmd.org

Main Street Housing
Phone: 410.646.0262
Toll Free: 1.800.704.0262
Website: www.onourownmd.org/msh.html

Maryland Department of Housing and Community Development
Phone: 410.514.7000
Toll Free: 1.800.756.0119
Website: http://www.dhcd.state.md.us/
Maryland Housing Search
Toll Free: 1.877.428.8844
TTD/TTY: 7-1-1 [Relay Service]
Website: www.mdhousingsearch.org/

Public Housing Authorities Directory (by county)
Website: www.hud.gov/local/md/renting/hawebsites.cfm

Rental Housing Locator
Toll Free: 1.877.428.8844
Website: www.mdhousingsearch.org

U.S Department Housing Urban Development Rental Assistance
Website: www.hud.gov/renting/index.cfm

HOMELESSNESS SERVICES

Directory of Maryland Emergency Shelters and Transitional Housing
Website: http://dhr.maryland.gov/transit/pdf/homelist.pdf (to print list)

Frederick Community Action Agency
100 South Market Street
Frederick, MD 21701
Phone: 301.694.1506
Website: www.cityoffederick.com

Health Care for the Homeless (Baltimore City)
421 Fallsway
Baltimore, MD 21202
Phone: 410.837.5533
Website: www.hchmd.org

Health Care for the Homeless (Baltimore County)
9100 Franklin Square, Suite 204
Baltimore, MD 21237
Phone: 443.777.2300
Website: www.franklinsquare.org/body.cfm?id=559549

Health Care for the Homeless (Harford County)
1 North Main Street
Bel Air, MD 21014
Phone: 410.638.3060
Website: www.harfordcountymd.gov/Housing/Download/1464.pdf or www.harfordcountymd.gov/
Maryland Department of Human Resources Transitional Services  
Phone: 410.767.7285  
Toll free: 1.800.332.6347  
Website: www.dhr.maryland.gov/transit/  

Primary Care Coalition of Montgomery County  
Community Clinic, Inc. Mobile Medical Care  
9309 Old Georgetown Rd  
Bethesda, MD 20814  
Phone: 301.493.2400  

LEGAL SERVICES  

Bazelon Center for Mental Health Law Center  
Phone: 202.467.5730  
TDD: 202.467.4232  
Email: info@bazelon.org  
Website: www.bazelon.org  

Maryland Disability Law Center  
Phone: 410.727.6352  
TDD: 410.727.6387  
Toll Free: 1.800.233.7201  
Website: www.mdlclaw.org  

MEDICATION ASSISTANCE  

Maryland MedBank U S. Pharmacy Prescription Discount Card  
Toll Free: 1.877.435.7755  
Website: www.medbankus.org (download free prescription discount card)  

Maryland Pharmacy Assistance Program  
Phone: 410.767.1755  
Toll Free: 1.800.492.5231  
Website: www.dhmh.state.md.us/mma/mpap/  

Maryland RX Card –Discount Drug Program  
Website: www.marylandrxcard.com/ (download free prescription discount card)  

Maryland Senior Prescription Drug Assistance Program  
Toll Free: 1.800.551.5995  
TTY/TDD: 1.800.877.5156  
Website: www.MarylandSPDAP.com  

NeedyMeds  
Website: www.needymeds.org (download free prescription discount card)
Partnership for Prescription Assistance Programs
Toll Free: 1.888.477.2669
Website: www.pparx.org

MENTAL HEALTH RECOVERY AND EDUCATION

Center for Self-Determination
Phone: 734.722.7092
Website: http://www.self-determination.com

CONTAC -Consumer Organization & Networking Technical Assistance Center
P.O. Box 11000
Charleston, WV 25339
Toll-free: 1.888.825.8324
E-mail: usacontac@contac.org
Website: www.contac.org

Mental Health Recovery/WRAP (Mary Ellen Copeland)
Website: www.mentalhealthrecovery.com

National Alliance on Mental Illness
Website: www.nami.org

National Center for Trauma-Informed Care
Toll Free: 1.877.726.4727
TTY: 1.800.487.4889
Website: www.samhsa.gov/nctic/

National Empowerment Center
Toll-free: 1.800.769.3728
E-mail: info4@power2u.org
Website: www.power2u.org

National Institute of Mental Health
Website: www.nimh.nih.gov

National Mental Health Consumers’ Self-Help Clearinghouse
Toll-free: 1.800.553.4539
E-mail: info@mhselfhelp.org
Website: www.mhselfhelp.org

National Registry of Evidenced-Based Programs and Practices (SAMHSA)
Toll Free: 1.866.436.7377
Website: http://nrepp.samhsa.gov/
Substance Abuse Mental Health Services Administration  
Website: www.smhsa.gov

OLDER ADULTS Maryland Department on Aging  
Phone: 410.767.1100  
Toll free: Maryland: 1.800.243.3425  
Maryland relay service: 1.800.201.7165  
Website: www.mdoa.state.md.us

TRANSPORTATION Maryland Department of Disabilities  
Phone: 410.767.3948  
TTY/Toll Free: 1.800.637.4113  
Website: www.mdod.maryland.gov/transportation.aspx

Maryland Motor Vehicle Administration  
Toll Free: 1.800.950.1682  
TTY: 1.800.492.4575  
Website: www.mva.maryland.gov/

Maryland Transit Administration (Baltimore City and surrounding area)  
Phone: 410.704.0262  
Website: http://mta.maryland.gov

Maryland Transit Information Center (listed by county)  
Website: www.angelfire.com/ny5/nebuses/maryland/

VETERANS SERVICES

Maryland’s Commitment to Veterans  
Toll Free: 1.877.770.4801  
Website: www.veterans.maryland.gov

Veterans Affairs (VA) Maryland Health Care System  
Toll Free: 1.800.865.2441

OTHER Community Behavioral Health Association of Maryland  
Phone: 410.788.1865  
Website: http://www.mdcbh.org
Community Mental Health Programs (Providers) Model Bill of Consumer Rights and Responsibilities

This Bill of Rights and Responsibilities was developed by Office of Consumer Affairs Advisory Council

PREAMBLE

The purpose of Community Mental Health Programs (Providers) is to assist you in your recovery. It is your goal to determine what recovery means to you and actively take steps towards your recovery. Your provider will support you in your development of wellness self-management and recovery.

The purpose of the Bill of Rights and Responsibilities is to provide guidance, when needed, on your path to recovery while receiving services at your Provider.

CONSUMER RIGHTS:

As a consumer, your rights include, but are not limited to, the following:

RESPECT:

(1) You have the right to be treated in a dignified and respectful manner, at all times.

(2) You have the right to be treated as an adult.

(3) You have the right to be free from stigma from your provider.

RIGHT TO BE FREE FROM DISCRIMINATION:

(4) You have the right to receive provider services and the right to be treated by your provider in a fair and objective manner, without discrimination based on race, gender, sexual orientation, age, religion, national origin, ethnic group, marital status, disability, socioeconomic status, culture, or any other classification prohibited by law. You have the right to report any violation to the Director of the provider agency.

RIGHT TO INFORMATION ABOUT THE PUBLIC MENTAL HEALTH SYSTEM:

(5) You have the right to be given information about the Public Mental Health System and its services and caregivers, as well as the rights and responsibilities of consumers.

THE RIGHT TO VOTE AND PROPERTY RIGHTS ARE NOT ALTERED:

(6) You may not be deprived of the right to vote or to receive, hold, and dispose of property solely because you are in a program for a mental disorder.
RIGHT TO REFUSE TREATMENT:

(7) You have the right to refuse treatment, medication, or therapy.

RIGHT TO PICK, CHANGE, OR STOP SEEING ANY PROVIDER:

(8) You have the right to pick, change, or withdraw from your providers, including providers who are part of the Public Mental Health System network. Also, you have the right to refuse care from a provider, at any time.

RIGHT TO REFUSE TO PARTICIPATE IN RESEARCH:

(9) You have the right to refuse to participate in research, at any time.

INDIVIDUAL REHABILITATION PLAN:

If your provider is required to develop an Individual Treatment Plan (ITP) or Individual Rehabilitation Plan (IRP) than you have the following rights.

(10-a) You have the right to have an Individual Rehabilitation Plan, to actively participate in developing it, to have an advocate available, if requested, to help develop it, and to receive treatment in accordance with the plan.

(10-b) You have the right to have a copy of the completed Individual Rehabilitation Plan.

(10-c) You have the right to have your Individual Rehabilitation Plan include your needs and wants in regard to housing, employment, education, vocational training, and other areas.

(10-d) Your Individual Rehabilitation Plan, when appropriate, will include identification of, recommendation for, and collaboration with other services, including self-help organizations.

(10-e) You have the right to have provider program services and supports that promote the use of community resources and self-help organizations to support you in participating fully in the community.

ABUSE:

(11) You have the right to be protected from neglect, physical, emotional, sexual, or verbal abuse and exploitation of any kind.

A person who reasonably believes that a consumer in a provider agency has been abused shall promptly report the alleged abuse to:
(a) The administrative head of the provider agency, shall promptly report the alleged abuse to the Core Service Agency, Mental Hygiene Administration, Maryland Disability Law Center, and a law enforcement agency, or (b) An appropriate law enforcement agency.

**RIGHT TO BE FREE FROM RESTRAINTS AND SECLUSION:**

(12) You have the right to be free from physical restraint and seclusion.

**RIGHT TO VOICE COMPLAINTS AND FILE GRIEVANCES:**

(13-a) You have the right to voice a complaint and file grievances about the Public Mental Health System or services provided, in a timely manner, without fear of retaliation.

(13-b) You have the right to make a complaint related to the provider’s services. You have the right to be given a written description of the provider’s complaint process at the time of orientation and at any other time, at your request. A written description of the provider’s complaint process must be prominently posted in a location accessible to you and visitors.

(13-c) You have the right to file a grievance regarding the denial of services based on eligibility or medical necessity criteria.

**RIGHT TO ADVOCATE:**

(14) You have the right to be a mental health advocate for yourself and others, without threat of reprisals or actual reprisals by a provider.

**RIGHT TO HAVE AN ADVOCATE:**

(15) You have the right to have an advocate speak on your behalf. An advocate will not be appointed for you. If you want an advocate, you may name an advocate at any time or you can name an advocate in an advance directive.

**RIGHT TO OBTAIN AN ATTORNEY:**

(16) You have the right to obtain a lawyer.

**THE RIGHT TO ENGAGE IN WRITTEN AND TELEPHONE COMMUNICATION:**

(17) You have the right to use the phone for a reasonable amount of time and to send and receive unopened mail.
THE RIGHT TO NOT BE EXPECTED TO CLEAN-UP AFTER OTHERS:

(18) You may not be expected to clean-up after others.

PROVIDER EMPLOYEE POLICIES:

(19-a) You have the right to expect that the provider has employee policies to address:

• Unethical conduct;
• Verbal abuse; and
• Unlawful conduct regarding personal property including theft of your money, personal items, or food from

(19-b) You have the right to expect that provider will not borrow, ask to borrow, or take anything belonging to you. Providers may not accept gifts or loans from you or members of your family. If employees violate this rule, you have the right to report any violation to the director of the provider agency.

(19-c) You have the right to expect that employees will not engage in personal business during any services being provided to you individually or during an off-site group activity. This will include the use of consumer appliances in the home.

RIGHT TO NOTICE OF RULES OF CONDUCT:

(20) You have the right to be given your own copy of written rules of conduct expected by the provider and a verbal explanation of those rules within 48 hours after you begin receiving provider services. Also, you are entitled to have the rules of conduct clearly posted at a location in the provider agency to which you have complete access at all times.

RIGHT TO WRITTEN CHARGES OF RULES VIOLATIONS:

(21) You have the right to be given written charges of violating provider conduct rules. Without written charges, loss of privileges or any other action may not be taken by the provider against you.

(21-b) The employee of the provider, who claims that you violated the conduct rules, must provide you with written charges and action and meet with you to discuss the charges before any measures can be taken by the provider. If necessary, the charges will be read to you at that same time.
RIGHT TO TIMELY APPEALS OF CHARGES OF RULES VIOLATIONS:

(22-a) You have the right to be given timely review of any and all appeals of charges by the provider of violations of conduct rules. All disciplinary measures, loss of privileges, or other adverse action will immediately end when the time of the deadline has expired, without review by the provider.

HIPAA AND STATE LAW:

Confidentiality of Medical Information:
(23) You have the right to privacy and confidentiality related to all aspects of care. The only exceptions to confidentiality are those exceptions specifically stated in confidentiality laws. For people who receive Medical Assistance, the provider may disclose, without your consent, protected health and mental health information to other Medical Assistance Programs and Medical Assistance Providers.

Release of Information/Records:
(24) The provider’s professional employees may share information about you with other agencies or individuals only after you have given consent by reading and signing a release of information form. You always have the right to refuse to release all or part of the information on the release of information form. You always have the right to rescind (revoke) the release of information form.

Amendment of Records:
(25) You have the right to request to amend the information in your records. The amended information will not alter the records. But the amendment will be part of the record.

Access to Your Records:
(26) You have the right to see and read your records, with certain exceptions, and have them explained. The exceptions are contained in HIPAA law.

Accounting of Disclosures of Protected Health Information:
(27) You have the right to have the provider give you a written record of instances when the provider made certain types of disclosures of your protected health information.

Notice of HIPAA Privacy Practices:
(28) You have the right to have the provider provide you a "Notice of Privacy Practices", which describes your HIPAA rights in detail. The Notice must be given to you by the first day that you begin provider services. Copies of the Notice are available upon request. Also, the Notice must be posted in a location in the provider agency where it can easily be read by you. If the provider maintains a web site, the Notice must be posted on its site.
HIPAA Complaint:

(29) If a provider violates any of the HIPAA privacy rights, you can file a HIPAA complaint.

To file a HIPAA complaint: Call, the U.S. Department of Health and Human Services: 215.861.4441 or TDD 215.861.4440

Download a complaint form: www.hhs.gov/ocr/hipaa Click on “how to file a complaint”

Call the Core Service Agency in the county where the Provider is located to report the violation and ask for assistance in filing a HIPAA complaint.

Note: Filing a HIPAA complaint is not the only option. You can seek assistance from the Core Service Agency.

THE RIGHT TO HAVE ACCESS TO THIS BILL OF RIGHTS AND TO HAVE YOUR RIGHTS EXPLAINED TO YOU:

(30-a) On admission to a provider agency, it is your right to be informed of your rights in language and terms that you understand.

(30-b) It is your right to be given a written copy of your rights and responsibilities on admission.

(30-c) The provider shall prominently display your rights in accessible centralized locations.

THE RIGHT TO ASSISTANCE IN APPLYING FOR ENTITLEMENTS:

(31) You have the right to have the provider:

• Determine if you may be eligible, for Federal or State entitlements; and

• Assist you, if necessary, to apply for all entitlements for which you may be eligible if you do not have entitlements.

THE RIGHT TO HAVE ASSISTANCE TO ACCESS MEDICAL AND DENTAL CARE:

(32) You have the right to have the provider facilitate access for you to get medical and dental care, as needed.
THE RIGHT TO INFORMATION ABOUT THE PROCEDURES FOR DISCHARGING CONSUMERS:

(33) It is your right to receive a verbal and written explanation of the provider’s procedures for discharging consumers. You will receive the verbal and written explanation by the first date that you start provider services.

RIGHTS REGARDING ADVANCE DIRECTIVES:

(34) You have the right to include an advance directive in your records and to have the advance directive followed.

THE RIGHT TO HAVE ASSISTANCE TO ACCESS AFFORDABLE HOUSING:

(35) You have the right to have a Provider assist you in accessing available housing in the community that is affordable and accessing available financial assistance to pay for housing.

CONSUMER RESPONSIBILITIES: As a consumer, you are responsible for the following:

(1) You are responsible for giving as much information as possible to the professional employees who are giving the care.

(2) You are responsible for following instructions from the care provider who gives the health services.

(3) You are responsible for providing current financial information when requested.

(4) You are responsible for applying for all entitled benefits, in partnership with the provider.

(5) You are responsible for helping with consumer satisfaction surveys to improve the Public Mental Health System.

(6) You are responsible for learning about your illness and medicines to be more in charge of your health care.

(7) You are responsible for giving concerns and ideas to the Public Mental Health System about services.

(8) You are responsible for using services appropriately.

(9) You are responsible for notifying the provider promptly if you decide to stop provider services.

(10) You and other consumers are expected to work together harmoniously, seeking solutions to problems.
(11) You may not use, possess or be under the influence of alcohol or illegal drugs at the provider.

(12) Smoking is prohibited in all program locations and in program vehicles. A smoking area outside is designated at each location.

(13) Behavior which is hurtful or disruptive is not permitted. Unacceptable behaviors include, but are not limited to:

- Abusing others (either verbal, physical, sexual, or mental);
- Inflicting injury;
- Name calling;
- Cursing;
- Stealing;
- Excessive teasing
- Borrowing and harassing others for money, cigarettes, or for any reason; and
- Failure to respect other’s reasonable needs, requests, property, and space.

(14) You must take responsibility for your own possessions. The provider is responsible to assist you, as needed.

(15) You are expected to pick up after yourself. You must sign in and out each time you enter and leave the program site, if this is a program requirement.

(17) You are encouraged to attend, participate, and possibly take a leadership role in activities and groups.

(18) You are responsible for your own medication if needed during the program day, unless otherwise specified by your rehabilitation plan or treating physician.

(19) You are expected to be clean, neat, and dressed appropriately for the activities of the day. This presents a positive image in the community and contributes to self confidence.

(20) You are expected to participate in developing your Individual Rehabilitation Plan.

(21) You are expected to determine what “recovery” means to you and actively take measures towards your recovery.

(22) You are expected to treat employees, other consumers, and yourself with respect.