# Patient HANDBOOK



# BEHAVIORAL HEALTH

Policies, Medical Consent Forms, & General Program Information

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#### Introduction

## **VIP's Comprehensive Care**

Welcome to VIP Community Health's Treatment Program, designed to help you achieve and maintain sobriety while building a life filled with success and joy. Our program is structured into four phases:

- 1. Induction Phase
- 2. Stability Phase
- 3. Maintenance Phase
- 4. **Accountability Phase** (if sobriety is not maintained by the fourth visit or after any relapse).

Each phase is intended to provide you with the tools and support necessary for recovery. As you progress, you will spend less time in the program, reflecting your growth and reduced stress levels as your needs are met.

At VIP Community Health, we are committed to providing compassionate, personalized care to help you overcome addiction and achieve a life of fulfillment. In addition to comprehensive testing for conditions like anxiety, depression, PTSD, or ADHD, we understand the challenges of addiction because our team is led by one of the few Board-Certified Addiction Medicine Specialists in the state—who has also been in recovery for over 30 years.

This physician not only has knowledge from his Board Certification but also firsthand experience with addiction, having gone through inpatient recovery and continuing in recovery with therapy and a 12-step program. His journey gives him deep insight into the emotional pain, societal judgments, and ridicule that individuals with addiction often face. His recovery inspires him to lead the team with empathy, ensuring we understand addiction more personally.

At VIP, we don't just treat addiction as a medical condition—we view it as a chronic disease that requires ongoing care, understanding, and support. Our team is passionate about helping you achieve sobriety and find happiness, success, and the life you deserve. You can accomplish dreams you once thought impossible with proper support, dedication, and care. We believe in you and are here to help you succeed, no matter what your past experiences with treatment programs.

We want you to understand how each member of our team will help you in your recovery and what you can expect. We proudly explain each team member's position and what you can expect from them. Let us start by explaining what a Board-Certified Addiction Medicine Specialist brings to VIP's Addiction Program to help our patients!

A **Board-Certified Addiction Medicine Specialist** is a physician who has completed advanced training and certification in addiction medicine, a field focused on diagnosis, treatment, and prevention of substance use disorders and related mental health issues. These specialists help individuals recover from addiction by using evidence-based practices, medications, and therapies to address both the physical and

psychological aspects of addiction and co-occurring mental health conditions. Below are the key roles and responsibilities of an Addiction Medicine Specialist:

## 1. Comprehensive Assessment and Diagnosis:

- Substance Use Evaluation: Conducting detailed assessments to diagnose the severity of a patient's addiction. This includes understanding the type of substances used, the frequency and duration of use, and any associated complications such as withdrawal or overdose risk.
- Co-occurring Mental Health Diagnosis: Evaluating patients for co-occurring mental health conditions such as depression, anxiety, PTSD, bipolar disorder, or schizophrenia, which often accompany substance use disorders.

# 2. Developing Personalized Treatment Plans:

- Individualized Care: Creating personalized treatment plans that take into account the patient's substance use history, mental health status, medical history, and social circumstances. The plan will often include a combination of medications, therapy, and support services.
- Patient-Centered Approach: Involving the patient in the decision-making process and tailoring treatment plans to meet their specific needs and recovery goals.

# 3. Medication-Assisted Treatment (MAT):

 Prescribing Medications for Addiction: Addiction Medicine Specialists use medications to help manage withdrawal symptoms, reduce cravings, and prevent relapses. Common medications include:

Buprenorphine (Suboxone) or Methadone for opioid use disorder.

Naltrexone or Acamprosate for alcohol use disorder.

Nicotine Replacement Therapy or Varenicline for nicotine addiction.

**Adjusting Medications**: Monitoring the patient's response to medications and dosages to optimize treatment outcomes.

# 4. Therapeutic Interventions:

- **Behavioral Therapy**: Combining medication with evidence-based psychotherapy, such as cognitive-behavioral therapy (CBT), to help patients change their thought patterns and behaviors related to substance use.
- Motivational Interviewing: Using techniques to enhance the patient's motivation to quit substance use and stay engaged in treatment.
- Group and Family Therapy: Involving family members and facilitating group therapy to strengthen support networks and address the family dynamics contributing to addiction.

# 5. Managing Co-occurring Mental Health Conditions:

- Integrated Treatment for Dual Diagnosis: Treating both addiction and mental health disorders simultaneously, ensuring that patients receive comprehensive care for all conditions. For example, using antidepressants or mood stabilizers alongside addiction treatments.
- Coordinating Mental Health Care: Working closely with psychiatrists, psychologists, and other mental health professionals to ensure that mental health issues such as anxiety, depression, or PTSD are adequately treated.

# 6. Detoxification and Withdrawal Management:

- Supervised Detoxification: Overseeing medically supervised detoxification (detox) to safely manage withdrawal symptoms for individuals addicted to alcohol, opioids, or other substances. This can include inpatient or outpatient detox, depending on the severity of the addiction.
- **Symptom Relief**: Providing medications to ease withdrawal symptoms, such as anxiety, agitation, nausea, and seizures.

# 7. Relapse Prevention:

- Long-Term Monitoring: Developing strategies to help patients avoid relapses, including regular follow-up visits, medication management, and adjustments to the treatment plan.
- Trigger Management: Helping patients identify and avoid triggers for relapses, such as stress, social environments, or emotional issues, and equipping them with coping mechanisms to handle these situations.
- Contingency Planning: Preparing patients with relapse prevention plans, including steps to take if a relapse occurs, to minimize its impact and re-engage in recovery efforts quickly.

# 8. Chronic Disease Management:

- Addiction as a Chronic Disease: Treating addiction like other chronic medical conditions, such as diabetes or hypertension, which require ongoing management and care.
- Long-Term Care: Offering continued care and support even after the initial recovery phase, recognizing that addiction requires long-term strategies to maintain sobriety and manage mental health conditions.

#### 9. Crisis Intervention:

- Acute Care for Overdose or Severe Addiction: Providing emergency care for patients who overdose or face life-threatening situations related to their substance use, and coordinating immediate intervention and follow-up care.
- Suicidality and Mental Health Crises: Addressing crises related to mental health, such as suicidal ideation or psychosis, which may occur in patients with co-occurring addiction and mental health disorders.

# 10. Harm Reduction Strategies:

- Reducing the Risks of Substance Use: Employing harm reduction techniques, such as safe
  needle exchanges or supervised injection facilities, to reduce the dangers associated with
  ongoing substance use while patients are working toward recovery.
- Naloxone (Narcan) Distribution: Prescribing naloxone to patients at risk of opioid overdose and educating them, their families, and communities on how to use it in the event of an overdose.

# 11. Patient Education and Empowerment:

- Educating Patients: Providing patients with information about addiction, how it affects the brain, and the importance of ongoing treatment for sustained recovery.
- Empowering Patients: Encouraging patients to take an active role in their recovery, offering tools for self-management and helping them build a new lifestyle centered around health, sobriety, and wellness.

## 12. Collaboration with Multidisciplinary Teams:

- Coordinated Care: Collaborating with primary care providers, mental health professionals, social workers, and peer support specialists to provide holistic, well-rounded care.
- Support for Comprehensive Recovery: Ensuring that patients receive support in all areas of their life, including social, vocational, and legal services, by working with case managers, social service agencies, and community organizations.

## 13. Advocacy and Stigma Reduction:

- Reducing Stigma: Advocating for patients and educating the community about addiction as a treatable medical condition, helping to reduce the stigma associated with substance use disorders.
- Policy Advocacy: Working on initiatives that support public health policies aimed at improving addiction treatment access and outcomes, such as expanding access to Medication-Assisted Treatment (MAT) or mental health services.

# 14. Research and Continuing Education:

- Staying Current: Keeping up with the latest research and advancements in addiction medicine to ensure patients receive the most effective and up-to-date treatments.
- Contributing to Research: Participating in clinical research studies or publishing work related to addiction treatment, helping to advance the field of addiction medicine.

# **Key Outcome Goals:**

- Sobriety and Recovery: Helping patients achieve and maintain long-term sobriety through comprehensive care and relapse prevention strategies.
- Improved Mental Health: Ensuring patients with co-occurring mental health disorders experience improved emotional well-being alongside their recovery from addiction.
- Enhanced Quality of Life: Supporting patients in rebuilding their lives, restoring relationships, gaining employment, and reintegrating into their communities.

# **Urine Drug Screens**

VIP will obtain Presumptive UDS at each visit. These screens occasionally present a false positive or false negative. We send these out to get Confirmation UDS every four weeks. If you have a screen and disagree with it, we know that the Presumptive UDS can give false screens, and if the patient has any questions about the results, we will send them for confirmation.

We may do medication counts and Random UDS screens at times. We want to ensure your recovery and program are on the right path; therefore, we may sometimes need to check things closer. We want to make sure you are not taking drugs or medications that may interfere with others. VIP intends to keep you safe while in the program and also have the knowledge of everything going on in your life that could interfere with your recovery. We genuinely care about you and want to see you successful.

#### **How Suboxone Works**

**Suboxone** (buprenorphine/naloxone) is a safe and effective medication for treating opiate addiction. It binds strongly to opioid receptors, blocking other opioids and preventing withdrawal symptoms while releasing dopamine at a controlled, steady rate. This reduces cravings without producing the "high" associated with other opioids.

Suboxone works by stabilizing dopamine levels, which are often deficient in individuals with opiate addiction. Unlike other opioids, Suboxone does not cause rapid dopamine depletion, so patients don't need increasing doses to feel normal. Typically, doses between 8mg and 24mg are enough to prevent cravings and withdrawal for 24 hours. Doses above 24mg are rarely necessary, as nearly all opioid receptors are effectively covered at this range.

While Suboxone blocks the effects of most opioids, combining it with high doses of benzodiazepines, alcohol, or other sedative drugs can increase the risk of overdose. It's crucial to consult your provider before mixing Suboxone with other medications.

Patients typically stabilize within a few days of starting Suboxone and can maintain normal functioning without impairment. Abruptly stopping the medication can lead to withdrawal, so it's important to work with your provider if you wish to taper off. Suboxone's long-lasting effects and minimal risk of tolerance mean you can maintain the same dose without the need for escalation.

#### **Suboxone Induction Phase**

The first 24 weeks of treatment in our program is the Induction Phase, with your initial visit called the Induction Visit. If you're not currently on Suboxone, this phase involves starting the medication in small doses, gradually increasing it to relieve withdrawal symptoms.

### **Preparing for Induction:**

- **Short-acting opioids** (e.g., hydrocodone, oxycodone) should be stopped 12–24 hours before your visit.
- Long-acting opioids, like methadone, require a longer period before induction. Methadone should ideally be stopped 36 hours or more before starting Suboxone, but specific guidance from

your Addiction Specialist is necessary for safe transition.

To begin Suboxone induction, you need to be in mild withdrawal when you arrive at the clinic. Severe discomfort isn't necessary, but you should experience some symptoms of withdrawal for the induction to be effective. This helps avoid precipitated withdrawal, which can occur if Suboxone is taken too soon after other opioids are stopped.

Your dose will be adjusted as needed during the first visit to ensure withdrawal symptoms are controlled, setting the stage for ongoing stabilization.

# **Holistic Services VIP provides:**

**VIP Therapists** help our patients with Individual and Group Therapy in the following ways:

- 1. **Assessment and Diagnosis**: They evaluate patients to understand the severity of their addiction, any co-occurring mental health disorders (e.g., depression, anxiety, PTSD), and the underlying causes of their struggles.
- 2. **Treatment Planning**: They create personalized treatment plans based on the individual's needs, combining therapy for addiction and mental health, which may include Cognitive Behavioral Therapy (CBT), Dialectical Behavioral Therapy (DBT), or other evidence-based approaches.
- 3. **Individual Therapy**: Therapists work one-on-one with patients to address underlying emotional issues, trauma, or psychological factors that contribute to substance use. They help patients develop coping strategies, build resilience, and identify triggers for relapses.
- 4. **Group Therapy**: They lead group therapy sessions where individuals struggling with addiction can share experiences, gain support, and learn from others in recovery. This promotes peer accountability and creates a support network.
- 5. **Relapse Prevention**: A key focus is helping patients identify high-risk situations, recognize triggers, and develop strategies to prevent relapse. Therapists work on building patients' emotional regulation and stress management skills.
- 6. **Support for Co-Occurring Disorders**: Many individuals with addiction also have mental health conditions. Therapists provide integrated treatment to address both issues, which is crucial for long-term recovery.
- 7. **Family Therapy**: Addiction often affects the entire family. Therapists may provide family counseling to help repair relationships, improve communication, and educate family members about the recovery process.
- 8. **Education and Skill Building**: Therapists help individuals develop life skills necessary for maintaining sobriety and a healthy mental state, such as problem-solving, emotional regulation, and building a strong support system.

- 9. **Collaboration with Other Providers**: They work closely with doctors, addiction specialists, case managers, and peer support staff to ensure comprehensive care, often as part of a multi-disciplinary team approach.
- 10. **Support During All Phases of Recovery**: From early intervention to long-term maintenance, therapists provide ongoing support to help individuals navigate the challenges of recovery and build fulfilling, substance-free lives.

This holistic approach ensures that both the psychological and behavioral aspects of addiction and mental health are addressed, fostering sustainable recovery.

### Targeted Case Management (TCM): Supporting Practical Solutions for Life's Challenges

Many patients entering addiction treatment face a range of personal and practical challenges. Our Targeted Case Managers (TCMs) are here to help address these critical needs, such as housing, employment, and social support. Through a collaborative approach, TCMs work with you to assess your specific circumstances and connect you with valuable resources to navigate these obstacles.

In early recovery, stress can be high due to the impact of addiction on various aspects of life—housing instability, lack of transportation, or the financial strain of basic necessities like food and clothing. TCMs provide a guiding hand to help alleviate these burdens. Whether making initial calls on your behalf or sitting beside you to support decision-making, our TCMs ensure you're never alone in the process.

TCM services go beyond just resource linkage. By identifying your individual needs and leveraging their community connections, TCMs offer ongoing support to help you achieve stability. This not only eases the immediate pressures of life, reducing the risk of relapse, but also fosters a sense of empowerment and progress as you regain control over your circumstances.

The goal is to give you the tools and confidence to ask for what you need and to achieve those goals in a supportive, non-judgmental environment. TCMs remain with you every step of the way, helping you navigate challenges and ensuring your well-being as you build a foundation for lasting recovery.

**VIP Targeted Case Managers:** Here are some more specific ways TCM can help you with your journey in Recovery.

# 1. Comprehensive Assessment:

- Client Evaluation: Conducting thorough assessments of the client's addiction, mental health, social circumstances, and daily living needs.
- Needs Identification: Identifying areas where the client requires support, such as housing, transportation, healthcare, legal assistance, or vocational training.

# 2. Individualized Service Planning:

- **Developing Plans**: Creating personalized care plans that address the client's specific needs and goals, ensuring that both mental health and addiction treatment are incorporated.
- Goal Setting: Helping clients set achievable short-term and long-term recovery goals that

promote independence and improve their quality of life.

#### 3. Resource Coordination and Referral:

- Connecting to Services: Helping clients access services like mental health treatment, addiction counseling, medical care, financial assistance, housing, education, and job placement programs.
- Linking to Community Resources: Coordinating with community agencies to ensure clients are connected with social services, support groups, and recovery communities like 12-step programs.

## 4. Advocacy:

- Client Advocacy: Advocating on behalf of clients to secure necessary services, benefits, and accommodations, including health insurance coverage, legal rights, or social service entitlements.
- System Navigation: Assisting clients in navigating complex healthcare systems and ensuring they receive timely and appropriate care.

## 5. Monitoring and Follow-Up:

- **Progress Tracking**: Regularly monitoring the client's progress toward their goals, adjusting care plans as needed, and ensuring continuous engagement with necessary services.
- Follow-Up Support: Providing ongoing follow-up to check on the client's well-being, progress in recovery, and continued access to necessary resources.

#### 6. Crisis Intervention:

- Immediate Support: Offering timely support in crisis situations, such as managing relapses, mental health crises, or housing emergencies.
- Crisis Resources: Connecting clients to emergency services or crisis intervention programs if they experience acute challenges.

# 7. Life Skills Development:

- **Teaching Skills**: Assisting clients in developing essential life skills, such as budgeting, time management, stress reduction, conflict resolution, and decision-making.
- Social Integration: Helping clients improve their social and communication skills, enhancing their ability to reintegrate into the community and build supportive relationships.

# 8. Client Empowerment:

- Encouraging Independence: Empowering clients to take an active role in their own recovery, helping them develop self-sufficiency and confidence to manage their addiction and mental health challenges.
- Fostering Resilience: Supporting clients in building resilience and coping mechanisms to handle stress, setbacks, and challenges during recovery.

#### 9. Collaboration with Treatment Providers:

- Interdisciplinary Teamwork: Collaborating with healthcare providers, therapists, addiction counselors, psychiatrists, and peer support specialists to ensure the client's care is coordinated and comprehensive.
- Integrated Treatment: Ensuring that addiction treatment and mental health care are effectively integrated, especially for clients with dual diagnoses (both addiction and mental health disorders).

## 10. Documentation and Reporting:

- Case Documentation: Maintaining detailed records of client interactions, services provided, progress toward goals, and any changes in circumstances.
- **Progress Reports**: Providing reports to healthcare providers or agencies overseeing the client's care, ensuring compliance with treatment plans and service agreements.

## 11. Support for Family Involvement:

- Family Engagement: Encouraging family participation in the recovery process by involving them in care plans and providing resources for family education and support.
- Education and Communication: Educating family members about addiction and mental health to reduce stigma and improve family dynamics.

## 12. Addressing Barriers to Recovery:

- Overcoming Obstacles: Helping clients overcome barriers to recovery, such as homelessness, lack of transportation, employment difficulties, or access to healthcare.
- **Problem-Solving**: Working closely with clients to identify potential obstacles and develop practical strategies to address them.

# 13. Discharge Planning:

- Transition Support: Assisting clients in transitioning out of intensive care settings, such as inpatient treatment or hospital care, and ensuring continuity of care in outpatient or community-based settings.
- Long-Term Support: Developing plans for long-term recovery, focusing on maintaining sobriety, improving mental health, and enhancing overall well-being.

# **Key Outcome Goals:**

- Stability and Independence: Helping clients achieve stability in housing, employment, and social functioning.
- Improved Access to Services: Ensuring clients consistently receive the medical, mental health, and social services they need for successful recovery.
- Sustained Recovery: Supporting clients in maintaining sobriety or effectively managing their mental health conditions over the long term.

A TCM in addiction and mental health provides crucial support by bridging gaps in care, helping clients access necessary services, and empowering them to manage both their addiction and mental health issues effectively.

VIP Peer Support Specialists (PSS) in addiction and mental health are individuals with lived experience of recovery from substance use disorders or mental health conditions who provide support, guidance, and encouragement to others currently going through similar challenges. Their unique role is grounded in their journey, enabling them to connect with clients on a deeper, more empathetic level. Here are the key responsibilities and functions of Peer Support Specialists in addiction and mental health care:

# 1. Providing Emotional Support:

- Empathy and Understanding: Peer Support Specialists use their own experiences of addiction and mental health recovery to offer others understanding, compassion, and hope. Their insights can help clients feel less alone in their struggles.
- Nonjudgmental listening: This involves offering a safe and supportive space for individuals to share their experiences, struggles, and emotions without fear of judgment.

## 2. Sharing Lived Experience:

- Recovery Stories: Share their journey of overcoming addiction or mental health challenges, including the obstacles they faced and the strategies they used to achieve recovery.
- **Modeling Recovery**: By demonstrating through their own lives that recovery is possible, they provide inspiration and motivation to clients who may feel discouraged.

# 3. Goal Setting and Encouragement:

- **Support in Goal Development**: Assisting clients in setting realistic recovery goals and breaking them down into manageable steps. Goals may include sobriety, improving mental health, reestablishing relationships, or achieving employment.
- Encouragement and Motivation: Continuous encouragement keeps clients motivated and focused on their recovery, especially during setbacks or difficult moments.

# 4. Facilitating Recovery-Oriented Activities:

- **Support Groups**: Leading or co-facilitating peer-led support groups where clients can share experiences, give and receive support, and learn recovery skills.
- Workshops and Skills Training: Teaching practical skills such as stress management, coping strategies, communication skills, and relapse prevention techniques based on their own recovery experience.

# 5. Helping Clients Navigate Systems and Resources:

- System Navigation: Assisting clients in understanding and navigating the often-complex mental health and addiction treatment systems, including connecting them with services such as housing, healthcare, or vocational training.
- **Resource Sharing**: Providing information about recovery resources, support groups, sober activities, and community services that can assist clients on their journey.

# 6. Building a Supportive Relationship:

- **Peer-to-Peer Connection**: Establishing a relationship built on mutual respect, trust, and shared experience. This bond can create a sense of solidarity and reduce feelings of isolation that many individuals in recovery experience.
- Collaborative Partnership: Working alongside clients as partners in their recovery, rather than as authority figures, allowing clients to take an active role in their treatment process.

## 7. Advocacy and Empowerment:

- Self-Advocacy Encouragement: Empowering clients to advocate for themselves, express their needs, and make informed decisions about their recovery and mental health care.
- **Fighting Stigma**: Helping to reduce the stigma surrounding addiction and mental health disorders by fostering an environment of acceptance and respect, both in individual interactions and within the broader community.

## 8. Crisis Support and Relapse Prevention:

- Crisis Intervention: Providing immediate support during emotional crises or periods of relapse risk, offering strategies for managing cravings, stress, or mental health challenges.
- Relapse Prevention: Sharing practical tools and techniques to help clients avoid relapse, such as identifying triggers, managing stress, and building a strong support network.

# 9. Promoting Wellness and Self-Care:

- Holistic Wellness: Encouraging clients to adopt healthy lifestyles that support their overall wellbeing, including physical health, mental health, and social connections.
- **Self-Care Education**: Helping clients develop self-care routines that can enhance their mental and emotional well-being, such as exercise, mindfulness, and stress-reduction techniques.

# 10. Building Community and Social Connections:

- Fostering Social Support: Helping clients build a support network of peers, family, and friends who can offer emotional and practical support during recovery.
- Connecting to the Recovery Community: Encouraging participation in community-based recovery programs, such as 12-step groups (e.g., Alcoholics Anonymous, Narcotics Anonymous), SMART Recovery, or other support networks.

# 11. Working as Part of a Care Team:

- Collaboration with Providers: Working closely with healthcare professionals, therapists, case managers, and addiction counselors as part of an interdisciplinary treatment team, offering insights from the peer perspective.
- **Bridging Gaps**: Acting as a bridge between clients and professional care providers, helping clients feel more comfortable accessing treatment and adhering to care plans.

# 12. Cultural Sensitivity and Personalization:

- Culturally Competent Support: Support that is sensitive to the client's cultural, social, and economic background helps to make recovery more accessible and relevant.
- Individualized Approach: Tailoring their approach to meet the unique needs of each individual, respecting that everyone's recovery journey is different.

## 13. Recovery Milestone Celebration:

- Celebrating Progress: Recognizing and celebrating small and large recovery milestones with clients, reinforcing positive progress and promoting self-confidence.
- Encouraging Continued Growth: Supporting clients in continuing to grow and evolve beyond their initial recovery, helping them explore new opportunities and personal development.

# **Key Outcome Goals:**

- Sustained Recovery: Supporting individuals in achieving and maintaining sobriety or stability in managing mental health symptoms.
- Improved Mental Health: Helping clients develop coping skills, resilience, and emotional regulation strategies.
- Enhanced Quality of Life: Assisting clients in rebuilding their lives, including improving relationships, gaining employment, and engaging with their community.
- Increased Self-Efficacy: Empowering individuals to take charge of their recovery journey

Peer Support Specialists play a vital role in the recovery process by using their lived experience to foster hope, provide practical support, and empower individuals to rebuild their lives. Their presence enhances recovery by offering relatable, empathetic, and non-judgmental support.

#### **Telehealth Services**

In an effort to make services more accessible, to minimize interruptions in care, and promote the best outcomes in treatment, some services may be provided through telehealth. Some telehealth services are provided in the clinic-patient in one clinic, provider in another. During these services, a VIP Community Health teammate will be with me for the duration of the service to ensure the equipment is functioning, that you can hear and see and understand the provider and that the provider can hear and see you. You have the right to decline telehealth services if you choose but understand, another provider might not be available on that day/time. All telehealth services are provided by a qualified teammate and through audio and visual equipment that meet the standards for telehealth services.

#### Potential Benefits of Telehealth Services include but are not limited to:

- Improved access to medical care by enabling a patient to remain in a clinical setting (or a remote site) while the provider obtains test results from other healthcare providers at distant or other sites.
- More efficient medical evaluation and management.
- Obtaining expertise of a distant specialist.

#### Potential Risks of Telehealth Services include but are not limited to:

- Information transmitted may not be sufficient (e.g., poor resolution, poor connection, call failure/inability to connect) to allow for appropriate medical decision making by the provider.
- Delays in medical evaluation and treatment could occur due to deficiencies or failures of the equipment.
- Security protocols could fail, causing a breach of privacy of personal medical information.
- In rare cases, a lack of access to complete medical records may result in adverse drug interactions, allergic reactions or other judgment errors.

## **VIP Community Health Program Expectations**

VIP Community Health has a set of expectations that all patients are asked to follow. These expectations are in place to help you in your recovery and maintain a safe environment for our patients and team. These expectations are as follows:

- You are expected to keep all information about patients confidential (this may include any
  information you may hear in the lobby or during group sessions).
- Participation in counseling is expected.
- Weapons of any kind are not allowed within the clinic or on the clinic grounds.
- Possession of alcohol or illicit drugs or sale or purchase of illicit drugs on the property is not allowed.
- Verbal or physical abuse of patients, visitors or VIP Community Health teammates will not be tolerated and may result in being discharged from the clinic.
- Smoking is only allowed in designated areas and not within the clinic building.
- Loitering in or around the clinic or clinic grounds is not allowed.
- No animals are allowed in the clinic unless it is an approved service animal.
- No video, audio or photo recording devices are allowed in common patient areas in any clinic or clinic grounds (waiting room or group therapy, etc.)
- Drug screening is a program requirement. Random and observed drug screens may be performed. Any urine drug screen that shows a substance (alcohol, illicit drugs, or unapproved medication), or the absence of your treatment medication, may result in additional interventions.
- If it is your day to submit a drug screen, you may not leave the building until the drug screen has been completed.
- Falsifying or tampering with any urine specimen will not be tolerated and may result in additional interventions.
- Medication counts are a program requirement. Any medication count that is incorrect may result in additional interventions.
- Prescription monitoring reports will be obtained on a regular basis. Any unapproved medication that shows up may result in additional interventions.
- You are expected to make and keep scheduled appointments.
- You are expected to be on time for your appointments. If you arrive late, you will have to wait until there is a time slot available or have your appointment rescheduled.
- Unless the treatment team has approved changing clinicians (provider or counselor), you will continue to see the same clinician throughout your treatment program.
- Confirmed diversion of your medication will not be tolerated and could result in being discharged from the program.
- You are expected to inform us of all medication prescribed to you and sign a written release of information that allows VIP Community Health to speak with your other treatment providers.
- VIP Community Health accepts all State Medicaid and commercial insurance payor plans. If VIP Community Health participates in your insurance plan, you are expected to pay any patient responsible portion, including deductibles, coinsurance and copayments at the time of service. Patients not covered by insurance will be offered services on a sliding scale.

## **Information Reference Guide**

There are multiple methods for reaching VIP Community Health LLC. Below is all the contact information needed to make/change appointments, ask questions, get support, or request information. For after-hour emergencies, call 911 or visit your local emergency room.

#### **Behavioral Health Directory**

Behavioral Health Provider Counselor Targeted Case Manager Peer Support Specialist Barry Hardison, M.D.
Debra Hardison, APRN, CPC
Jordan Trowell, TCM
Rhen Geary, PSS

barry@vipcommunityhealth.com debra@vipcommunityhealth.com jordan@vipcommunityhealth.com rhen@vipcommunityhealth.com

#### **Hours of Operation**

- MONDAY-THURSDAY...... 8 am-6 pm
- FRIDAY-SUNDAY......CLOSED

Method	Information	Description	Best Time to Reach Us
C	502-517-0506	Primary Phone Number	Anytime during regular hours of operation.
<u>C</u>	502-353-0102	Secondary Phone Number	Anytime during regular hours of operation if you are having issues with the first primary #
	502-517-4259	Main Fax Line	Anytime during normal hours of operation.
	info@vipcommunityhealth.com	Primary company email	At your Convenience
	www.vipcommunityhealth.com	Website URL Address	At your Convenience
2	503 Humston Drive, Lawrenceburg, KY 40342	Physical and Mailing Address	At your Convenience
0 0	QR Code for our Website: For quick access, just scan it using your phone app and tap the URL link when it appears.	Scan the QR Code to reach us online or chat with us. If it is not during our hours of operation, then you can leave us a written instant message, and we will still receive it.	At your Convenience

#### **Orientation to Medication**

#### **Buprenorphine**

- 1. Buprenorphine is a medication that is only effective for the treatment of opiate use disorders. In addition to the medication, you will also be receiving counseling.
- 1. Buprenorphine comes in a film, tablet, and as an injectable.
- 2. YOUR MEDICATION IS FOR YOUR USE ONLY. Not only do state and federal laws forbid giving
- 3. this medication to anyone else, it can also cause great harm or even death to anyone for whom it was not prescribed.
- 4. You are to take your medication as prescribed by a VIP Community Health physician/PA/nurse practitioner.
- 5. If you are currently taking any other medication under a physician's order, you must notify other providers that you have entered treatment at VIP Community Health. The importance of this is the danger of buprenorphine effect on different medications and the effects that it may have on you.
- 6. Other drug use while on buprenorphine can be dangerous to your health and well-being. Taking illicit substances or medications (e.g., Valium or Xanax) could potentially result in unconsciousness or death. This is also true of abuse of alcohol or any other "downers" while you are in treatment. Buprenorphine is a safe medication when taken as prescribed but continuing to abuse other substances can cause severe harm or death.

#### Common side effects may include:

- dizziness, drowsiness, blurred vision, feeling drunk, trouble concentrating.
- withdrawal symptoms.
- tongue pain, redness, or numbness inside your mouth.
- nausea, vomiting, constipation.
- headache, back pain.
- fast or pounding heartbeats or increased sweating
- sleep problems (insomnia).

#### Vivitrol

- 1. Once-monthly injection, non-addictive
- 2. It is used to help prevent relapse to opioid dependence after detox or treatment
- 3. It is also used to treat alcohol dependence. You should stop drinking before starting VIVITROL
- 4. Before starting VIVITROL, you must be opioid-free for a minimum of 7-14 days to avoid sudden
- 7. opioid withdrawal
- 5. Do not take VIVITROL if you have any symptoms of opioid withdrawal
- 6. VIVITROL must be used as a part of a recovery program.

## **Neonatal Abstinence Syndrome**

Neonatal abstinence syndrome (NAS) is a term for a group of problems a baby experiences when withdrawing from exposure to illicit substances. Studies involving women who regularly use opioids during their pregnancy have found an increased chance for poor pregnancy outcomes. This is more commonly reported in women who are taking heroin or who misuse their medications. When taken as prescribed, buprenorphine does not seem to increase the chance for pregnancy problems. The team may assist you with Long-acting reversible contraception, or LARC. Reversible birth control that provides long-lasting (think years) pregnancy prevention while in treatment.

#### Consents

The consents and notifications contained in this section are blank copies of information that you have reviewed and signed in the office for your ongoing reference. If you would like a copy of the signed form(s), please inform the front desk, and a copy will be provided to you upon request. You will be asked to review and re-sign these consents and notifications as you continue in treatment and as there are changes to the content within.

## **Confidentiality of Substance Use Disorder Patient Records**

Federal laws and regulations protect the confidentiality of substance use disorder patient records maintained by this program. Generally, the program may not say to a person outside the program that we know who the patient is, that a patient attends the program, or disclose any information identifying that a patient has a substance use disorder unless:

- The patient consents in writing on an appropriate release of information\*; or
- The disclosure is allowed by a court order; or
- The disclosure is made to treating medical personnel in a medical emergency or
- The disclosure is made to qualified personnel for research, audit, or program evaluation.
- Information related to your commission of a crime on the premises of the treatment center or against personnel of the treatment center is not protected; or
- Reports of suspected child abuse or neglect under State law to the appropriate State or local authorities are not protected.

Federal laws and regulations prohibit any re-disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

Federal laws and regulations restrict any use of the information to investigate or prosecute any alcohol or drug abuse patient criminally.

As a VIP Community Health patient, you are also required to keep all information learned from and about other patients confidential. This means you may not discuss the identity or identifying information or share anything regarding another patient with anyone, regardless of whether the information is learned as a part of a group clinical service, overheard between individuals in the lobby or on the grounds of VIP Community Health.

Violations of the 42 CFR part 2 by a program are a crime. Suppose you suspect your confidentiality has been violated under this law. In that case, reports of violations of Part 2 may be sent to the US Attorney for the judicial district in which the violation occurred. A list of US Attorneys can be found at: https://www.justice.gov/usao/us-attorneys-listing

(See 42 U.S.C. 290dd-3 and 42 U.S.C. 290ee-3 for Federal laws and 42 CFR part 2 for Federal regulations.)

\*General releases of information or medical releases are not sufficient, as they do not meet the requirements set forth by 42 CFR.

#### **Patient Consent to Treatment**

I am consenting to voluntarily participate in a substance use disorder program with VIP Community Health LLC. I have been informed about what to expect in my treatment, and I have been allowed to receive answers to all my questions before participating in the treatment program.

I understand that medication, counseling, and supportive services primarily provide significant benefits, but it may also pose some risks. Medications can sometimes cause unwanted side effects and sharing sensitive and personal information in counseling may sometimes feel uncomfortable.

I have the right to receive information before proceeding with any specific procedure or treatment recommendation and may discontinue my participation in the treatment program at any time.

I understand that to minimize the risks to my safety and well-being, VIP Community Health will review prescription drug monitoring program reports before prescribing. I authorize VIP Community Health to review these databases as a part of my care. I also understand that prescriptions may be written or sent electronically to my pharmacy and authorize VIP Community Health to prescribe medications electronically or written as needed.

I understand that all information I share with VIP Community Health is confidential, and no information will be released without my consent, as provided by 42 CFR part 2. During my treatment, it may be necessary for VIP Community Health to communicate with others about my treatment, but this will always be explained to me first, and I will be asked to give written consent before any information is shared as applicable by law. I understand that there may be some extraordinary circumstances where information may be shared without my permission, and this has been explained to me in the patient handouts on the confidentiality notice.

I understand that VIP Community Health may make referrals to other services or providers for care that may benefit me based on my assessed needs. I have the freedom to choose to accept the referral for needed services from a provider recommended by VIP Community Health or to seek referred services from a provider of my choice pending qualification to provide the service(s) needed.

I have been offered a copy of this signed consent to treatment form and understand that an unsigned copy is provided in the Patient Handbook.

## Patient Consent to Treatment with Buprenorphine/Naloxone

Buprenorphine is a medication approved by the Food and Drug Administration (FDA) for treatment of people with opioid addiction. It can be used for detoxification or for maintenance therapy and may continue as long as medically necessary.

Buprenorphine is an opioid and can result in physical dependence, but it has a milder effect than substances such as heroin and morphine. Buprenorphine withdrawal is generally less intense than heroin or methadone, but if it is discontinued suddenly, you may experience withdrawal symptoms. These withdrawal symptoms may last anywhere from a few days to several weeks.

Suppose you are dependent on opioids (heroin or prescription opioids such as Lortab, OxyContin, Methadone, etc.). In that case, you should be in as much withdrawal as possible when you take the first dose of buprenorphine. If you are not in withdrawal, buprenorphine may cause significant opioid withdrawal. Due to this reason, it is recommended that induction be conducted under the close supervision of a qualified physician/nurse practitioner. You may be asked to stay for a period of observation during your first office visit, and your physician/nurse practitioner may adjust your medication dosage over several days to ensure your safety and well-being.

Once you have stabilized buprenorphine, it is expected that other opioids will have less effect. Use of other opioids while you are taking buprenorphine may cause unwanted effects and could put you at risk for overdose. Additionally, combining buprenorphine with other medications, such as benzodiazepines (Valium, Xanax, etc.), can be extremely dangerous. You need to talk with your physician about any medications you are currently taking, as well as before you fill any prescriptions from another doctor.

The medication you will be taking is a combination of buprenorphine and a short-acting opioid blocker (Naloxone). This medication will be prescribed to you in the form of a film or tablet that is held under the tongue until it dissolves completely. It is then absorbed over the next 15-30 minutes through the blood vessels under the tongue. It is important that you take the medication correctly for it to be fully effective. Buprenorphine should never be crushed, snorted, or injected under any circumstances.

#### Consent to Treatment with Oral Naltrexone and Vivitrol

Naltrexone is an oral, prescription medication used to treat both alcohol and opioid (heroin, oxycontin, methadone, etc.) use disorders. Vivitrol is the injectable form of naltrexone that is currently available. Treatment with naltrexone Vivitrol should be combined with other recovery tools such as counseling, self-help meetings, and proper medical and mental health care.

It is required that you stop using any type of opioids at least seven days prior to your first dose or injection of medication. Because of how this medication works, you will be at risk of experiencing severe physical withdrawals if you still have any opioids in your system. This can include nausea, vomiting, chills, and muscle cramps. It is also recommended that you stop drinking prior to your first injection of Vivitrol for the medication to work the most effectively.

While you are on naltrexone/Vivitrol, it is expected that opioids and alcohol will have less effect because the medication acts as a blocker. Attempts to break through blocking effect can result in overdose.

Naltrexone/Vivitrol can also cause serious side effects, including severe liver damage or hepatitis, severe allergic reactions, and reactions at the injection site (Vivitrol only).

#### Alternatives to Naltrexone/Vivitrol Treatment

Some hospitals have specialized alcohol/drug treatment programs that can provide medical detoxification. There are also treatment programs that may use other medications, such as Campral or Antabuse (for alcohol) or methadone (for opioids). There are also treatment programs that provide intensive services such as group, individual, and family counseling but do not include any medications.

## **Statement of Patient Rights**

#### I understand that as a patient of VIP Community Health, I am entitled to the following rights:

- To be treated with consideration, respect, and personal dignity.
- To receive services in the least restrictive environment.
- Freedom from the use of physical restraint or seclusion.
- To not be unlawfully discriminated against in determining my eligibility for treatment.
- To have all services and recommendations explained to me prior to giving informed consent to participate in treatment.
- To receive treatment that is individualized and best meets my needs.
- To be informed of one's own condition.
- To have input into my treatment and Recovery Support (case management) plans and be informed of their content.
- To file a complaint, recommendation, or opinion regarding the services I receive.
- To give informed written consent before participating in any research study.
- To have information about my treatment kept confidential unless I provide written consent to share my information.
- To request a written statement of the charge for any service and be informed about the policies regarding the payment of fees.
- To be informed of the rules of patient conduct and the consequences for not complying with these rules, including what may result in being discharged from services.
- To review my patient record and receive one free copy of my patient record as in accordance with federal and state laws.
- To consult with an independent treatment specialist or legal counsel at one's own expense.
- To be informed of the reason for denial of services and/or reasons for terminating services.
- To receive voluntary detoxification from services.

## **Patient Complaint Policy**

Complaints/concerns should be filed initially with the Facility Administrator, or in the event the facility administrator is not available, or the complaint is concerning that person, the complaint can be filed with the Regional Operations Director or Patient Rights Officer (contact information provided below\*). They will assist you in filing a complaint upon your request. The program will make a resolution decision within 21 calendar days of receiving the complaint. Any exceptions that cause this period to be extended will be documented in the complaint file, and written notification will be given to the patient or persons filing complaints on the patient's behalf. Records of patient complaints will be maintained for two years from date of resolution and include a copy of the complaint, documentation reflecting the process used, resolution/remedy of the complaint, and documentation, if applicable, of extending the period for resolving the complaint beyond 21 calendar days.

Complaints related to patient rights or compliance issues, such as laws and regulations of local, state, and federal agencies or accrediting bodies may be submitted by calling VIP Community Health LLC at 502-517-0506.

Within three working days of receiving the complaint, the program will contact the patient to acknowledge the complaint and provide the following information: [a] the date the complaint was received, [b] a summary of the complaint, [c] an overview of the complaint investigation process, [d]a timetable for completing the investigation and notification of the resolution, and [e] the treatment provider contact the person's name, address, and telephone number.

**At any time**, patients or persons filing complaints on the patient's behalf have a right to file a complaint, in addition to, or instead of, with any outside organization that includes, but is not limited to, the following:

- Office of the Ombudsman, contact information posted in the facility's lobby. You may speak to the Facility Administrator, ask any teammate for contact information, or you can contact:
  - AODE Ombudsman
  - 275 E Main St 2E-O
  - CHFS.Listens@ky.gov
  - Phone: 502-564-5497
  - Fax: 502-564-9523

## **Notice of Privacy Practices**

VIP Community Health is committed to providing quality behavioral healthcare services. An important part of this commitment is protecting your health information according to applicable laws. This notice (Notice of Privacy Practices) describes your rights and our duties under Federal Law.

Protected health information ("PHI") is information about you, including demographic information, that may identify you and that relates to your past, present or future physical or mental health or condition, the provision of healthcare services, or past, present, or future payment for the provision of healthcare services to you.

#### **Our Duties:**

We are required by law to maintain the privacy of your PHI, provide you with notice of our legal duties and privacy practices with respect to your PHI and to notify you following a breach of unsecured PHI related to you. We are required to abide by the terms of this Notice of Privacy Practices. This Notice of Privacy Practices is effective as of the date listed. This Notice of Privacy Practices will remain in effect until it is revised. We are required to modify this Notice of Privacy Practices when there are material changes to your rights, our duties, or other practices contained herein.

We reserve the right to change our privacy policy and practices and the terms of this Notice of Privacy Practices, consistent with applicable law and our current business processes at any time. Any new Notice of Privacy Practices will be effective for all PHI that we maintain at that time. Notification of revisions of this Notice of Privacy Practices will be posted as requested or in our place of business.

In addition to the above, we have a duty to respond to your requests (e.g., those corresponding to your rights) in a timely and appropriate manner. We support and value your right to privacy and are committed to maintaining reasonable and appropriate safeguards for your PHI.

#### **Communications**

It is essential that we contact you using your wireless telephone number or email to remind of appointments, to obtain your feedback on your experience with our team, or to follow up on your aftercare post-discharge. We may use an automatic telephone dialing system or prerecorded voice to deliver these messages.

By providing us with your telephone number and email, you authorize VIP Community Health Inc., its employees, and its agents to send emails or text messages and call your number. These messages might contain healthcare information, appointment reminders, notifications or surveys. Please understand that VIP Community Health does not charge for this service, but regular text messaging or incoming call rates may apply.

## **Fee Policy**

This details the financial expectations of patients receiving VIP Community Health services.

- I. If VIP Community Health is contracted with your insurance plan, we will bill your insurance company for services provided to you. You will be responsible for deductible, coinsurance, and copay amounts as indicated by your insurance plan. Payment of your patient responsible portion of the bill is required, in full, at the time of service.
- 2. If VIP Community Health does not participate with your insurance plan, or if you do not have insurance coverage, you will be financially responsible for services you receive at the rate indicated by the most current VIP Community Health patient fee schedule. Payment is required in full at the time of service.
- **3**. Any contact information you provide to VIP Community Health throughout the duration of your treatment may be shared with a third party or affiliate as needed to collect any outstanding balances that remain unpaid as your financial responsibility for treatment.
- VIP Community Health cannot guarantee your services or medication will be approved/covered by your insurance provider. All fees are non-negotiable.

Any questions or concerns about fees for the services outlined above can be answered by the front office or Facility Administrator at your local VIP Community Health clinic. Additionally, you may contact the VIP Community Health Business Office with billing and payment related questions and concerns at 1-502-517-0506.

If you are prescribed Vivitrol/Subclade, VIP Community Health teammates will administer it to you on-site once the prescription has been tilled/delivered.