



Healthy Minds LLC  
 9114 Philadelphia Road Suite 106  
 Rosedale, MD 21237  
 Phone: (240) 443-TALK (8255) Fax: (443) 378-8983  
 Email: jjacobs@hmlc.org Website: www.HMLLC.org

### CLIENT'S RIGHTS AND RESPONSIBILITIES

RIGHTS	RESPONSIBILITIES
❖ Clients have the right to be treated with dignity and respect.	❖ Clients have the responsibility to give providers the information they need to deliver the best possible care.
❖ Clients have the right to fair treatment, regardless of their race, religion, gender, ethnicity, age, disability or source of payment.	❖ Clients have the responsibility to ask their provider questions about their care, to follow plans and instructions for their treatment, and to let their provider know when their treatment plan no longer works for them.
❖ Clients have the right to have their treatment and other patient information kept private.	❖ Clients have the responsibility to inform their provider about medication and medication changes.
❖ Only in an emergency, or if required by law, can records be released without a client's permission. Information about a client's treatment can be released only with an authorization by the client or legal guardian.	❖ Clients have the responsibility to keep, and arrive on time for their appointments. Clients should provide 24 hours notice for any appointment they need to reschedule or cancel.
❖ Clients have the right to have an easy to understand explanation of their condition and treatment.	❖ Clients have the responsibility to respect the confidentiality of other patients.
❖ Clients have the right to know about their treatment choices regardless of cost or insurance coverage.	❖ Clients have the responsibility to treat staff and providers with dignity and respect.
❖ Clients have the right to information about provider's professional credentials.	❖ Clients have the responsibility to pay all self-payments at the time of service.
❖ Clients have the right to know the clinical guidelines used in providing and/or managing their care.	❖ Clients are responsible for the supervision of their children.
❖ Clients have the right to provide input about Healthy Minds, LLC's policies and services.	❖ Clients have the responsibility for all costs not covered by insurance.
❖ Clients have the right to know about the complaint, grievance and appeal process.	



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- ❖ Clients have the right to know about State and Federal laws that relate to their rights and responsibilities in the treatment process.
- ❖ Clients have the right to share in the formation of their treatment plan.

- ❖ I have read and received a copy of my rights and responsibilities.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_