

Advancing Care Transitioning to Adult Services

The Provider Toolkit for Advancing Care & Transition Support

> Georgia Department of Behavioral Health & Developmental Disabilities (DBHDD) Office of Children, Young Adults & Families (OCYF)

Client Forms



CODED CLIENT FORMS

Printable support forms for the client, parent, and/or caregiver.

The Big "Why"

Let's explore these "why" questions....

- Why is it important to know your medical history?
- Why is it important to memorize your personal information?
- Why is it important to know who to contact for different types of help?

Why is it important to learn about your rights as a youth and as an adult?

- Why is it important to create relationships with your service providers?
- Why is it important to have access to community resources?
- Why is it important to understand healthy relationships with peers?
- Why is it important to be educated in suicide prevention and coping skills?
- Why is it important to know the basics of medical policies and laws?
- Why is it important to be an active participant in your care?
- Why is it important to role play/practice life skills before they are needed?

We hope these questions help you to navigate tough conversations, recognize the need for obtaining these skills, and give you a firm grasp on the importance of these tools.

What's your "Big Why" for wanting to be prepared for adulthood?



While working with mental health providers, and when talking with family, you might hear a lot of discussions around growing up and preparing for adulthood. It is important to discuss the answers to these questions in addition to completing this toolkit.

Life Skills 101

Housekeeping Skills

- Basic housekeeping/cleaning
- How to cook
- Basic sewing
- Home repairs 101
- Using kitchen appliances

Technical Skills

- How to use a calendar and schedule
- How to write a letter/statement
- Public/effective communication
- Technology 101

Survival Skills

- How to keep yourself safe
- Emergency preparedness
- Basic first aid
- When without electricity
- How to read a map
- Car repair/flat tire
- How to write a resume/cover letter

Money Management

- How to budget
- How to avoid or get out of debt
- How to make a major purchase
- Balancing your bank account
- Couponing
- Organize financial records
- Investing
- Taxes

Self-Awareness Skills

- Understanding your "calling," purpose, mission
- Prioritizing
- Understanding your personal value
- How to focus
- Having a sense of humor
- Basic etiquette (politeness)
- Basic civics (understanding of law)
- Voting

Relationship Skills

- Listening & communication
- Respect
- Expressing love
- Compliments & criticisms
- Emotional intelligence

Wellness & MH Skills

- Critical thinking/problem solving
- Synthesizing
- Self-discipline (exercise & nutrition)
- Self-care (sleep & hygiene)



Getting the Gears Going



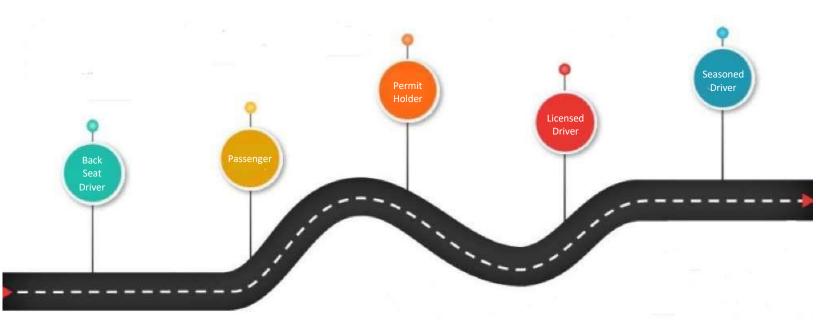
Choose the correct term that corresponds with the definition.

A statement that allows for selected individuals to have specific authorities as spelled out in the document (can be health, asset, and/or financial related).	
Universal policies and laws that protect the individual receiving services to have control within their treatment.	
Federal laws that require mental and physical health providers to report signs of abuse, neglect, homicide, suicide, etc.	
The designated authority to act for another person in specified or all legal or financial matters.	
Detailed document that states a person's desires regarding their care and is used if the person cannot speak for themselves.	
Federal law and standards that protect clients from having their medical information shared without their consent.	
Legal document that states a person's final wishes pertaining to assets and Dependents: used when they have passed away.	
Legal document when someone wants to make sure that he or she has a trusted person available to make decisions on his or her healthcare in the event he or she is no longer able to do so.	

- A. Health Insurance Portability Accountability Act (HIPAA)
- B. Release of Information (ROI)
- C. Power of Attorney (POA)
- D. Living Will

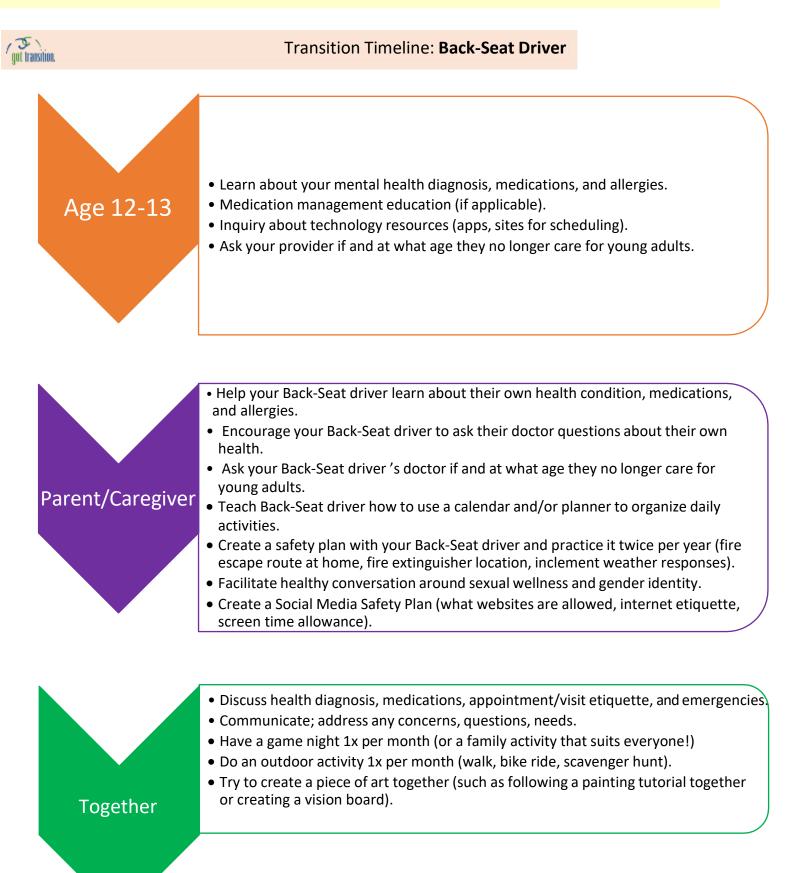
- E. Last Will & Testament
- F. Client Rights
- G. Mandatory Reporting
- H. Medical or HealthCare Power of Attorney (MPOA or HPOA)

Transition Timelines



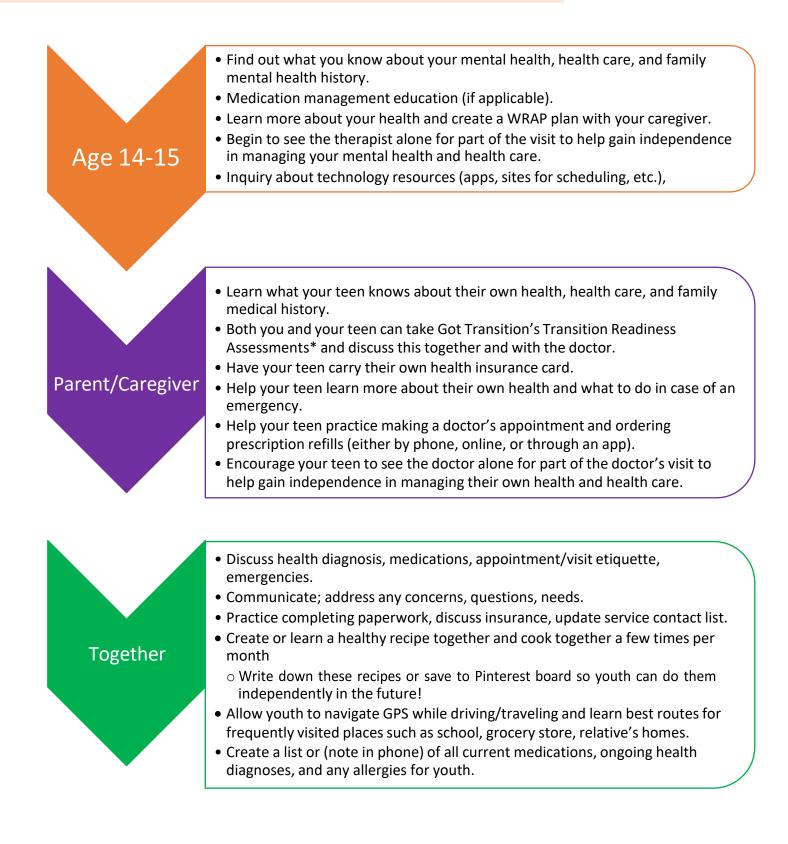
PATHS & JOURNEYS

Use the Transition Timelines as a tool to encourage setting/accomplishing goals and engaging with parent/caregivers.



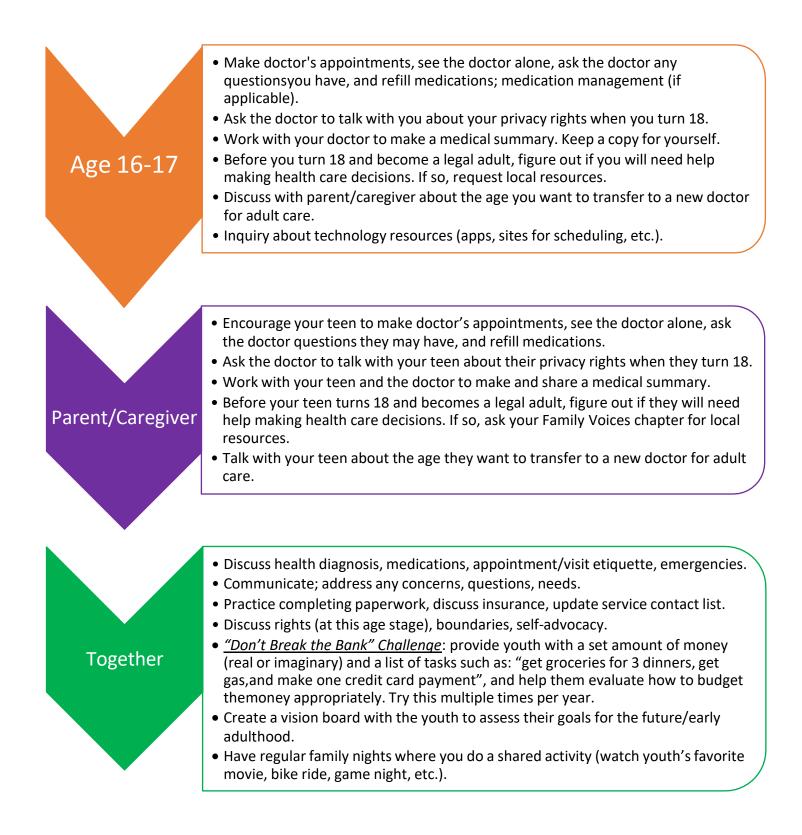


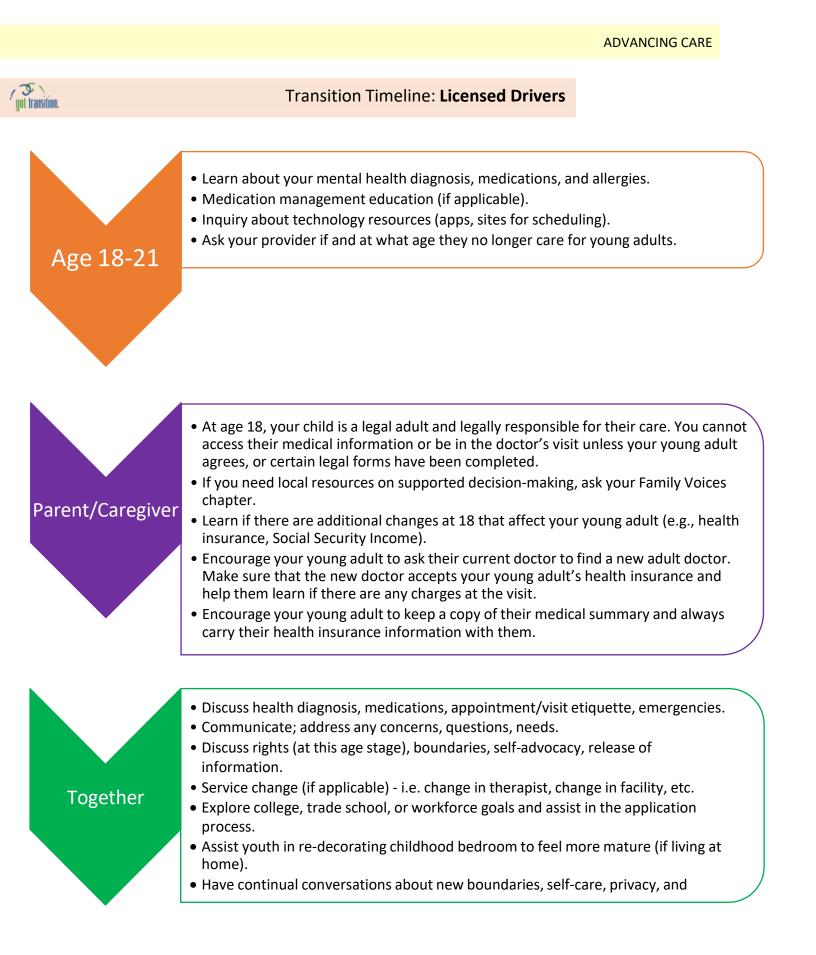
Transition Timeline: Passengers



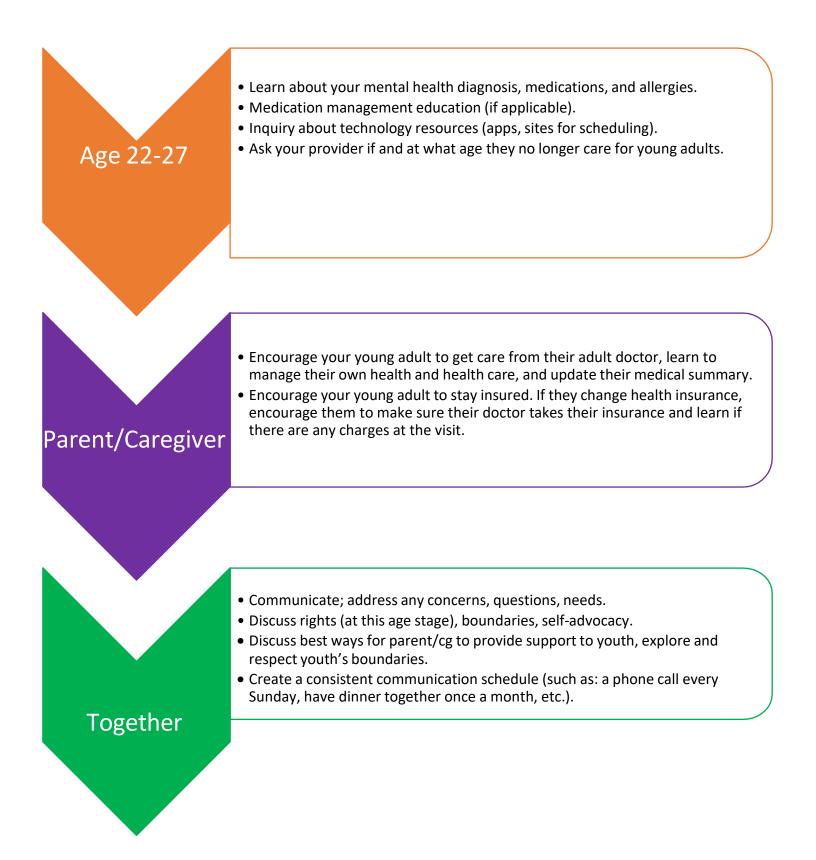


Transition Timeline: Permit Holders













ENGAGEMENT & RESOURCES

Use the Agendas as suggested guidelines/discussion points for each age level in conjunction with the appropriate age level Transition Timeline.

	ADVANCING CARE
	Agenda: Back-Seat Driver
NAME:	SOC Provider Name:
Emergency Contact: Who to call in case of emergency:	Personal: Discuss the responsibility of being a teen/young adult:
Contact Name:	Memorize Home Address(es)
Contact Number:	Memorize Family Member's Phone Number (at least one)
PHYSICAL HEALTH	MENTAL HEALTH
Name of Office:	Name of Office:
Name of Doctor:	Name of Therapist or Provider:
 TO DO: Know general health conditions or any allergies Know importance of annual visits (physician/dentist) 	<i>TO DO:</i> Know your Diagnosis: name, symptoms, age when diagnose Know your Medications: how does it help, side effects,

- Know importance of annual visits (physician/dentist)
- Learn about personal hygiene/ skincare, develop healthy habits

HEALTHY RELATIONSHIPS

Relationships

- Dating Violence
- □ Healthy relationships
- □ Communication with Peer and Family
- Online Safety
- □ Bullying Prevention/Awareness

TRANSPORTATION

Local Bus Station (Address):

How to obtain bus tokens:

Additional Services (Medicaid Cab, other public transit):

SUPPORT SYSTEM

Know what a healthy support system looks like

questions for your doctor, maintenance & self-advocacy

SUPPORT SYSTEM

Support Person 1 (can be same as emergency contact):

Support Person 2 (*highly encouraged):

□ What does a healthy support system mean to you?

RESOURCES TO KNOW

GA Crisis Hotline 1-800-7154225 **National Suicide Prevention Hotline** 1-800-273-8255 Trevor Project (LGBTQ+ Friendly Hotline) 1-866-488-7386

	ADVANCING CARE
	Agenda: Passengers
NAME:	SOC Provider Name:
Emergency Contact: Who to call in case of emergency:	Personal: Discuss the responsibility of being a teen/young adult:
Contact Name:	Memorize Home Address(es)
Contact Number:	Memorize Family Member's Phone Number (at least one)
PHYSICAL HEALTH	MENTAL HEALTH
Name of Office:	Name of Office:
Name of Doctor:	Name of Therapist or Provider:
 TO DO: Know general health conditions or any allergies Know all current Medications: 	<i>TO DO:</i> Know your Diagnosis: name, symptoms, age when diagnosed
	 Know your Medications: how does it help, side effects, questions for your doctor, maintenance & self-
 Know importance of annual visits (physician/dentist) Develop hygiene & skincare routines Begin appointment setting with assistance and 	
prompting	SEXUAL WELLNESS
HEALTHY RELATIONSHIPS	 Discuss safe sex with a trusted parent or medical professional. Know how and where to receive sexual wellness
RelationshipsDating ViolenceHealthy relationshipsCommunication with Peer and FamilyOnline Safety	 services Understand signs of trafficking and sexual manipulation Local Health Clinic:

- \circ Sexting, Grooming, Trafficking
- □ Bullying Prevention/Awareness
- Sexual Identity and Gender Expression Education
- □ Safe and Consensual Sex

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Agenda: Passengers

TRANSPORTATION

Local Bus Station (Address):

How to obtain bus tokens:

SUPPORT SYSTEM

SUPPORT SYSTEM

Support Person 1 (can be same as emergency contact):

Support Person 2 (*highly encouraged):

Additional Services (Medicaid Cab, other public transit):

□ What does a healthy support system mean to you?

RESOURCES TO KNOW

GA Crisis Hotline 1-800-7154225 National Suicide Prevention Hotline 1-800-273-8255 Trevor Project (LGBTQ+ Friendly Hotline) 1-866-488-7386

NOTES:

	ADVANCING CARE
	Agenda: Permit Holders
NAME:	SOC Provider Name:
Personal: Discuss the responsibility of being a teen/young add	ult:
Driver's License or State IDBirth Certificate	 Emergency Contacts in Cell Phone Memorize SS# or safely save in Cell Phone
PHYSICAL HEALTH	MENTAL HEALTH
Name of Office:	Name of Office:
Name of Doctor:	Name of Therapist or Provider:
 TO DO: Know general health conditions or any allergies Create list of Medications and save in cell phone or secure location Know importance of annual visits (physician/dentist) Develop hygiene & skincare routines Able to set appointments without assistance 	 TO DO: Know your Diagnosis: name, symptoms, age when diagnosed Know your Medications: how does it help, side effects, questions for your doctor, maintenance & self-advocacy Create list of all current and past psychiatric medications Know what a healthy support system looks like and advocacy
	HEALTHY RELATIONSHIPS
 SEXUAL WELLNESS Discuss safe sex with a trusted parent or medica professional. Know how and where to receive sexual wellness services Understand signs of trafficking and sexual manipulation 	 Communication with Peer and Family Online Safety
Local Health Clinic:	

Agenda: Permit Holders

TRANSPORTATION

Local Bus Station (Address):

How to obtain bus tokens:

Additional Services (Medicaid Cab, other public transit):

SUPPORT SYSTEM

SUPPORT SYSTEM

Support Person 1 (can be same as emergency contact):

Support Person 2 (*highly encouraged):

□ What does a healthy support system mean to you?

RESOURCES TO KNOW

GA Crisis Hotline 1-800-7154225 **National Suicide Prevention Hotline** 1-800-273-8255 **Trevor Project (LGBTQ+ Friendly Hotline)** 1-866-488-7386

NOTES:

Agenda: Licensed Drivers

18-21

SOC Provider Name: _____

NAME:

SOC Phone/Email:

Personal: Discuss the responsibilities of being a young adult, prepare for adulthood

- Driver's License or State ID
- Social Security Card ownership

- Insurance card
- Know providers

GENERAL

- □ Build a Resume & Cover Letter (Templates)
- Discuss Job Hunting or College Applications
- □ Explore Career Options
- □ Open bank account (saving and checking)
- Inquire about credit card
- □ Learn about credit score
- □ Take a budgeting class and/or create a budget
- □ Create Professional Email & Voicemail
- Social Media Image/Safety (what to share/how to share)

PHYSICAL HEALTH

Name of Doctor:

HOUSING

- □ Evaluate independent living vs. living with family
- □ Explore student housing options if applicable

Obtain Copy & Review Housing Guide PDF

MENTAL HEALTH

Name of Therapist or Provider:

Name of Office:

TO DO:

- Transfer to Adult Health Provider
- □ Set up Insurance and inform provider(s)
- Create a routine of annual health visits (physician/dentist/OBGYN/etc.)
- □ Independence in appointment management
- Able to maintain healthy habits (skincare, dental needs, haircuts, etc.)

Name of Office:

TO DO:

- □ Transfer to Adult Mental Health Provider(s)
- □ Finalize Release of Information
- □ Identify any changes in medication
- Independence in appointment management
- Able to advocate for needs and is comfortable with providers

Agenda: Licensed Drivers

18-21

HEALTHY RELATIONSHIPS

Relationships

- □ Healthy relationships
 - \circ Signs of Abuse
 - Abuse Prevention
- □ Communication with Peer and Family
- Online Safety
 - Sexting, Grooming, Trafficking
- □ Suicide Prevention/Awareness
 - o QPR Gate Keeper Training
- Sexual Identity, Gender Expression, Safe and Consensual Sex
- Education on Legal Repercussions of Drugs and Alcohol

SEXUAL WELLNESS

- □ Have access to sexual wellness items such as condoms, birth control, and hygiene products
- \square Know how and where to receive sexual wellnessservices
- Understand signs of trafficking and sexual manipulation

Local Health Clinic:

SUPPORT SYSTEM

Support Person 1 (can be same as emergency contact):

Support Person 2 (*highly encouraged):

- What does a healthy support system mean to you?
- □ How and when will you use your support system?
- □ Complete QPR Gatekeeper Suicide Prevention course.

RESOURCES TO KNOW

GA Crisis Hotline 1-800-7154225 National Suicide Prevention Hotline 1-800-273-8255 Trevor Project (LGBTQ+ Friendly Hotline) 1-866-488-7386

Agenda: Seasoned Drivers

SOC Provider Name:

NAME:_____

SOC Phone/Email:

Personal: Discuss the responsibilities of being a young adult, prepare for adulthood

- Driver's License or State ID
- Social Security Card ownership

- Insurance card
- Know providers

GENERAL

- □ Maintain a working resume & cover letter (Templates)
- □ Have a bank account (saving and checking)
- □ Independently can manage money.
- □ Have Professional Email & Voicemail
- Know Social Media Safety & Professionalism
- Practiced interview skills

6-Month Goal(s):_____

1 Year Goal(s):_____

5 Year Goal(s):_____

PHYSICAL HEALTH

Name of Doctor:

Name of Office:

TO DO:

- □ Consistent visits with Adult Health Provider
- □ Reliable Insurance and inform provider(s)
- Create a routine of annual health visits (physician/dentist/OBGYN/etc.)
- □ Independence in appointment management
- Able to maintain healthy habits (skincare, dental needs, haircuts, etc.)

MENTAL HEALTH

Name of Therapist or Provider:

Name of Office:

TO DO:

- Consistent visits with Adult Mental Health Provider(s)
- □ Independent medication management
- □ Independence in appointment management
- Able to advocate for needs and is comfortable with providers

Agenda: Seasoned Drivers

HEALTHY RELATIONSHIPS

Relationships

- □ Healthy relationships
 - Signs of Abuse
 - Abuse Prevention
- □ Communication with Peer and Family
- Online Safety
 - Sexting, Grooming, Trafficking, Social Media Image and Professionalism
- □ Suicide Prevention/Awareness
 - QPR Gate Keeper Training
- Sexual Identity, Gender Expression, Safe and Consensual Sex
- Education on Legal Repercussions of Drugs and Alcohol

SEXUAL WELLNESS

- □ Have access to sexual wellness items such as condoms, birth control, and hygiene products
- Know how and where to receive sexual wellness services
- □ Understand signs of trafficking and sexual manipulation

Local Health Clinic:

SUPPORT SYSTEM

Support Person 1 (can be same as emergency contact):

Support Person 2 (*highly encouraged):

- What does a healthy support system mean to you?
- How and when will you use your support system?
- Complete QPR Gatekeeper Suicide Prevention course.

HOUSING

- Evaluate independent living vs living with family
- □ Explore student housing options if applicable

Obtain Copy & Review Housing Guide PDF

RESOURCES TO KNOW

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What it Means for Your Health

Turning 18 may not make you feel any different, but legally, this means you are an adult.

What does this mean?

- After you turn 18, your provider talks to **you**, not your parents/guardians, about your mental health.
- Your mental health information and medical records are private (or confidential) and can't be shared unless you give the OK.
- It is up to you to make decisions for your own mental health care, although you can always ask others for help.

Things to know

- The confidentiality between you and your doctor is legally known as the Health Insurance Portability and Accessibility Act, or HIPAA.
- This law gives privacy rights to minors (people who are under age 18) for reproductive and sexual health, mental health, and substance abuse services. Check your state's minor consent laws for more information.

What needs to be done?

- If you want to share medical information with others, your provider will ask you to fill out a form that allows them to see your medical record and be with you during your visit.
- If you need help making decisions, talk to your family, your support team, and your provider about who needs to be involved and what you need to do to make sure they can be a part of the conversations.
- If you receive SSI, your eligibility will be reviewed when you turn 18 based on disability rules for adults. The Social Security Department will contact you requesting more information.

Additional resources

If you want extra support managing your health or making decisions, the National Resource Center for Supported Decision-Making has information to connect you with resources in your state.

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Housing Guide for Young Adults



Housing Guide for Young Adults

This tool is a great way to prepare you for all the responsibilities that come with living on your own. Please complete this alongside your parent, guardian, Care Manager, or therapy provider. This is a great opportunity to ask questions about renting or ownership that you may not have thought about before.

Once completed, this guide can help you start taking steps toward your future independence.

Housing Guide

Regional Housing Authorities

Atlanta Housing Authority http://www.atlantahousing.org/ Housing Authority of Fulton County https://www.hafc.org/ The Dekalb Housing Authority http://www.dekalbhousing.org Housing Authority of the City of Decatur http://www.decaturhousing.org Housing Authority City of Americus http://www.americuspha.org/ Athens Housing Authority http://www.athenshousing.org Augusta Housing Authority http://www.augustapha.org/ Calhoun Housing Authority http://www.calhounhousingauthority.org/ Housing Authority of Savannah http://www.savannahpha.com/ College Park Housing Authority http://www.collegeparkhousingchoice.org/ East Point Housing Authority https://www.eastpointha.org/ Jonesboro Housing Authority http://jonesborohousing.com/ Marietta Housing Authority https://www.mariettahousingauthority.org/ Fairburn Housing Authority http://www.fairburnha.org/ McDonough Housing Authority https://mcdonoughha.org/ Senoia Housing Authority http://www.officialhousingauthority.com/georgia/senoia-housing-authority/ Gainesville Housing Authority https://www.gainesvillehousing.org/ Housing Authority for the City of Norcross https://www.norcrossga.net/113/Housing-Authority Housing Authority of Newnan https://www.housingauthorityofnewnan.org/ Douglas County Housing Authority https://www.celebratedouglascounty.com/

> Become familiar with your local or regional Housing Authority. This is the best way to gain insight of available resources in the various Georgia regions.

Housing Guide: Housing Assistance

Housing Opportunities

The Georgia Department of Community Affairs (DCA) <u>https://www.dca.ga.gov/safe-affordable-housing</u> is the main government agency that addresses housing issues through temporary and permanent housing programs and funds. State budget changes may impact availability of these services.

Haven: Supportive Housing

HomeFlex

Housing Choice Voucher Program

Homeownership Down Payment Assistance Program

Shelter Plus Care

HOPWA (Housing Opportunities for People with AIDS)

VASH (Veterans Administration Supportive Housing)

Rapid Re-Housing



ADVANCING CARE

Housing Guide: Transitional Living Programs

The Center for Children and Young Adults https://ccyakids.org/our-programs/

Georgia Center for Youth Excellence (GACYE) https://gacye.org/gacye-programs

Kija Homeless to Home Transitional Housing Inc. http://kijahomelesstohome.org/

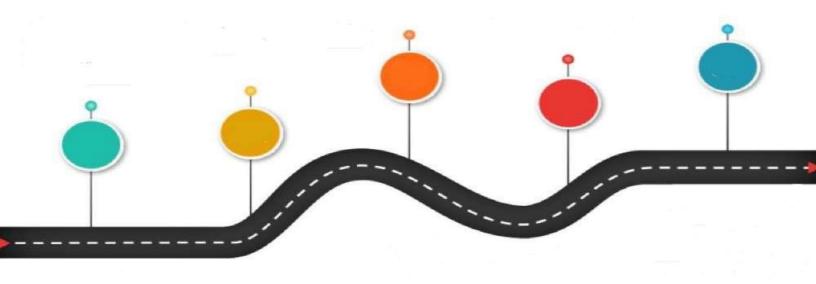
> GA Alliance to End Homelessness Inc. https://www.gahomeless.org/



Open Arms Inc. https://openarmsinc.org/programs/

Youth Villages https://www.youthvillages.org/

Rainbow Village https://rainbowvillage.org/



HealthCare Services Transfer Checklist



TRANSITIONING

Use the Touch Point Charts as a guide or tool to support & encourage clients/families with various self-care domains.

Advancing to Adult Services: Same Agency/New Provider

Dear	(client),
As a valued patient, we would like to take the c	opportunity to thank you for your continued trust and confidence in
allowing	(agency name) to be your mental health service provider.
As you transition to another mental health prov	ider, we are committed to ensuring that the process is successful.
Below are tasks and reminders to assist you wit	h your new journey. The tasks below can be completed 30 days prior
to you ending your mental health services with_	

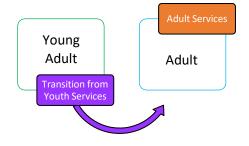
Transition Tasks:

- Identify a new provider(s)
- Ask Provider questions (optional) <u>https://www.mhanational.org/questio</u> <u>ns-ask-provider</u>
- Identity items needed for the intake for the new provider: income verification, SSN, birth certificate, copy of your insurance card and/or proof of residency.
- Determine if the new provider accept your insurance.
- Identify your co-pay amount and/or fees for services.
- Establish an appointment with the new provider (this will ensure there is no lapse in service)
- Discuss with your previous provider your transition to a new provider: records, authorizations, medications etc.
- Obtain a copy of your mental diagnosis and medications with dosage amount from previous provider.

Know Your Rights and Responsibilities:

(Name of Organization)

- You have the right to select a different therapist, psychiatrist, care manager, or other service provider.
- You have the right to decline any services or treatment unless determined to be of risk to your safety or the safety of others by a doctor.
- You can check yourself in for appointments on your own.
- You can designate who attends your appointments with you and who receives information about your health care.
- You are financially responsible for any treatments or co-pay not covered by your insurance.



Turning 18 can be very exciting, but also daunting. We are here to help! If you need assistance navigating the additional responsibilities, please discuss this with any of your mental health care providers.

Advancing to Adult Services: Same Agency/Same Provider

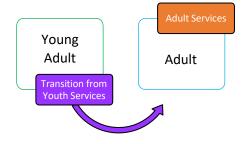
Dear	(client),
As a valued patient, we would like to take the	opportunity to thank you for your continued trust and confidence in
allowing	(agency name) to be your mental health service
provider. As you continue treatment with	(name of provider),
we are committed to ensuring that you unders	stand your rights and responsivities as you enter into adult services.
Below are tasks and reminders to assist you w	ith your new journey.

Transition Tasks:

- Inform current provider of any new adult health agencies or providers you may be working with.
- Ask Provider questions (optional) <u>https://www.mhanational.org/questio</u> <u>ns-ask-provider</u>
- Identity items needing updated in your current file (ROI paperwork, identification documents, address, source of income, etc.).
- Inform provider of new insurance (if applicable).
- Identify your co-pay amount and/or fees for services.
- Inform provider if you will have any change in your current availability (this will ensure there is no lapse in service).
- Obtain a copy of your diagnosis, treatment plans, and medications with dosage information.
- If taking medication, ensure there will be no lapse in prescription refills.

Know Your Rights and Responsibilities:

- You have the right to select a different therapist, psychiatrist, care manager, or other service provider.
- You have the right to decline any services or treatment unless determined to be of risk to your safety or the safety of others by a doctor.
- You can check yourself in for appointments on your own.
- You can designate who attends your appointments with you and who receives information about your health care.
- You are financially responsible for any treatments or co-pay not covered by your insurance.



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Advancing to Adult Services: New Agency/New Provider (Within Community)

Dear	(client),

We would like to take the opportunity to thank you for your trust and confidence in allowing

(agency name) to be your mental health service

provider. As you move forward with receiving treatment at a new agency, we are committed to ensuring that you

understand your rights and responsivities as you enter adult services. Below are tasks and reminders to assist you

with your new journey.

Transition Tasks (Current Agency):

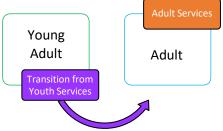
- Obtain current copies of your diagnosis, treatment plans, and medications with dosage information.
- Close your file(s) with current agency, inform them of new provider contact information, update any personal information they may still need such as new address and contact information.
- Identify any outstanding fees for services.
- If taking medication, ensure there will be no lapse in prescription refills.

Transition Tasks (New Agency):

- Ensure new agency receives all relevant documentation and past treatment information from previous provider/agency.
- Ask Provider questions (optional)
 <u>https://www.mhanational.org/questions-ask-provider</u>
- Provide proof of insurance (if applicable).
- Identify your co-pay amount and/or fees for services.
- Complete ROI paperwork and identify who can have access to your new information.
- If taking medications, determine where that prescription will be filled and what their prescription process looks like.

Know Your Rights and Responsibilities:

- You have the right to select your therapist, psychiatrist, care manager, or other service provider.
- You have the right to decline any services or treatment unless determined to be of risk to your safety or the safety of others by a doctor.
- You can check yourself in for appointments on your own.
- You can designate who attends your appointments with you and who receives information about your health care.



• You are financially responsible for any treatments or co-pay not covered by your insurance.

Turning 18 can be very exciting, but also daunting. We are here to help! If you need assistance navigating the additional responsibilities, please discuss this with any of your mental health care providers.

NOTE: See Transition of Care Checklist for additional help an information on switching providers

Advancing to Adult Services: New Agency/New Provider (External Transfer)

We would like to take the opportunity to thank you for your trust and confidence in allowing

_(agency name) to be your mental health service

provider. As you move forward with receiving treatment at a new agency, we are committed to ensuring that you

understand your rights and responsivities as you enter adult services. Below are tasks and reminders to assist you with your new journey.

Transition Tasks (Current Agency):

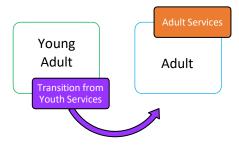
- Obtain current copies of your diagnosis, treatment plans, and medications with dosage information.
- Close your file(s) with current agency, inform them of new provider contact information, update any personal information they may still need such as new address and contact information.
- Identify any outstanding fees for services.
- If taking medication, ensure there will be no lapse in prescription refills.

Transition Tasks (New Agency):

- Ensure new agency receives all relevant documentation and past treatment information from previous provider/agency.
- Ask Provider questions (optional) <u>https://www.mhanational.org/questions-ask-provider</u>
- Provide proof of insurance (if applicable).
- Identify your co-pay amount and/or fees for services.
- Complete ROI paperwork and identify who can have access to your new information.
- If taking medications, determine where that prescription will be filled and what their prescription process looks like.

Know Your Rights and Responsibilities:

- You have the right to select your therapist, psychiatrist, care manager, or other service provider.
- You have the right to decline any services or treatment unless determined to be of risk to your safety or the safety of others by a doctor.
- You can check yourself in for appointments on your own.
- You can designate who attends your appointments with you and who receives information about your health care.
- You are financially responsible for any treatments or co-pay not covered by your insurance.



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