



Foundation for Positively Kids, Incorporated WELCOME LETTER

Dear Positively Kids' Patient/Family:

Thank you for choosing the Foundation for Positively Kids to provide healthcare services for your child and family. We are very excited that you are taking the steps to become part of the Positively Kids family. Our mission is "to deliver high quality health care services for children of Southern Nevada, with an emphasis on providing quality of life for medically fragile and/or developmentally delayed children, age birth to 18, and their families."

Our programs are staffed with licensed physicians, dentists, registered nurses, nurse practitioners, service coordinators, developmental specialist, therapists, and other qualified health and mental health care professionals. Our physicians are Board Certified in pediatrics and have been providing pediatric health care in Clark County for many years. Our staff includes bi-lingual healthcare professionals and information is provided in both English and Spanish. Other translation services are also available. When deemed appropriate a patient's care is assigned a health coach who works with families to meet the health care needs of their children.

Positively Kids' Health Clinics are organized to serve as a **Patient Centered Medical Home**. A Patient Centered Medical Home is how comprehensive, primary health care is delivered to your child. Whatever the medical needs – primary or secondary, preventive care, acute care, chronic care, or end-of-life – your child has a medical "home"; a single, trusted doctor and care team, through which quality healthcare is provided. PK puts you, the patient/family at the center of the health care system. At PK we offer care that is Accessible, Continuous, Comprehensive, Family-Centered, Coordinated and Compassionate.

Our agency also has relationships with a number of physicians and physician groups who provide specialty care. Referrals are made to these physicians when Positively Kids' patients need access to a specialist.

Our programs accept a variety of health insurances, as well as Medicaid and/or Nevada Check Up. Many children seen at our programs are eligible for Medicaid or Nevada Check Up as a method to cover the cost of healthcare services. However, some families have not been able to secure Medicaid funds and/or do not know how to apply. A referral will be made by our staff to one of our Outreach and Enrollment Specialists who will assist in preparing the necessary application for Medicaid or Nevada Check Up services.

For families who do not qualify for medical insurance, our clinics offer a sliding fee scale based on the national poverty rates. Early Intervention services are state funded and offered at no cost to families with eligible children birth to three years of age.

The Positively Kids' FACT Sheet will provide information to help you access the full range of services available at Positively Kids. Also, we ask that you take a moment to complete a Patient Satisfaction Survey, when requested, so that we may continually improve our services. Please know that we are here to provide the best care for children seen in our programs, and we look forward to a long and rewarding relationship to better the health of our children and their families.

Sincerely,
Fred Schultz
Fred Schultz, C.E.O.



PATIENT RIGHTS

Receive healthcare services without discrimination as to race, color, creed, sex, disability, national origin, or age (0-18 years)

- Be informed in writing of their rights and responsibilities before treatment begins ● Respect and dignity; to have his/her property treated with respect ● Be fully informed in advance about the care and treatment to be furnished including the disciplines that will furnish the care and the proposed frequency of visits ● Reasonable, advance notice of any changes in the care of treatment to be furnished and any changes in services or charges ● Participate in planning care and treatment or changes in care and treatment ● Refuse services to the extent permitted by law and to be informed of the possible consequences of this action ● Be informed of the extent to which payment may be expected from Medicaid or any other payer known by the agency ● Be informed of the charges that will not be covered by Medicaid or any other providers ● Be informed of the charges for which the client may be liable ● Formulated Advance Directives if applicable ● Have the agency comply with the Advance Directives in accordance with state law requirements or be informed that the agency cannot implement an Advance Directive on the basis of conscience ● Choose providers and communicate with those providers ● Be admitted for the service only if the agency has the ability to provide safe, professional care at the level of the intensity needed. Clients have the right to reasonable continuity of care and if denied service for any reason; the right to be referred elsewhere ● Review all health records pertaining to them unless it is medically contraindicated in the clinical record by the physician ● Be informed of the procedure to follow to lodge complaints with the agency about the care that is, or fails to be furnished and regarding the lack of respect for property ● Know the disposition of such complaints ● Voice grievances or request a change of caregiver without fear or reprisal or discrimination ● Be free from physical or verbal abuse ● Confidentiality of all records, communications, personal information and protection from disclosure of medical and financial information (see HIPAA information below) ● Be advised of the agency's drug-free workplace policy ● Be advised in writing of the state's phone number for complaints or questions ● Be informed of patient rights regarding the collection and reporting of OASIS information (not pertinent for all patients, see CMS website for further information) and that it will only be disclosed for legitimate purposes allowed by the Privacy Act ● Report concerns with insurance fraud (see www.nvaging.net/ for Medicaid or your personal carrier for further instructions).

PATIENT RESPONSIBILITIES

Participate in development and review of the plan of care or services ● Provide a complete and accurate medical history ● Provide full and honest information about financial and environmental matters that affect the client and reveal changes as they occur during the time care is being provided ● Reveal changes in status or ability to follow instructions ● Assist in providing and maintaining a clean and safe home environment ● Be present at the home/clinic location at the agreed upon time and notify agency for any change or cancellation ● Inform the agency of the existence of or any changes in an Advance Directive.

PATIENT PRIVACY

The Foundation for Positively Kids strives to keep all our patients' medical information secure and confidential. The Health Insurance Portability and Accountability Act (HIPAA) has created standards to protect patients' privacy. Important aspects of HIPPA and your rights are listed below. If you have any questions or concerns, a more detailed listing is posted in the clinic or you may contact our administrative office at the number below for more information.

Examples of Protected Health Information:

Name, address, birth date, email address, medical records, prescriptions, lab work, test results, billing records, referrals and claim information.

Examples of times we may share this information without your written consent:

Reporting certain communicable diseases to state agencies, sharing with legal authorities (i.e. court order, subpoena, concerns of abuse), reporting to coroners and/or funeral directors (note that we will do our best to share only the most pertinent information to these covered entities).

As a patient or legal guardian, you have the following rights under HIPPA:

The Right to receive this written notification of standards ● The Right to access the medical record (see administration for information on requesting copies) ● The Right to request an amendment ● The Right to an accounting of disclosures ● The Right to request restrictions on releasing your medical information ● The Right to complain if you feel that your or someone else's rights have been violated ● The Right to receive notice if there has been a breach in security.

You also can learn more about your rights, including how to file a complaint from the Web site at www.hhs.gov/ocr/hipaa/ or by calling 1-866-627-7748.



WELCOME FACT SHEET

POSITIVELY KIDS' HEALTH CARE SERVICES AND PROGRAMS

- **Well-Child Check-Ups** – The Healthcare Clinics employs Board Certified Pediatricians and Nurse Practitioners and bilingual health care professionals to provide examinations which include routine medical check-ups, immunizations, early and periodic screening diagnosis and treatment (EPSDT) /for new patients, sick visits, school physical examinations, sports/camp physicals, and other routine care/treatment. Positively Kids is part of Nevada's VFC program. We can only provide immunizations to children who receive Medicaid, NV Check Up, or are on the sliding fee scale. Positively Kids does not provide immunizations for children with private insurance.
Location: 701 N. Pecos Road, Building M (Clinic entrance is located off Bonanza Road), Las Vegas, Nevada 89101
And: 2480 E Tompkins Ave, Suite 101, Las Vegas, Nevada 89121
- **Sick Care** – Children who are ill can be seen the same day at the Healthcare Clinics listed above. We have an on-site medical laboratory to assist in diagnosing and treating childhood illnesses.
- **Care Coordination** – Care Coordinators work with families to monitor orders and referrals placed in the Healthcare Clinics to ensure complete follow through.
- **Early Intervention** – Early Intervention is a home-based intervention program for children birth to three years of age who have a developmental delay or a disability. If your child qualifies for services, we send a highly skilled team of therapists into the home to teach strategies and empower you to be an advocate for your child. The services are provided at no cost. Contact Positively Kids at (702) 262-0037 for more information.
- **Medical Wraparound and Respite Care for Children** – Children referred by the Department of Family Services receive RN case management for caregivers (families, friends or foster parents) of medically dependent/fragile children ages 0-18 with training and support.
- **Intermittent Skilled Nursing Care in the Home** – Provides RN/LPN visits in the home as determined by a qualified medical provider's order and insurance approval.
- **Dental Care** – Children who need dental care may be referred to our Board Certified dentist, Dr. Steven DeLisle. He provides regular dental check-ups such as: fillings, extractions, and x-rays. His office has experience in accommodating special needs patients, who require sedation during dental procedures. Dental appointments are available two to three days a week at each healthcare clinic locations.
- **Behavioral Health** – We provide all general pediatric care for behavioral health problems. We have resources to address substance abuse, mental health problems, disciplinary problems, attention deficit hyperactivity disorder (ADHD), and other behavioral issues. Perceptions, a behavioral health organization specializing in youth and adolescents, provide behavioral health care through single and group counseling sessions.
- **Pharmaceutical Dispensary** (*Pecos location only*) – Children with Nevada Fee-for-Service Medicaid or no insurance who are examined and receive prescriptions from one of the authorized providers at this location, may have their prescriptions dispensed immediately before they leave the clinic.

MAKING APPOINTMENTS:

To make an appointment at Positively Kids Clinics call the main number 702 262-0037. **Please note:** Patients that arrive more than 15 minutes late for a Healthcare Campus appointment may be rescheduled. We encourage foster parents to call and cancel any future appointments if a child has moved from your household. Please inquire when scheduling your initial appointment as to what documents are required. **Please note 3 missed may result in discharge from the program.**

HOURS OF OPERATION/AFTER HOURS, WEEKENDS, AND HOLIDAYS:

The Healthcare Clinics operate during normal business hours Monday through Friday (9:00a.m.-4:30p.m.) and at our Pecos location Saturdays (8:30a.m-3:00p.m.). For non-emergency assistance, Positively Kids' staff is available on a 24 hour/7 days a week basis by calling the main office number **(702) 262-0037**. Your call will be forwarded to our Nurse Advice Line that will assess your needs and respond to your questions. **If your child is experiencing a medical emergency, dial 911.**



COMPLAINTS/CONCERN

Foundation for Positively Kids thrive on providing the best of care and welcomes and encourages any concerns or complaints by clients and /or families as a means of improving the quality of service we offer. A complaint will never result in retaliation against a client or family. If you feel you have a concern that needs addressed (your identity may be protected if requested), please contact the office of administration at 702-262-0037 ext 3 for the Home Health Department and Chief Nursing Officer, or 702-262-0037 ext. 11 for CEO, Fred Schultz.

If you believe that your concern was not resolved appropriately, you may call the State Department of Human Resources Health Division (Bureau of Licensure and Certification) hotline at 1-800-225-3414.

REPORT OF ABUSE, NEGLECT, OR EXPLOITATION

As medical providers, each employee of the Agency is a mandated reporter (NRS 432B). They shall be responsible for reporting any evidence of abuse, neglect, or exploitation of any client served by the Agency immediately to the State Abuse Hotline who will take necessary measures to assure the immediate safety and well-being of the affected person.

EMERGENCY DISASTER INFORMATION

See <http://www.redcross.org/> and/or <http://www.ready.gov/> for information on disaster preparedness.

ADVANCE DIRECTIVES

Advance directives are legal documents that allow you to plan and make your own end-of-life wishes known in the event that you are unable to communicate. Advance directive consist of (1) a living will and (2) a medical (healthcare) power of attorney. This document can allow you to appoint a person to make decisions about your medical care if for some reason you are unable to make decisions for yourself. It may also outline what life-sustaining treatments you agree or disagree to; such as, Cardiopulmonary Resuscitation (CPR), Do Not Resuscitate (DNR), Do Not Intubate (DNI), artificial nutrition/hydration, and/or organ donation.

There are various ways to complete an advance directive, and they vary by state. There are several local agencies and lawyers that can assist you with completing these documents. You may also refer to the Nevada Department of Health and Human Services and Nevada Revised Statute (NRS) 449.535 to 449.690 for additional information.

<http://dhcfp.nv.gov/Resources/PI/AdvanceDirectives/>



PAYMENTS

MEDICAID / NEVADA CHECK UP

If your child is enrolled in the foster care system, he/she is likely to be receiving, or be eligible to receive, Medicaid or Nevada Check Up which are state supported public health insurance programs. If you do not know if your child is eligible, or you do not know how to obtain eligibility, our staff will be glad to assist you.

PRIVATE INSURANCE

If you have private insurance that you pay for, or that you receive through your employer, please give that information to the Scheduler over the phone and again at Check-In/First-Visit.

NO INSURANCE/SLIDING FEE SCALE

All services are provided on a sliding fee scale if you have no insurance. Proof of income is requested and a short application process is completed. Payment and/or co-pays for services are due at the time services are provided, unless prior arrangements have been made.

VISIT COSTS

Home Nursing visit \$160.00/visit Any Therapy visit \$180.00/visit

Healthcare Clinic visit \$80.00/visit (Includes immunizations & any lab testing that is routinely performed in the clinic)

UNPAID BALANCES

Patients who have a balance that insurance will not cover (including any co-pays or deductibles), the balance will be the sole responsibility of the caregiver.

When an uncovered balance is forwarded to the family for compensation, Positively Kids will provide the family with a 30 day notice to address future services. The family may follow up with insurance for additional coverage, pay out of pocket for services, sign a new case agreement for care, or seek alternative services. If the family chooses to seek other services, Positively Kids will provide alternatives available for them.

Payment Agreement

PLEASE CHECK ONE OF THE FOLLOWING:

- | | |
|---|---|
| <input type="checkbox"/> Single Case Home Health Agreement | <input type="checkbox"/> Grant Funded Treatment Agreement |
| <input type="checkbox"/> State Funded Early Intervention Program | <input type="checkbox"/> Medicaid, Nevada Check Up, or Private Insurance |
| <input type="checkbox"/> Sliding Scale Fee Balance: \$ _____ | /visit (including any missed visits without prior notification) |

Fully accept the responsibility of the cost of the services provided by the FOUNDATION FOR POSITIVELY KIDS, INC., and hereby agree to this responsibility as described above. I further understand that this cost will not be a deciding factor to schedule a medical appointment and that payment will be arranged in a manner comparable to my income.

I have been given the Positively Kids Welcome Packet that includes **Patient Rights and Responsibilities, Patient Privacy (HIPAA), and Advance Directives** information. I agree and these terms and consent for this organization to provide treatment and care.

Name of Patient

Date of Birth

Name of Responsible Party

Relationship

Signature

Date