

COMPLEMENTARY AND ALTERNATIVE HEALTH CARE CLIENT BILL OF RIGHTS

Practitioner Name: Jody B. Nyquist, NHD, ND, DD
Complementary and Alternative Health Care Title: Traditional Naturopath
Business Name: Heartland Healing Alternatives, Ltd.
Business Address: 1125 S. Frontage Rd. Ste. 6
Hastings, Minnesota 55033
Telephone Number: 651-480-8293
E-mail Address: info@heartland-healing.com
Website: www.heartland-healing.com

Degrees: Doctor of Divinity, Progressive Universal Life Church, October, 2008
Doctor of Naturopathy, Clayton College of Natural Health, May, 2003
Doctor of Natural Health, Clayton College of Natural Health, August 2001
Bachelor of Arts, Human Resource Management, Metropolitan State University, 1986
Associate of Arts, North Hennepin Community College, 1974

Training: Neurotransmitters & The Brain, Dr. Datis Kharrazian, 03/11
Detoxification & Food Sensitivity, Dr. Bruce Shelton, 02/11
CFS. Fibromyalgia & other Chronic Inflammatory Diseases, Dr. Bruce Shelton, 02/11
ZYTO Bio-communication Screening, Trayce Waterlyn, 11/10
Linking body signs with urine & saliva analysis and blood chemistry. Dr. Stephen Stiteler 11/09
Advanced Level M & N NAET Certification, 11/08, Dr. Devi Nambudripad
Body Characteristics Interpretation, Dr. Stephen Stiteler, 11/08
NAET Annual Symposium, 07/06, 08/08, 08/09, and 10/10
Advanced Level O NAET Certification 11/07, Dr. Devi
Advanced Level K & L NAET Certification 7/07, Dr. Devi
Advanced Level 2G NAET Certification 5/07, Dr. Devi
3D Energetics™, Dr. Wm. Kneebone, 9/06
Advanced Bio-Photon Analyzer, 9/06
Advanced Level 2 E & F NAET Certification 02/06, Dr. Devi
Advanced Level 2 I & J NAET Certification 12/05, Dr. Devi
Advanced Level 2 C & D NAET Certification 06/05, Dr. Devi
Advanced Level 2 A & B NAET Certification 05/05, Dr. Devi
Advanced NAET level 1 Certification – 12/04 – Dr. Devi
Basic NAET Cert. 11/04– Dr. Devi S. Nambudripad MD, DC, LAc, PhD.
Functional Endocrinology, 07/04, Apex Energetics, Dr. Datis Kharrazian
MetaMarx™ Metabolic Marker Testing, 05/04 – Stephen Stiteler
Level I Reiki, Robert Decker, LaC, RM, QGM, 02/04
Allergies Level IV– Institute of Quantum and Molecular Medicine, 10/02
Level II Certified in Bio-Energetic Screening, Institute of Quantum and Molecular
Medicine and Computronix Medical Electro Systems, 02/02.
Naturopathic internship with Susan Syfko, N.D., Healing Arts Wellcare Center,
Hudson, WI, 2001
Biological Energetic Testing - Computronix Medical Electro Systems, 07/01
Bio-Terrain Testing (urinalysis and saliva analysis) – 04/01- Apex Energetics, Stephen
Stiteler. LAc, OMD, NMD, D.Hom,

Other Board Certified by American Alternative Medical Association. 05/03
Qualifications: Over 20 years training and consulting experience with a major controls company, 1980
– 2001 in addition to considerable life experience.

In accordance with Minnesota State law, I am providing you with the following notice:

THE STATE OF MINNESOTA HAS NOT ADOPTED ANY EDUCATIONAL TRAINING STANDARDS FOR UNLICENSED COMPLEMENTARY AND ALTERNATIVE HEALTH CARE PRACTITIONERS. THIS STATEMENT OF CREDENTIALS IS FOR INFORMATION PURPOSES ONLY.

Under Minnesota law, an unlicensed complementary and alternative health care practitioner may not provide a medical diagnosis or recommend discontinuance of medically prescribed treatments. If a client desires a diagnosis from a licensed physician, chiropractor, or acupuncturist, or services from a physician, chiropractor, nurse, osteopath, physical therapist, dietitian, nutritionist,

athletic trainer, or any other type of health care provider, the client may seek such services at any time. If you have concerns about Heartland Healing Alternatives, you must first discuss your complaint with the practitioner. If you do not receive satisfactory results, you may file a complaint with the Office of Complementary and Alternative Health Care Practice (OCAP), Health Occupations Program
MN Dept. of Health, PO Box 64975, 121 East 7th Place, Suite 400, Metro Square Building St. Paul, MN 55164-0975
Telephone: 651-282-6319 or 1-800-657-3957

Fees for unit(s) of service:

SERVICES PRICE LIST – EFFECTIVE JANUARY 1, 2011

NAET is an innovative treatment for allergies that is completely natural, painless and non-invasive. This method can be used safely on anyone, even newborn infants, the elderly, people in a coma, and pets. NAET can also be used to treat healthy individuals with hidden allergies that could cause illness in the future.

Initial NAET Evaluation and Treatment (includes Zyto™ screening)	\$ 250.00
Return NAET Treatments	\$ 80.00
NAET Treatment Clearance/Assessment Check only/Phone Check	\$ 30.00

Zyto™ Bio-communication screening is a bio-feedback assessment process that conducts an interview with the body through galvanic skin response testing (GSR). It essentially conducts an interview with the body and shows what factors are creating stress in the body's system and which items will most likely help return to body to balance. It is accurate, natural, painless, and non-invasive. It can be used safely on anyone. I use this as needed to establish a baseline and check results. Clients may request a screening. Pricing is based on naturopathic consulting charges.

BRAIN HEALTH AND METOBOLIC ASSESSMENT

This assessment provides an overall picture of the potential for brain degeneration. Effective brain function is required to lead a healthy and high quality of life. This assessment indicates patterns of stress, sugar imbalances, digestive function, endocrine (hormone) function, and key neurotransmitter (signals the brain uses) activity. All of these functions are directly correlated to good brain health. This assessment is included periodically during the NAET protocol. If you would like to do just the assessment, pricing is according to Naturopathic Consulting .

NATUROPATHIC CONSULTING is by the quarter hour - **\$ 40.00**

- The consulting fee will be applied for extended phone calls or e-mails requiring the practitioner to study information and relay recommendations.
- There is no charge for established clients for brief phone consultations for clarifying instructions or for refilling remedies or supplements.

All products and services are available at an additional cost.

Urine test to determine free radical activity in the body
OXIDATA™ **\$ 20.00**

The cost for and nutritional supplementation is not included in the above pricing.

Method of Payment: **Payment is due upon receipt of services.** Visa, MasterCard, Discover, cash or checks are accepted. A \$40 fee is charged for returned checks. Payment plans are **NOT** available.

Fees are payable at the time of service. I do not process or handle insurance claims, however, a receipt will be provided to you, should you wish to file a claim with your provider. I am NOT able to accept Medicare, Medical Assistance, MN Care, or General Assistance medical care.

You have the right to reasonable notice of changes in services or charges. I will provide prior notice of any changes via my website or sign in the office.

I DO NOT ACCEPT RETURNS ON PRODUCT PURCHASES

Cancellation Policy: As a courtesy to all clients seeking appointments, 48 hour notice is required for cancellation of appointments. If cancellation is not received 48 hours prior to your scheduled appointment, you will be billed for the service scheduled. Future appointments may require pre-payment for services expected. Chronic cancellations may risk denial of future services

Summary of my theoretical approach:

My business mission statement is “Educating clients for choosing a healthy life style”. I work with clients who are interested in living a healthful lifestyle. I believe in the connection and alignment of mind, body and spirit for good living. I interview my clients to discover the underlying causes of illness and work to eliminate those causes, not just the symptoms. The recommendations provide instructions that teach the client how to heal their body, mind and spirit through life-style, environment, and dietary changes in addition to using one or more of a variety of natural health care methods. By employing these recommendations, their health can be restored. It is the client’s job to use their experiences, information and choose improvement. Clients must be fully engaged in their healing process to experience positive results. I am not responsible for choices clients make.

I use NST (Neuro-Muscular Sensitivity Testing), a form of kinesiology, or Zyto™ Bio-communication assessment, in addition to urinalysis and/or saliva analysis to provide an objective review of an individual’s status in several key areas. With this information, NAET (Nambudripad’s Allergy Elimination Technique), nutritional supplements, homeopathic and flower essence remedies and magnetic clay baths can be objectively targeted for faster and more effective results, saving both time and expense. My approach is to detoxify, identify and eliminate allergies and sensitivities, and help you restore balance to your body. These unique approaches are being used successfully by medical doctors, acupuncturists, chiropractors and many other primary healthcare providers who realize the benefits of a holistic approach of balancing the client’s mind, body and spirit.

Assessment and Recommendations: You have the right to complete and current information concerning my assessment and recommendations, including the expected duration of the services to be provided. If you have any questions, ask.

Courteous Service: You may expect courteous treatment, free from verbal, physical or sexual abuse from the practitioner. If you have a concern or complaint about my service or behavior, please talk to me about it so we can rectify the situation.

Confidentiality: Your records and transactions with this practitioner are confidential, unless release of these records is authorized in writing by the client, or otherwise provided by law. See Attachment “A”. It was prepared by the Commissioner of Health and is entitled Access to Health Records Practices and Rights.

Records: You are allowed access to records and written information from records in accordance with Minnesota Statute 144.335

Other Community Services: Other services are available in the community. Information concerning services is available at or through:

The telephone Yellow Pages or various internet searches

Alternative’s Advisor International Alternative Therapy Directory @ www.wevehadit.com

The American Holistic Health Association <http://ahha.org>

Your practitioner may also have additional information. Feel free to discuss options with her.

Selecting and Changing Practitioners: You may choose freely among available practitioners and change practitioners after services have begun. If these services are covered by your health insurance, medical assistance plan or other health program, all of your questions about coverage should be directed to your health insurance provider.

Coordinated Transfer: If you change practitioners, you have the right to my assistance in coordinating this transfer to another practitioner.

Right to Refuse Service: You are free to refuse services or treatment, unless otherwise provided by law. I have the right to refuse service to you for client non-compliance or repeated late cancellation. You are obligated to pay for services you have received and for appointments scheduled that are not cancelled within 48 hours notice.

No Retaliation: You may assert your rights at any time without retaliation.

ATTACHMENT "A"

ACCESS TO HEALTH RECORDS PRACTICES AND RIGHTS

A health care provider or a person who gets health records from a provider may not release a patient's health records without signed and dated consent from that patient. Sometimes the law makes exceptions.

RELEASE OF HEALTH RECORDS AND CONFIDENTIALITY:

Certain federal and state laws protect patients' rights to confidentiality of their health records.

Under Minnesota law, a patient may review any information in his or her health records, regarding any diagnosis, treatment and prognosis. If a patient asks in writing, a provider must give the patient copies of either the records or copies of a summary of the information in the records unless the provider has determined that the information is detrimental to the physical or mental health of the patient, or is likely to cause the patient to inflict self harm, or to harm another. If such a determination had been made, then the information can be given to another provider or appropriate third party. Minnesota statute sets a maximum charge for finding and copying records.

RELEASE OF HEALTH RECORDS WITHOUT PATIENT CONSENT:

In circumstances specified in statute, health record information may or must be released without the patient's consent. The following are some, but not all, examples:

- In a medical emergency
- When a federal law requires it
- When someone receives a court order or a federal grand jury subpoena requiring release of health information
- Under Minnesota law to the following persons or organizations for specific purposes:
 - Department of Health
 - Department of Human Services
 - Department of Public Safety
 - Department of Commerce
 - Department of Employee Relations
 - Department of Labor and Industry, insurers and employers in worker's compensation cases
 - Office Mental Health Practices
 - Ombudsman for Mental Health and Mental Retardation
 - State Fire Marshall
 - Health Boards
- Community Action Agencies
- Health professional licensing boards or agencies
- Schools and childcare facilities may transfer immunization records without consent
- Law enforcement agencies
- Public or private post-secondary education institutions
- Local welfare agencies
- Medical examiners or coroners
- Medical or scientific researcher
- Minnesota Health Data Institute
- Potential victims of serious threats of physical violence
- Guardians or conservators of incompetent persons
- Parents/legal guardians of a minor who is being treated where failure to inform could create serious health problems.
- Insurance companies and other payors paying for independent medical examinations
- Proxies, ombudsmen, attorneys-in-fact

If you have any questions or require additional information, call **the Minnesota Department of Health at (651) 282-6314**

ACKNOWLEDGEMENT BY CLIENT:

I hereby acknowledge receipt of the Client Bill of Rights and the attached document incorporated therein from Heartland Healing Alternatives, Ltd.

I have had a full opportunity to ask any questions I have about this document and my rights as a client.

By signing this document I note that I have read all of the information contained within, I understand the pricing and billing structure, CANCELLATION POLICY, and I fully understand my rights as a client.

Client's Name (Printed):

Client's Signature (Legal Guardian if under 18)

Date:

Relationship to Client if Legal Guardian signature: