**Complementary and Alternative Health Care Client Bill of Rights**

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

In general the practitioner’s choice of modalities depends on your needs as a client. The practitioner typically uses one or more of the following modalities: healing touch or intuitive energy healing, hypnotism, herbology, mind-body healing practices, culturally traditional healing practices, cranial sacral therapy, and healing practices utilizing food and food supplements.

Provider fees are as follows. The initial session is $110. Follow-up sessions are $70 per hour. Fees are due at the time of service. Adjusted fees may be negotiated. A $35 fee is assessed for all returned checks. Full payment is required for appointments not cancelled 24 hours in advance.

Clients Have a Right to:

* Reasonable notice of change in services and charges
* Complete and current information concerning the practitioner’s assessment and the service that is provided. Duration of services is by client choice.
* Coordinated services with other health care providers.
* Expect courteous treatment and to be free from verbal, physical or sexual abuse by the practitioner.
* Confidentiality of all records and transactions unless release of some is approved in writing by the client or otherwise provided by law.
* Documentation of treatments in accordance the Minnesota Statutes, Section 144.335.
* Be informed of other services available in the community for the client’s benefit.
* Choose freely among practitioners; to change practitioners at any time.
* Coordinated transfer if there is a change in provider services.
* Refuse services or treatment, unless otherwise provided by law.
* File complaints with the Office of Complementary/Alternative Health Care Practice, Health Occupations Program, 400 Metro Square Bldg., P.O. Box 64975, St. Paul, MN 55164-0975, (651) 282-6344
* Assert client rights without retaliation.

Prior to provision of service, therapy will be explained and the client will sign a release form acknowledging the terms and the receipt of the Client Bill of Rights.