

STATE OF MINNESOTA CLIENT BILL OF RIGHTS

COMPLEMENTARY AND ALTERNATIVE HEALTH CARE STATUTE 146A.11

Emily Savage, Certified Rolfer™
(This Statement is required by Section 146A.11 of the Minnesota Statutes.)

1. **Name and address of Unlicensed Complementary and Alternative Health Care Practitioner (the “Practitioner”).** Emily Savage, Certified Rolfer™, 314 Clifton Ave., Suite 102, Minneapolis, MN 55403; 612.245.2570.
2. **Qualification of Practitioner.** Graduate of the Rolf Institute® of Structural Integration (Boulder, Colorado), BA Geography at Macalester College (St. Paul, Minnesota)

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 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 acupuncture practitioner, or services from a physician, chiropractor, nurse, osteopath, physical therapist, dietician, nutritionist, acupuncture practitioner, athletic trainer, or any other type of health care provider, the client may seek such services at any time.

3. **Supervisor of Practitioner.** The Practitioner is self employed and as such retains no individual to be named as supervisor. The Practitioner abides by the articles laid out in the Standards of Practice and Code of Ethics as put forth by The Rolf Institute of Structural Integration (the “Institute”). The Rolf Institute® of Structural Integration, 5055 Chaparral Court, Boulder, CO 80301
4. **Complaints.** As a complementary and alternative health care client (“Client”), you have the right to file a complaint with the ethics board of the aforementioned institution. Any such complaint should be directed to the attention of the executive director of the Institute, in writing and should include supporting details sufficient to permit an investigation into the complaint to be commenced.
5. **Office of Complementary and Alternative Health Care Practice.** Office of Unlicensed Complementary and Alternative Health Care Practice, Health Occupations Program, Suite 300, Golden Bldg, PO Box 64882, St Paul, MN 55164; (651) 282-6331. As a Client, you may file complaints with such offices.
6. **Fees.** The Practitioner’s fees are billed and due upon completion of services rendered, payable by cash or check, and are as follows: \$145 for the first session, \$120 per subsequent sessions; standard sessions will consist of 75 minutes unless more or less time is deemed necessary by the Practitioner. No insurance companies have agreed to reimburse the Practitioner. The Practitioner does not contract with any health maintenance organization to provide service. The Practitioner does not accept Medicare, medical assistance or general assistance medical care. The practitioner is not willing to accept partial payment, or to waive payment. Discounts and promotional fee reductions are at the sole discretion of the Practitioner, the terms of which will be clearly stated prior to start of services.
7. **Notice of Changes in Services or Charges.** As a Client, you have the right to reasonable notice of changes in services or charges.
8. **Theoretical Approach.** The Purpose of Rolfing is to balance and align the physical body so that it is supported and maintained by gravity in three-dimensional space. This is done through direct manipulation of the Client’s body by the fingers, hands and elbows of the Practitioner as well as directed education in movement and body awareness so that greater economy and freedom of body-movement are achieved.
9. **Right to Information.** As a Client, you have the right to complete and current information concerning the Practitioner’s assessment and recommended service that is to be provided, including the expected duration of the services to be provided.
10. **Treatment.** As a Client, you may expect courteous treatment and to be free from verbal, physical, or sexual abuse by the Practitioner.
11. **Client Records/Transactions.** Client records and transactions with the Practitioner are confidential, unless release of these records is authorized in writing by you as the Client, or otherwise provided by law.
12. **Access to Records.** As a Client, you have the right to be allowed access to records and written information from records in accordance with Section 144.335 of the Minnesota Statutes.
13. **Other Services.** Other services may be available in the community. Information concerning such services may be found online at the following web address: <http://www.rolf.org/find/locate.asp>.
14. **Right to Choose.** As a Client, you have the right to choose freely among available practitioners and to change practitioners after services have begun, within the limits of health insurance, medical assistance, or other health programs.
15. **Coordinated Transfer.** As a Client, you have the right to coordinated transfer when there will be a change in the provider of services.
16. **Refusal of Service.** As a Client, you have the right to refuse services or treatment, unless otherwise provided by law.
17. **Assertion of Rights.** You have the right to assert your rights without retaliation.

Acknowledgment by Client

I hereby attest that I have received a copy of The Complementary and Alternative Health Care Bill of Rights in relation to services to be provided to me by Emily Savage, Certified Rolfer™, as required by Section 146A.11 of the Minnesota Statutes.

Signature

Print Name

Date