



CENTERSTONE

6/12/2024

I understand that by signing this form, I am agreeing to be contacted by Centerstone employees by the methods I choose below. I further understand that each of these methods of communications will be limited to the permitted purposes indicated below and may not be available to every Centerstone provider.

Communication Methods:

- US Mail
- Text (unsecured)
- Email
- Work Phone
- Home Phone
- Cell Phone
- Other: _____

I am willing to receive invitations to participate in research being conducted at Centerstone

- Yes
- No

Research opportunities may include new treatment approaches that could benefit you and/or a family member. Participation in research often involves gift cards to “thank you” for your time. Your future decisions to participate in research will not affect your care at Centerstone

Text Option:

- Appointment reminders/confirmation
- Homework assignments and/or reminders
- Medication reminders
- Sharing client-requested resources
- Trouble-shooting for telehealth appointments
- Customer feedback surveys
- Centerstone announcements (e.g. changes to operating hours, facility closures, etc.)
- Receipt of payment and billing statements
- Invitations to participate in research, if you agreed to this above

Email Options:

- Appointment reminders/confirmation

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- Documents related to your treatment
- Sharing safety plans (de-identified only or with verbal permission)
- Therapy homework assignments and/or reminders
- Therapy guides (e.g. mindfulness exercises, etc.)
- Medication reminders
- Sharing client-requested resources
- Troubleshooting for telehealth appointments
- Centerstone announcements (eg. Changes to operating hours, facility closures, etc.)
- Customer feedback surveys
- Information about privacy
- Receipt of payment and billing statements
- Invitations to participate in research, if you agreed to this above

Communication Agreement

1. I am not to use text messaging or email to contact Centerstone employees in emergency situations. Emergencies should be addressed by calling 911 or the Centerstone Crisis Line
2. Text and email correspondence is limited to the methods indicated above, otherwise other methods of contact with a Centerstone employee will be used
3. Response from Centerstone staff to a text or email may occur within 1-2 business days of receipt
4. These communication methods may allow my personal information to be viewed or used by unauthorized persons. Centerstone has no authority or control regarding how my cellular service provider, email provider, or internet service provider protects or shares my communication records
5. Centerstone cannot provide secure text messages. I understand that choosing this option may allow my personal information to be viewed by individuals who I have not approved to view it. Centerstone will not pay for text messaging charges or fees
6. Some of my Centerstone care providers may not be able to communicate with me using some communication methods
7. Centerstone has the right to deny my request based on its ability to use that form of communication
8. I understand that my request is valid until my services are completed or my contact information changes. I understand that I will be required to complete a new Communication Request if my contact information changes

I have the right to terminate my communication request at any time.

As indicated above, Centerstone is authorized to communicate with me via the selected methods above. This communication may include protected health information.

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Client's Current Contact Information:

Client's Address- Street: _____

Client's Address- Street 2: _____

City: _____

Zipcode: _____

State: _____

County: _____

Client's Home Phone: _____

Client's Cell Phone: _____

Client's Work Phone: _____ Work Phone Ext: _____

Optional Cell Phone: _____

Client's Email Address: _____

Optional Email: _____

Identify owner of phone numbers and/or email addresses:

Signature Requirement, select one:

- CL currently in crisis, no signature
- CL is in hospital, no signature
- CL is incarcerated, no signature
- CL signature is in scanned records
- CL signature obtained
- CL verbally agreed to TX declined sign
- Other
- Public Health Emergency, no signature

Signature Requirement Other: _____

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