

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

Nissa Valdez, NCBTMB, LICENSED ESTHETICIAN
Ritual Self Care LLC, 314 Clifton Avenue, Carriage House
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Nissa Valdez, the Practitioner has received the following education, training, and credentials:

- Massage Therapy, New Mexico Academy of Healing Arts, Santa Fe, NM. 157 hours
- Massage Therapy, Scherer Institute of Natural Healing, Santa Fe, NM. 680 hours
- Oncology Massage Certification, Peregrine Institute of Oncology Massage Training, 300 hours
- Manual Lymph Drainage, Vodder School, over 120 hours of training
- Biodynamic Craniosacral Therapy, Santa Fe School of Massage, 700 hours
- Board Certified Massage and Bodywork Therapist (NCBTMB) since 1997
- Licensed Esthetician since 1998
- Certified yoga instructor since 2003
- Member of the Society for Oncology Massage
- Registered Craniosacral Therapist

A more detailed outline of my training can be found on my website: ritualselfcare.earth

My goal is to create a restorative, safe and healing environment that encourages relaxation, inner peace and well being. The techniques I use are from both Eastern and Western philosophies and are used respectfully with the intention of igniting and supporting one's own innate healing from within.

FEES, PAYMENT, INSURANCE AS OF March 01, 2019
Massage Prices
60 minutes \$120, 90 minutes \$155

Prices for all services are on my website - www.ritualselfcare.earth - Tax will be added to all massage services. Payment is accepted by cash, check or charge and is to be paid in full at the time of treatment. I do not take insurance. However, you may contact your health care insurer directly to see if they will cover these services and to obtain reimbursement from them, if allowed. I will provide a receipt for purposes of insurance reimbursement and treatment notes as they apply. Nissa Valdez and Ritual Self Care LLC require 48 hours notice for cancellations.

As of July 1, 2001, the Freedom of Access to Complementary Care Law requires that you receive and acknowledge by your signature that you have received the following information prior to your treatment.

“THE STATE OF MINNESOTA HAS NOT ADOPTED ANY EDUCATIONAL OR 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, nurse, osteopath, physical therapist, dietitian, nutritionist, acupuncture practitioner, athletic trainer, or any other type of health care provider, the client may seek such services at any time.”

Complaints— If the client has a complaint or concern about the care or services they have received, the client may contact OCAP (Office of Alternative Practice) at 651-201-3728.

- Change of Price— While changes in session fees can occur, reasonable notice of those changes is provided by email, verbal, or written notice to the client.
- Theory of Treatment— The state requires a “plain language” summary of the “theoretical approach used to provide service to clients”. Please reference the practitioner’s credentials as this varies per practitioner. Client may ask the practitioner.
- Right to Current Information—Clients 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 service to be provided.
- Right to Confidentiality—Client records are confidential and will not be released unless authorized by the client in writing or as otherwise provided for by law.
- Right to Self Access—Clients have the right to access their own records, maintained by the practitioner’s office, in accordance with the state statute 144.291 to 144.298.
- Personal Interaction—Clients have the right to expect courteous treatment, free from verbal physical, or sexual abuse.
- Right of Agency—The client has 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.
- Records of Transfer—The client has the right to coordinated transfer of your records when there will be a change in the provider of services.
- Right of Refusal—The client may refuse services or treatment, unless otherwise provided by law.
- Right of Non-Retribution—The client has the right to assert any and all of the above mentioned rights without retaliation from the practitioner.

I (please print your name) _____ acknowledge by my signature that I have received and understand the Complementary and Alternative Health Care Client Bill of Rights.

Signature _____ Date _____