

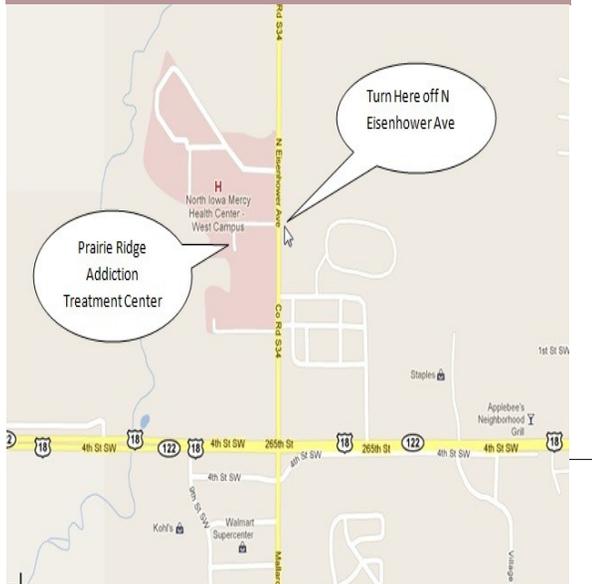
Directions

From I35: Take Mason City exit 194. Head east on Hwy 122. Turn north on Eisenhower Avenue.

From Avenue of Saints (Hwy 18/27): Take exit 183 onto Mallard Ave. N. This turns into Eisenhower Ave. Continue past Hwy 122 junction.

We are located in front of
Mercy West Campus.

Outreach offices are located in
Algona, Charles City, Forest City, &
Hampton, Iowa.



PAYMENT OPTIONS:

Prairie Ridge is a private, not-for-profit, community-based organization. Prairie Ridge accepts the following payment options:

- Payment for services from most major health insurance plans.
- Medicaid reimbursement.
- Self-pay. Cash / All major credit cards.
- Sliding-scale fee available for Iowa residents only.

ASSESSMENTS:

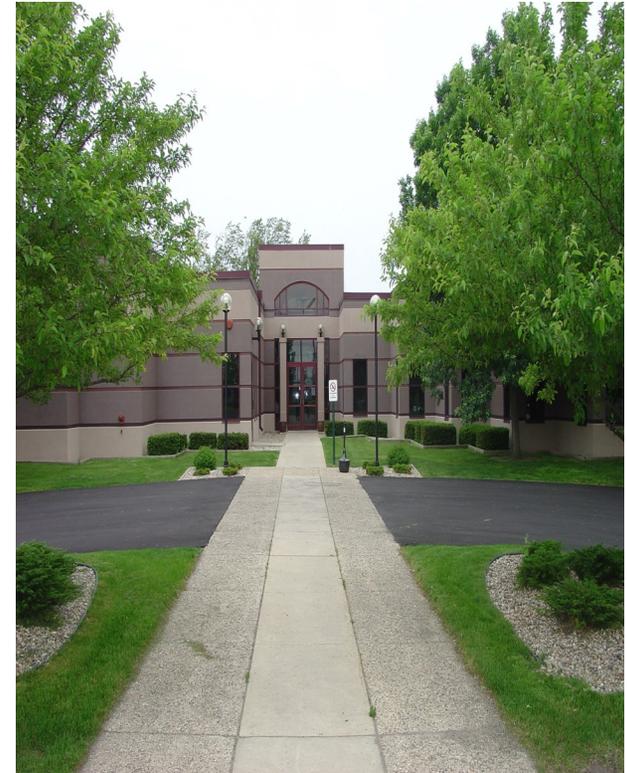
Prairie Ridge offers assessments on a scheduled basis. We will have daily designated slots that can be used only for assessments. The number of slots should allow for quick access to an appointment. Our goal continues to be that clients can be seen within 2 days.

- ◆ Assessments are available in the outreach offices in Charles City, Algona, Hampton, and Forest City by appointment only. In Charles City, call (641) 228-1477, Algona, call (515) 295-5158, Forest City call (641-585-2060), and Hampton call (641) 456-2365



Phone: 641-424-2391
Toll Free: 1-866-429-2391
Fax: 641-424-0783

*Prairie Ridge Integrated
Behavioral Healthcare*



www.prairieridge.net

**Providing Comprehensive
Treatment Services to Communities
of North Iowa and Beyond**

(641) 424-2391
(866) 429-2391

MISSION

The Prairie Ridge mission is to prevent and reduce behavioral health symptoms and associated stigma.

VISION

Prairie Ridge will be the preferred provider of integrated behavioral healthcare through holistic, client-centered, feedback-informed prevention, and treatment services.

WE VALUE

Treating all individuals with dignity & respect.

Integrity, clarity, and precision in all our interactions.

Continual improvement of all aspects of our organization.

Accountability, positivity, and responsiveness to feedback.

Resiliency of the individual.

Building and improving strong alliances.

Prairie Ridge offers services in their primary location in Mason City as well as in outreach offices in Algona, Hampton, Charles City and Forest City.

Prairie Ridge Integrated Behavioral Healthcare

PROGRAMMING:

Prairie Ridge utilizes evidence-based practices emphasizing flexible programming designed to meet the needs of the individual client. Skill-specific programming includes motivation-enhancement therapy, dialectical behavioral therapy, MATRIX (including relapse prevention skills and development of personal recovery program), and 12-step programming. Treatment is offered at several different levels of intensity, including both outpatient and inpatient services.

MEDICATION/HEALTH NEEDS:

Prairie Ridge is committed to working with clients who have co-occurring concerns related to both physical and emotional health concerns. We recognize that our clients benefit from coordinated care services with primary care physicians, understanding the connection between the substance use disorder and its impact on physical and emotional health. It is our goal to work in cooperation with each client's primary healthcare provider to better treat the whole person.

For clients entering residential treatment, we ask that they present with a 30-day supply of medications at admission. The following classes of medication will, in most cases, be discontinued if admitted to residential services:

- Benzodiazepines
- Opiates

ADMISSION CRITERIA FOR RESIDENTIAL SERVICES:

Clients must meet ASAM (American Society of Addiction Medicine) criteria for level III.5 Clinically Managed High-Intensity Residential Treatment. Clients must have minimal problems with intoxication or withdrawal, few biomedical complications, and relatively stable mental health status. Appropriate referrals will likely have significant deficits in relapse or continued problem potential or in their recovery environment.

Given that we do not have 24-hour medical coverage, clients must be ambulatory and fully able to address their own medical needs and manage their daily care, including showering, dressing, changing dressings, etc.

Although we attempt to meet the Dual Diagnosis Enhanced standard of care as defined by ASAM, we have found the following psychiatric issues are not manageable and/or do not result in positive outcomes in our residential treatment unit:

- Any Axis I condition where the person is unstable to the point of being a danger to self or others, or where the person is not solidly oriented X3.
- Evidence of active psychosis not controlled by medication.
- Cognitive functioning significantly low enough to seriously impair abstract thinking.