

## **As a Patient, You Have the Right:**

- To be treated with dignity and respect.
- To be provided assistance in a prompt, courteous and responsible manner.
- To complete privacy and confidentiality.
- To information regarding your diagnosis, evaluation, treatments and prospects for recovery in terms you can understand.
- To understand the medications prescribed for you, what they are, what they are for, how to take them properly and what the possible side effects are.
- To be informed of the costs associated with your treatment upon request.
- To participate in decisions involving your health care, including, but not limited to choosing your health care provider and receiving information about any proposed treatment or procedure in order to give informed consent.
- To know the names, titles and qualifications of all who provide your care.
- To be informed of the procedure for submitting a complaint about HealthLinc, Your Community Health Center, and/or the quality of care you have received and to receive a response to your complaint in a timely manner.
- To initiate the grievance procedure without fear of reprisal; which includes the right to a fair hearing, if you are not satisfied with HealthLinc's decision regarding any complaint.
- To review and obtain a copy of your medical record, subject to state law and HealthLinc's policies and procedures.
- To participate in the development of your plan of care in a language you can understand and to have a designated representative involved.
- To reasonable access to care within HealthLinc's scope of services, its stated mission and applicable laws and regulations.
- To refuse treatment to the extent permitted by law.
- To participate in the consideration of ethical issues that arise in your care.
- To be informed of medical consequences and risks of your decision to refuse treatment.
- To formulate an Advanced Directive or Living Will.
- To designate a surrogate decision maker, such as your guardian, next of kin, or legally authorized responsible person.
- To care which takes into consideration your psychosocial, spiritual, and cultural values.
- To appropriate assessment and management of pain.
- To access to emergency health care services.

## **As a Patient, You Have the Responsibility:**

- To know the benefits and exclusions of your health plan coverage.
- To respect the rights, property and environment of all HealthLinc health care providers, employees, and patients.
- To provide HealthLinc with complete and accurate information about all present and past health matters and report all changes in your condition.
- To clearly understand a prescribed course of treatment and comply with the treatment plan agreed upon by you and your physician.
- To keep your appointments and, if unable to do so, to notify the office as soon as possible, so that your appointment time can be given to another patient.
- To pay all applicable co-payments at the time of service.
- To express your opinions, concerns or complaints in a constructive manner to the appropriate people.
- To remember to notify HealthLinc in a timely manner of changes in family size, address, phone number or third-party payment (including Medicaid and Medicare) company status.
- To cooperate with all persons providing your care and treatment.
- To try to understand and follow instructions concerning your treatment and ask questions if you do not understand or need an explanation.
- To be responsible in your payment for treatment and to be cooperative and timely in providing insurance and eligibility information.
- To accept responsibility for consequences if you decide to refuse treatment or ignore instructions.
- To provide proof of identity and/or income when requested to do so.

Approved by the HealthLinc Board of Directors March 13, 2006

*"Your Patient-Centered Medical Home"*