

HOSPITAL

PATIENT RIGHTS AND RESPONSIBILITIES

(GEGORGIA, KANSAS, NORTH CAROLINA, TEXAS, WISCONSIN)

(HOSPITAL AND PROVIDER OUTPATIENT FACILITIES)

HOSPITAL PATIENT RIGHTS AND RESPONSIBILITIES

Federal and state law provide you certain rights and responsibilities while you are receiving healthcare services. AdventHealth is committed to making every effort to protect and uphold your rights. If you have any questions or would like additional information, including a copy of the full text of your state's laws regarding your rights and responsibilities, please ask. Your rights and responsibilities include:

General Rights

You have a right to:

- An interpreter when you do not speak English and when one is available;
- Be informed during the admission process of the facility's policies regarding your rights;
- Not to be discriminated against on the basis of race, color, national origin, disability, age, diagnosis, or payment source;
- A reasonable response to your requests and needs for treatment or service, within the hospital's capacity, its stated mission, and applicable law and regulation;
- Care and treatment, in compliance with state statute and consistent with sound and quality nursing and medical practices, that is in a safe setting, is competent and respectful, recognizes a person's dignity, cultural values, and religious beliefs, and provides for personal privacy to the extent possible during the course of treatment; and
- Have your property treated with respect.

Quality of Care and Decision Making

You have a right to:

- Know the name, business telephone number, and business address of the person supervising your services and how to contact that person;
- Choose the participating physician responsible for coordinating your care;
- Know the names, professional status, and experience of the staff providing your care or treatment;
- Be informed of your health status, including full information in laymen's terms, concerning your condition and diagnosis, proposed treatment (including information about alternative treatments and possible complications) and prognosis;
- Participate in and make informed decisions regarding the development and implementation of your plan of care;
- Except for emergencies, to give informed consent prior to the start of any procedure or treatment, or both, and to have care implemented without unnecessary delay;
- Request or refuse any treatment, drug, test, or procedure, and be informed of the risks and benefits of your request or refusal;
- Be promptly and fully informed of any changes in your plan of care;
- Be free of all forms of neglect, abuse (physical or mental), corporal punishment, or harassment;
- Be free from restraint or seclusion, of any form, imposed as a means of coercion, discipline, convenience, or retaliation by staff;
- Have a family member or representative of your choice and your own physician notified promptly of your admission to the hospital;
- Know whether referrals to other providers are entities in which we have a financial interest; and

- Assistance in obtaining consultation with another physician or practitioner at your request and expense.

Advance Directives and Surrogates

You have a right to:

- Formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives;
- Appoint a surrogate to make health care decisions on your behalf to the extent permitted by law; and
- Not be denied the right of access to an individual or agency who is authorized to act on your behalf to assert or protect your rights.

Research and Clinical Trials

You have a right to:

- Receive an explanation of the nature and possible consequences of any research or experimental procedure before the research or experiment is conducted and provide prior informed consent and to refuse to participate; and
- Be advised when a physician is considering you as a part of a medical care research program or donor program, to give informed consent prior to actual participation in such a program, and to, at any time, refuse to continue in any such program.

Finances

You have a right to:

- Receive our general billing procedures;
- Receive, upon request and prior to initiation of care or treatment, estimated average charges for non-emergent care, including deductibles and co-payments that would not be covered by a third-party payer based on the coverage information supplied by you or your representative; and
- Regardless of source of payment, to examine and to receive a reasonable explanation of your total bill for health care services rendered by your physician or other health care provider, including the itemized charges for specific health care services received.

Privacy and Confidentiality

You have a right to:

- Personal privacy and confidentiality in health care (may be waived in writing);
- Confidentiality of your clinical records except as otherwise provided by law; and
- Access to information contained in your clinical records within a reasonable time frame.

Grievances

You have a right to:

- Be informed of the complaint procedures and the right to submit complaints, either orally or in writing, without fear of discrimination or retaliation and to have them investigated by your provider within a reasonable period of time;
 - Be given the name, business address, and telephone number of the person that will handle any complaints or questions about services being delivered to you;

- Receive a written notice of the address and telephone number of the licensing authority in your state which is charged with the responsibility of licensing your facility provider and investigating complaints regarding licensing regulations; and
- Obtain a copy of the most recent completed report of licensure inspection upon written request.

North Carolina Patients

If you are a patient in North Carolina, you also have a right to:

- Medical and nursing treatment that avoids unnecessary physical and mental discomfort and to be free from duplication of medical and nursing procedures as determined by the attending physician;
- Designate visitors who will receive the same visitation privileges as your immediate family members, regardless of whether the visitors are legally related to you;
- Not be awakened by hospital staff unless it is medically necessary;
- When medically permissible, be transferred to another facility upon request;
- Be informed upon discharge of your continuing health care requirements following discharge and the means for meeting them; and
- Full information and counseling on the availability of known financial resources for your health care.

Texas Minors

If you are a minor patient in Texas, you also have a right to:

- Appropriate treatment in the least restrictive setting available;
- Not receive unnecessary or excessive medication;
- An individualized treatment plan and to participate in the development of the plan;
- A humane treatment environment that provides reasonable protection from harm and appropriate privacy for personal needs;
- Separation from adult patients; and
- Regular communication between you and your family.

Patient Responsibility

You have the responsibility to:

- Advise your provider of any changes in your condition or any events that affect your service needs.

Concerns or Complaints

Your satisfaction is important to us. If you have a concern or a complaint, please allow the person responsible for your care or their supervisor the opportunity to listen, review, and to assist you with an appropriate resolution. If your complaint is unresolved, please ask to speak to the department’s manager, director or the house supervisor. If your concern cannot be resolved by the AdventHealth process indicated, please allow the facility the opportunity to address your grievance.

Georgia	Facility Contact Information
AdventHealth Gordon AdventHealth Murray	Patient Grievance Line 706-602-7800, ext. 2568

Kansas	
AdventHealth Ottawa	Chief Clinical Officer 785-229-8312
AdventHealth Shawnee Mission	Patient Advocate 913-676-2155
Kentucky	
Manchester	Patient Experience Coordinator 606-598-5104 ext. 3183
North Carolina	
Hendersonville	Customer Service/Case Management/Hospital Supervisor 828-684-8501
Texas	
AdventHealth Central Texas AdventHealth Rollins Brook	Patient Advocate Department 254-519-8553 OR TTY number: 877-746-4674
Central Texas Medical Center	Office of Clinical Effectiveness 512-753-3526
Texas Health Huguley	Patient Advocate 817-551-2495
Wisconsin	
AdventHealth Durand	Administration 715-672-4211

Additionally, if your concern has not been resolved, you may reach out to the AdventHealth Corporate Risk Management team, 407-357-2290. Most issues will be resolved in 30 days or less.

The following agencies may be contacted:

State/Facility	Licensing Agency	Accreditation Agency	
Georgia			
AdventHealth Gordon AdventHealth Murray	Georgia Office of Regulatory Services Two Peachtree St., NW Atlanta, GA 30303-3142	Joint Commission: E-mail: complaints@jointcommission.org Fax: Print a Quality Incident Report Form from the web site, www.jointcommission.org , and fax to the Office of Quality Monitoring, Fax: 630-792-5636	
Kansas			
AdventHealth Ottawa AdventHealth Shawnee Mission	Kansas Department of Health 1000 SW Jackson Topeka, KS 66612 800-842-0078		
Kentucky			
Manchester	Kentucky Division of Licensure 606-330-2030		

North Carolina		<u>Mail:</u> Print form as above and mail to: Office of Quality Monitoring The Joint Commission One Renaissance Boulevard Oakbrook Terrace, IL 60181
Hendersonville	N.C. Division of Health Services 800-624-3004	
Texas		
AdventHealth Central Texas AdventHealth Rollins Brook Central Texas Medical Center Texas Health Huguley	Texas Department of Health and Human Services 888-973-0022	
Wisconsin		
AdventHealth Durand	Wisconsin DOH and Family Services Bureau of Quality Assurance P.O. Box 2969 Madison, WI 53701 608-266-8481	Not accredited

**SUMMARY OF THE PATIENT'S
BILLOF RIGHTS AND RESPONSIBILITIES
(FLORIDA ADVENTHEALTH HOSPITALS)**

SUMMARY OF THE PATIENT'S BILLOF RIGHTS AND RESPONSIBILITIES

Federal and state law requires that your health care provider or health care facility recognize your rights while you are receiving medical care and that you respect the health care provider's or health care facility's right to expect certain behavior on the part of patients. You may request a copy of the full text of your law from your health care provider or health care facility. A summary of your rights and responsibilities follows:

1. A patient has the right to be treated with courtesy and respect, with appreciation of his or her individual dignity, and with protection of his or her need for privacy.
2. A patient has the right to a prompt and reasonable response to questions and requests.
3. A patient has the right to know who is providing medical services and who is responsible for his or her care.
4. A patient has the right to know what patient support services are available, including whether an interpreter is available if he or she does not speak English.
5. A patient has the right to bring any person or receive visitors of his or her choosing to the patient-accessible areas of the health care facility or provider's office to accompany the patient while the patient is receiving inpatient or outpatient treatment or is consulting with his or her health care provider, unless doing so would risk the safety or health of the patient, other patients, or staff of the facility or office or cannot be reasonably accommodated by the facility or provider.
6. A patient has the right to know what rules and regulations apply to his or her conduct.
7. A patient has the right to be given by the health care provider information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis.
8. A patient has the right to be fully informed regarding his or her health status, participate in the development and implementation of his or her plan of care, and make informed decisions regarding care.
9. A patient has the right to request or refuse any treatment, except as otherwise provided by law.
10. A patient has the right to refuse treatment and life-prolonging procedures.
11. A patient has the right to be free from physical or mental abuse, and corporal punishment.
12. A patient has the right to be free from restraint or seclusion, of any form, imposed as a means of coercion, discipline, convenience, or retaliation by staff and to be subjected to restraint or seclusion only to ensure the immediate physical safety of the patient, a staff member, or others and to have it discontinued at the earliest possible time.
13. A patient has the right to written information concerning the health care facility's policies respecting advance directives, including a copy of "Health Care Advance Directives – The Patient's Right to Decide."
14. A patient has the right to formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives.
15. A patient has the right to not have treatment or admission conditioned upon whether or not the individual has executed or waived an advance directive.
16. A patient has the right to have his or her advanced directive documented in his or her medical record.
17. A patient has the right to designate a surrogate to make health care decisions on behalf of the patient as specified under chapter.
18. A patient has the right to personal privacy, to receive care in a safe setting, and to be free from all forms of abuse or harassment.
19. A patient has the right to participate in the consideration of ethical issues that arise in his or her care.

20. A patient has the right to have a family member or representative of his or her choice and his or her physician notified promptly of his or her admission to the hospital.
21. A patient has the right to confidentiality of his or her clinical records and to access information contained in his or her clinical records within a reasonable time frame.
22. A patient has the right to be given, upon request, full information and necessary counseling on the availability of known financial resources for his or her care.
23. A patient who is eligible for Medicare has the right to know, upon request and in advance of treatment, whether the health care provider or health care facility accepts the Medicare assignment rate.
24. A patient has the right to receive, upon request, prior to treatment, a reasonable estimate of charges for medical care.
25. A patient has the right to receive a copy of a reasonably clear and understandable, itemized bill and, upon request, to have the charges explained.
26. A patient has the right to impartial access to medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.
27. A patient has the right to treatment for any emergency medical condition that will deteriorate from failure to provide treatment.
28. A patient has the right to know if medical treatment is for purposes of experimental research and to give his or her consent or refusal to participate in such experimental research.
29. A patient has the right to express grievances regarding any violation of his or her rights, as stated in Florida law, through the grievance procedure of the health care provider or health care facility which served him or her and to the appropriate state licensing agency.
30. A patient has the right to information about procedures for initiating, reviewing and resolving patient complaints.
31. A patient is responsible for providing to the health care provider, to the best of his or her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his or her health.
32. A patient is responsible for reporting unexpected changes in his or her condition to the health care provider.
33. A patient is responsible for reporting to the health care provider whether he or she comprehends a contemplated course of action and what is expected of him or her.
34. A patient is responsible for following the treatment plan recommended by the health care provider.
35. A patient is responsible for keeping appointments and, when he or she is unable to do so for any reason, for notifying the health care provider or health care facility.
36. A patient is responsible for his or her actions if he or she refuses treatment or does not follow the health care provider's instructions.
37. A patient is responsible for assuring that the financial obligations of his or her health care are fulfilled as promptly as possible.
38. A patient is responsible for following health care facility rules and regulations affecting patient care and conduct.

Concerns or Complaints

Your satisfaction is important to us. If you have a concern or a complaint, please allow the person responsible for your care or their supervisor the opportunity to listen, review, and to assist you with an appropriate resolution. If your complaint is unresolved, please ask to speak to the department's manager, director or the house supervisor.

If your concern cannot be resolved by the AdventHealth process indicated, please allow the facility the opportunity to address your grievance.

Central Florida	
Altamonte	Risk Management 407-200-1330
Apopka	
Celebration	
East Orlando	
Heart of Florida	
Kissimmee	
Lake Wales	
Orlando	
Winter Garden	
Winter Park	
North Florida	
Fish Memorial	Risk Management 386-917-5254
Deland	Risk Management 386-943-4840
Daytona Beach	Risk Management 386-231-3185
Palm Coast	Risk Management 386-586-4229
New Smyrna	Risk Management 386-424-5052
Waterman	Risk Management 352-253-3195
West Florida	
Carrollwood	Administration 813-558-8001
Dade City	Risk Management 813-929-5230
Lake Placid	Patient Advocate 863-402-3421 OR 863-402-5333
North Pinellas	Risk Management 727-942-5069
Ocala	Risk Management 352-402-5032
Sebring	Patient Advocate 863-402-3421 OR 863-402-5333
Tampa	Risk Management 813-615-7204

Wauchula	Patient Advocate 863-402-3421 OR 863-402-5333
Wesley Chapel	Risk Management 813-929-5000
Zephyrhills	Risk Management 813-783-6119 ext. 1614

Additionally, if your concern has not been resolved, you may reach out to the AdventHealth Corporate Risk Management team, 407-357-2290. Most issues will be resolved in 30 days or less.

The following agencies may be contacted:

Facility	Accreditation Agency	Licensing Agency
Central Florida Orlando Campuses	Hospital Complaint DNV Healthcare Inc. 400 Techne Center Drive, Ste 100 Milford, OH 45150-2792 Phone: 866-523-6842	Agency for HealthCare Administration Complaint Administration Unit 2727 Mahan Drive Tallahassee, FL 32308 Phone: 888-419-3456
Altamonte		
Apopka		
Celebration		
East Orlando		
Heart of Florida		
Kissimmee		
Lake Wales		
Orlando		
Winter Garden		
Winter Park		
West Florida		
Tampa		
Wesley Chapel		
North Florida	Joint Commission: E-mail: complaints@jointcommission.org Fax: Print a Quality Incident Report Form from the web site, jointcommission.org , and fax to the Office of Quality Monitoring, Fax: 630-792-5636 Mail: Print form as above and mail to: Office of Quality Monitoring The Joint Commission One Renaissance Boulevard Oakbrook Terrace, IL 60181	
Fish Memorial		
Deland		
Daytona Beach		
Palm Coast		
New Smyrna		
Waterman		
West Florida		
Carrollwood		
Dade City		
Lake Placid		
North Pinellas		
Ocala		
Sebring		
Wauchula		
Zephyrhills		

