

NOTICE OF PATIENTS' RIGHTS

Pursuant to federal and State laws, every patient of this facility shall have the right:

- To freedom of choice in their selection of a facility, physician, or health service mode, except in the case of emergency medical treatment or as otherwise provided for by contract, as long as the physician, facility, or health service mode can accommodate the patient exercising such right of choice.
- To receive an itemized bill of laboratory charges, pharmaceutical charges, and third party credits and to examine an explanation of said bill regardless of the source of payment.
- To be treated with courtesy, dignity, and respect. The patient shall be treated with consideration, respect, and full recognition of their dignity and individuality.
- To be informed of the name and specialty, if any, licensure status, and staff position of all those with whom the patient has contact.
- To confidentiality of all records and communications to the extent provided by law. The patient shall be ensured confidential treatment of all information contained in the patient's personal and clinical record, including that stored in an automatic data bank, and the patient's written consent shall be required for the release of information to anyone not otherwise authorized by law to receive it. Medical information contained in the medical records shall be deemed to be the property of the patient. Patients have the right to request restrictions to the use and disclosure of their protected health information, such as disclosures to family members or persons involved in the patient's care; these requests are subject to review and agreement by the facility. No provision relating to confidentiality of records shall be construed to prevent any third party reimburser from inspecting and copying, in the ordin ary course of determining eligibility for or entitlement to benefits, any and all records relating to diagnosis, treatment, or other services provided to any person, including a minor or incompetent, for which coverage, benefit, or reimbursement is claimed, so long as the policy or certificate under which the claim is made provides that such access to records in connection with any peer review or utilization review procedures applied and implemented in good faith.
- To have access to the information contained in their medical records to the extent required by law and to receive a copy of such records, for a reasonable cost (unless requested for the purpose of supporting a claim, appeal, or under any provision of the Social Security Act or federal or state financial needs-based benefit program), upon request. Patients have the right to request an amendment to their health record per the HIPAA Privacy Rule, and it is the policy of this organization to respond to any amendment request in accordance with this rule.
- To be informed, verbally and in writing, of patients' rights and rules and policies of the facility governing patient conduct and responsibilities before or at admission, except in the case of emergency. Receipt of the information must be acknowledged by the patient in writing. When a patient lacks the capacity to make informed judgments, the acknowledgement must be signed by a person legally responsible for the patient.
- To have all reasonable requests responded to promptly and adequately, within the capacity of the facility.
- To obtain, on request, an explanation as to the relationship, if any, of the facility to any other health care facility or educational institution as far as said relationship relates to his care or treatment.
- To privacy during medical treatment or other rendering of care within the capacity of the facility. Case discussion, consultation, examination, and treatment are considered confidential and shall be conducted discreetly.
- To know about their medical condition and to participate in planning their care and medical treatment, including the right to refuse treatment, to the extent permitted by law, without jeopardizing access to medical care and attention, and to be informed of the medical consequences of this decision. The patient shall be fully informed by a health care provider of their health care needs and medical condition, unless medically inadvisable and so documented in the medical record, shall be given the opportunity to participate in the planning of their care and medical treatment, and shall be involved in experimental research with their written consent only.
- To informed consent to the extent provided by law.
- To interpreter services and/or the use of alternative communication techniques to ensure effective communication.
- To receive, upon request, a copy of an itemized bill or other statement of charges submitted to any third party by the facility for care of the patient and to have a copy of said itemized bill or statement sent to the attending physician of the patient.
- To prompt lifesaving treatment in an emergency without discrimination on account of economic status or source of payment and without delaying treatment for purposes of prior discussion of the source of payment unless such delay can be imposed without material risk to the patient's health.
- To receive, upon request, any information which the facility has available relative to financial assistance and free health care.
- To transfer or discharge after appropriate discharge planning only for medical reasons, the patient's welfare or that of other patients, or for nonpayment of the patient's stay, except as prohibited by Title XVIII or XIX of the Social Security Act.
- To prompt and safe transfer to a facility which agrees to receive and treat patient, if refused treatment because of economic status or the lack of a source of payment.
- To be free from emotional, physical, and sexual abuse, exploitation, neglect, corporal punishment, and involuntary seclusion.
- To be free from chemical and physical restraints except when they are authorized in writing by a physician for a specific and limited time necessary to protect the patient or others from injury.

- To exercise their rights as a patient and citizen and to voice grievances without fear of reprisal. The patient may voice grievances and recommend changes in policies and services to facility staff or outside representatives free from restraint, interference, coercion, discrimination, or reprisal.
- To be free from discrimination. The patient shall not be denied appropriate care based on age, sex, gender identity, sexual orientation, race, color, marital status, familial status, disability, religion, national origin, source of income, source of payment or profession.
- Not to perform services for the facility. Where appropriate for therapeutic or diversional purposes and agreed to by the patient, such services may be included in his/her plan of care and treatment.
- Patients shall not be denied admission, care, or services based solely on the patient's vaccination status.
- The patient shall be entitled to have the patient's parents, if a minor, or spouse, or next of kin, unmarried partner, or personal representative chosen by the patient, if an adult, visit the facility while the patient is receiving care, subject to the visitation policies that limit or restrict visitation when medically or therapeutically contraindicated, when it interferes with the care or rights of any patient, or when visitors engage in disruptive, threatening, or violent behavior toward any staff member, patient, or another visitor, or otherwise are non-compliant with the facility's policies.

No provision herein shall be construed as limiting any other right or remedies previously existing at law.

PATIENTS' RESPONSIBILITIES

Patient responsibilities are established to assist patients in taking ownership of their care. Patients and patients' guardians or caretakers are responsible for:

- Providing accurate and complete information about the patient's health including past illnesses, hospital stays, use of medicine, and other matters relating to their health.
- Participating in health care decisions and following the treatment plan outlined by practitioner responsible for their care.
- Asking questions or for help when they do not understand information or instructions.
- Informing the provider or facility staff if there are limitations that may impact the care provided or barriers to following through with treatment (cultural, religious, other).
- Consequences if patient refuses treatment or is non-compliant in following the recommended plan of treatment.
- Providing information needed for the payment of your medical care, including identification and insurance information, and assuring the financial obligations for care received are fulfilled as promptly as possible, including working with the facility to arrange payment, when needed.
- Supporting an environment where the safety and property of patients and staff are respected. Patients and all those accompanying the patient are expected to follow the facility's policies and procedures, including the no smoking/vaping policy. All are expected to interact with health care providers and staff, other patients, and visitors in a respectful, civil manner, not using offensive, threatening and/or abusing language or behavior.
- Notifying the provider or facility staff of any concerns or complaints.

Patient health depends not just on care received in the facility, but, in the long term, on decisions made in daily life. Patients are responsible for recognizing the effect of lifestyle on personal health.

TO REPORT A COMPLAINT

Should you have any questions or concerns, please ask to speak to the Practice Manager of this facility. In addition, complaints and/or concerns may be directed to:

ClearChoiceMD Urgent Care Compliance Office 10 Ferry Street, Suite 302 Concord, NH 03301 <u>Compliance@ccmdcenters.com, Compliance@carewelluc.com</u> 603-457-7803

Or

NH Dept of Health & Human Services Office of Legal & Regulatory Services Bureau of Health Facilities Admin 129 Pleasant Street Concord, NH 03301 800-852-3345 Vermont Secretary of State Division of Licensing & Protection HC 2 South 280 State Drive Waterbury, VT 05676-2060 802-241-0480 MA Dept of Public Health Division of Health Care Quality Complaint Unit 99 Chauncy Street Boston, MA 02111 617-753-8000 DHHS

Division of Licensing 41 Anthony Ave 11 State House Sta Augusta, ME 04333 800-383-2441

RI Dept of Health Patient Concern Line 401-222-2566