



# MAHEC PATIENT BILL OF RIGHTS

1. A patient has the right to respectful care given by competent personnel.

2. A patient has the right, upon request, to be given the name of his attending physician, the names of all other physicians directly participating in his care, and the names and functions of other health care persons having direct contact with the patient.

3. A patient has the right to every consideration of his privacy concerning his own medical care program. Case discussion, consultation, examination, and treatment are considered confidential and shall be conducted discreetly.

4. A patient has the right to have all records pertaining to his medical care treated as confidential except as otherwise provided by law or third party contractual arrangements.

5. A patient has the right to know that facility rules and regulations apply to his conduct as a patient.

6. The patient has the right to expect emergency procedures to be implemented without unnecessary delay.

7. The patient has the right to good quality care and high professional standards that are continually maintained and reviewed.

8. The patient has the right to full information in laymen's terms, concerning his diagnosis, treatment and prognosis, including information about alternative treatments and possible complications. When it is not possible or medically advisable to give such information to the patient, the information shall be given on his behalf to the patient's designee.

9. Except for emergencies, the physician must obtain the necessary informed consent prior to the start of any procedure or treatment, or both.

10. A patient has the right to be advised when a physician is considering the patient as a part of a medical care research program. Informed consent must be obtained prior to actual participation in such program and the patient or legally responsible party, may, at any time, refuse to continue in any such program to which he has previously given informed consent. An Institutional Review Board, (IRB) may waive or alter the informed consent requirement if it reviews and approves a research study in accordance with federal regulations for the protection of human research subjects including U.S. Department of Health and Human Services (HHS) regulations under 45 CFR Part 46 and U.S. Food and Drug Administration (FDA) regulations under 21 CFR Parts 50 and 56. For any research study proposed for conduct under an FDA "Exception from Informed Consent Requirements for Emergency Research" or an HHS "Emergency Research Consent Waiver" in which informed consent is waived but community consultation and public disclosure about the research are required, any facility proposing to be engaged in the research study also must verify that the proposed research study has been registered with the North Carolina Medical Care Commission. When the IRB reviewing the research study has authorized the start of the community consultation process required by the federal regulations for emergency research, but before the beginning of that process, notice of the proposed research study by the facility shall be provided to the North Carolina Medical Care Commission. The notice shall include:

- The title of the research study;

- A description of the research study, including a description of the population to be enrolled;
- A description of the planned community consultation process, including currently proposed meeting dates and times;
- An explanation of the way that people choosing not to participate in the research study may opt out; and
- Contact information including mailing address and phone number for the IRB and the principal investigator.

The Medical Care Commission may publish all or part of the above information in the North Carolina Register, and may require the institution proposing to conduct the research study to attend a public meeting convened by a Medical Care Commission member in the community where the proposed research study is to take place to present and discuss the study or the community consultation process proposed.

11. A patient has the right to refuse any drugs, treatment or procedure offered by the facility, to the extent permitted by law, and a physician shall inform the patient of his right to refuse any drugs, treatment or procedures and of the medical consequences of the patient's refusal of any drugs, treatment or procedure.

12. A patient has the right to assistance in obtaining consultation with another physician at the patient's request and expense.

13. A patient has the right to medical and nursing services without discrimination based upon race, color, religion, sex, sexual preference, disability, national origin or source of payment.

14. A patient who does not speak English or is hearing impaired shall have access, when possible, to a qualified medical interpreter (for foreign language or hearing impairment) at no cost, when necessary and possible.

15. The facility shall provide a patient, or patient designee, upon request, access to all information contained in the patient's medical records. A patient's access to medical records may be restricted by the patient's attending physician. If the physician restricts the patient's access to information in the patient's medical record, the physician shall record the reasons on the patient's medical record. Access shall be restricted only for sound medical reason. A patient's designee may have access to the information in the patient's medical records even if the attending physician restricts the patient's access to those records.

16. When an inpatient under the care of a MAHEC provider, a patient has the right not to be awakened by the hospital staff unless it is medically necessary.

17. The patient has the right to be free from needless duplication of medical and nursing procedures.

18. The patient has the right to medical and nursing treatment that avoids unnecessary physical and mental discomfort.

19. When medically permissible, a patient may be transferred to another facility only after he or his next of kin or other legally responsible representative has received complete information and an explanation concerning the needs for and alternatives to such a transfer. The facility to which the patient is to be transferred must first have accepted the patient for transfer.

20. The patient has the right to examine and receive a detailed explanation of his bill.

21. The patient has a right to full information and counseling on the availability of known financial resources for his health care.

22. Patient has the right to expect that the facility will provide a mechanism whereby he is informed upon discharge of his continuing health care requirements following discharge and the means for meeting them.

23. A patient shall not be denied the right of access to an individual or agency that is authorized to act on this behalf to assert or protect the rights set out in this Section.

24. A patient, or when appropriate, the patient's representative has the right to be informed of his rights at the earliest possible time in the course of his hospitalization.

25. A patient, and when appropriate, the patient's representative has the right to have any concerns, complaints, and grievances addressed. Sharing concerns, complaints and grievances will not compromise a patient's care, treatment or services.

- If a patient has a concern, complaint, or grievance, he may contact MAHEC's Director of Corporate Compliance (or designee).
- The patient has the right to directly contact the North Carolina Department of Health and Human Services.

NC Division of Health Services Regulation  
Complaint Intake Unit  
2711 Mail Service Center  
Raleigh, NC 27699-2711  
1-800-624-3004

- Filing a grievance with MAHEC's Director of Corporate Compliance and Risk Management (or their designee) does not prevent the person filing the grievance from filing a complaint with the:

Office for Civil Rights, Region VIII  
U.S. Department of Health and Human Services  
999 18th St. Suite 417  
Denver, Colorado 80242  
Voice Phone (303) 844-2024  
FAX (303) 844-2025  
TDD (303) 844-3439

26. The patient has the right to participate in the development and implementation of his plan of care, including his inpatient treatment/care plan, outpatient treatment/care plan, discharge care plan, and pain management plan.

27. The patient, or when appropriate, the patient's representative has the right to make informed decisions regarding his or her care. The patient's rights include being informed of his health status, being involved in care planning and treatment, and being able to request or refuse treatment. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate. Making informed decisions includes the development of their plan of care, medical and surgical interventions (e.g. deciding whether to sign a surgical consent), pain management, patient care issues and discharge planning.

28. The 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.

29. The patient has the right to personal privacy. Privacy includes a right to respect, dignity, and comfort as well as privacy during medical/nursing treatment, and when requested as appropriate.

30. The patient has the right to receive care in a safe setting. A safe setting includes environmental safety, infection control, security, protection of emotional health and safety, including respect, dignity, and comfort, as well as physical safety.

31. The patient has the right to be free from all forms of abuse or harassment. This includes abuse, neglect, or harassment from staff, other patients, and visitors.

32. The patient has the right to request a change of providers within the practice by submitting the request to the Practice Manager. The Practice Manager for FM and OB or designee will make the assigned provider and tentative new provider aware of the request. If both providers agree the change is in the best interest of the patient, the change will be made. The Dental Practice Manager will discuss the request with the Division Director who will make a determination concerning the provider change request.

## PATIENT RESPONSIBILITIES

Prior to receiving care in a MAHEC clinical practice, patients are informed of their responsibilities for:

- Providing complete and accurate information to the best of his/her ability about his/her health, any medication taken, including over-the-counter products and dietary supplements, and any allergies or sensitivities.
- Following the treatment plan prescribed by his/her provider and participating in his/her care.
- Arranging for a responsible adult to transport him/her home from the facility and remain with him/her for a defined time period, if required by the provider.
- Accepting personal financial responsibility for any charges not covered by insurance.
- Behaving respectfully toward all the health care professionals and staff as well as other patients.

Questions concerning this policy should be directed to MAHEC's Department of Corporate Compliance and Risk Management.