

## **Patient Bill of Rights and Responsibilities**

The patient or the patient's legal representative has the right to be informed of the patient's rights and responsibilities as a patient through effective means of communication. If the patient has been judged incompetent under state law by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed to act on patient's behalf. If no court decision, any legal representative designated by the patient in accordance with state law may exercise the patient's rights to the extent allowed by state law. The home health agency will protect and promote the exercise of these rights and shall do the following:

Provide the patient with a written notice of the patient's rights:

- In advance of furnishing care to the patient;
- During the initial evaluation visit before the initiation of treatment;
- Provide information necessary to give informed consent prior to the start of any treatment or procedure; or
- Be fully informed of scope of services the agency will provide and specific agency service/care limitations, policies and charges for services, including eligibility for third-party reimbursements.

The patient has the right to exercise his or her rights as a patient of the home health agency as follow:

The patient's family or legal representative may exercise the patient's rights as permitted by law.

The patient has the right to the following:

- Receive a timely response from the agency to the patient's request for service.
- Have his or her property treated with respect.
- Voice grievances regarding treatment or care that is (or fails to be) furnished, or regarding the lack of respect for property by anyone who is furnishing services on behalf of the home health agency and must not be subjected to discrimination or reprisal for doing so.
- Place a complaint with the state's home care hotline regarding treatment or care furnished by a home health agency.
- A fair hearing for any individual to whom any service has been denied, reduced, or terminated, or who is otherwise aggrieved by agency action. The fair hearing procedure shall be set forth by the agency as appropriate to the unique patient situation (i.e., funding source, level of care, diagnosis).
- Receive information about the services covered under the Medicare Home Health benefit and any other carrier.

- Be informed about the care, as ordered by their attending physician, to be furnished and of any changes in the care to be furnished as follows:

The home health agency shall advise the patient in advance of the:

- Disciplines that will furnish care; and
- Frequency of visits proposed to be furnished.

The patient has the right to participate in the planning of the care. The home health agency shall advise the patient in advance of the right to participate in planning the following:

- The care or treatment.
- Changes in the care or treatment.

The home health agency shall advise the patient of any change in the plan of care, including reasonable discharge notice. *(We will give the patient, his or her legal representative or other individual responsible for the patient's care at least a five (5) calendar days' notice before services are stopped, except under the situations outlined in the Discharge, Transfer and Referral section of booklet.)*

Expect confidentiality of all records, communications and personal information related to the patient's care, in accordance with HIPAA regulations, Federal and State Laws or third party payment contractors, and to obtain a paper copy of the agency's "Notice of Privacy Practice."

Be advised of the agency's policy and procedure regarding disclosure of the patient's clinical records.

The patient has the right to be as follows:

- Free from verbal, physical and psychological abuse.
- Treated with dignity.

To have the home health agency:

Investigate complaints made by a patient or the patient's family or legal representative regarding either of the following:

- Treatment or care that is (or fails to be) furnished.
- The lack of respect for the patient's property by anyone furnishing services on behalf of the home health agency.

Document both the existence of the complaint and the resolution of the complaint.

The home health agency shall make available to the patient upon request, a written notice in advance of furnishing care to the patient or during the initial evaluation visit before the initiation of treatment, a listing of all individuals or other legal entities who have an ownership or controlling interest in the agency as defined in 42 CFR 420.201, 42 CFR 420.202, and 42 CFR 420.206, in effect on July 1, 2005.

The home health agency must inform the patient, in advance of care, its policies on advance directives, including a description of applicable state law. The home health agency may furnish advance directives information to a patient at the time of the first home visit, as long as the information is furnished before care is provided.

**THE PATIENT ALSO HAS THE RIGHT TO:**

- Receive information on state-required universal precautions.
- Have a relationship with our staff based on honesty and ethical standard of conduct. To have ethical issues addressed, and inform the patient of any financial benefit we receive if we refer the patient to another organization, service, individual or other reciprocal relationship.
- Be free from mistreatment, neglect, sexual abuse, including injuries of an unknown source and misappropriation of your property (exploitation). All verified violations will be reported to the appropriate state/local authorities (e.g., state survey and certification agency) and ACHC within five (5) working days of becoming aware of the violation.
- Be treated with respect and consideration; recognition of your individuality; and to have cultural, psychosocial, spiritual and personal values, beliefs and individual preferences respected by all agency staff. The patient will not be discriminated against based on social status, political belief, sexual preference, race, color, religion, national origin, age, sex, disability, diagnosis/infectious diseases, ability to pay or DNR status.
- Receive information in a manner the patient can understand.
- Voice grievances/complaints regarding treatment or care or recommend changes in policy, staff or service/care without fear of coercion, discrimination, restraint or interference and to expect no unreasonable interruption of care, treatment or services for doing so. The Administrator or on-call Supervisor can be contacted by calling the agency phone number at (317) 359-3444 or 1-855-300-6191.
- Be advised to call the State Consumer Hotline at 1-800-227-6334 which receives questions and complaints about the Medicare-certified and state-licensed home care agencies. The hotline is available from 8:00 a.m. to 4:30 p.m., Monday

through Friday (except holidays). After normal business hours, you can leave a message with the answering service.

- Choose and communicate with the patient's health care providers, including choosing an attending physician and to receive appropriate and professional care/service, without discrimination in accordance with physician orders.
- Be informed of the name(s) and responsibilities of staff members who are providing and responsible for the patient's care, treatment or services and be able to identify visiting staff members through proper identification.
- Be informed of the planned frequency of visits proposed in the plan of care.
- Be informed of anticipated outcomes of service/treatment/care and of any barriers in outcome achievement based on the current body of knowledge.
- Receive information about the services covered under the Medicare home health benefit.
- Be informed regarding the collection and reporting of OASIS information. OASIS information will not be disclosed except for legitimate purposes allowed by the Privacy Act.
- Have family involved in decision making as appropriate, concerning the patient's care, treatment and services, when approved by the patient or his or her surrogate decision maker and when allowed by law.
- Be fully informed of your responsibilities.
- Participate or refuse to participate in research, investigational or experimental services or clinical trials. The patient's access to care, treatment and services will not be affected if the patient refuses or discontinues participation in research.
- Have the patient's wishes regarding end-of-life care decisions addressed; have health care providers comply with advance directives in accordance with state laws; receive care without condition or discrimination based on the execution of advance directives; and to be informed if the agency cannot implement an advance directive on the basis of conscience.
- Accept, refuse or discontinue care/service and/or treatment within the confines of the law without fear of reprisal or discrimination after being fully informed of the consequences of the patient's action based on the current body of knowledge; however, should the patient refuse to comply with the plan of care and the patient's refusal threatens to compromise his or her ability to attain the goals as approved by the patient and/or our commitment to quality care, then we

or the patient's physician may be forced to discharge the patient from our services and refer the patient to another source of care.

- Respect for the patient's personal dignity, privacy and security during home care visits.
- Confidentiality of written, verbal and electronic protected health information about the patient's health, social and financial circumstances or about what takes place in the patient's home.
- Refuse filming or recording or revoke consent for filming or recording of care, treatment and services for purposes other than identification, diagnosis or treatment.
- Request access to the patient's PHI (Protected Health Information), as well as to request confidential communications, an accounting of disclosures or any other action to the patient's PHI.
- Request us to release information written about the patient only as required by law or his or her written authorization. Our Notice of Privacy Practices describes patient rights in detail.
- Be informed of the extent to which payment may be expected from Medicare or any other third party payor known to the home care agency before any care is delivered and of the charges that will not be covered; to be informed of the actual dollar amount of charges, if any, for which the patient may be liable; and to receive this information verbally and in writing, before care is initiated and within 30 calendar days of the date the home care provider becomes aware of any changes in charges.
- Have access, upon request, to all bills for services the patient has received regardless of whether the bills are paid out-of-pocket or by another party.
- Receive high quality, appropriate care without discrimination, in accordance with physician orders.
- Receive effective pain management and symptom control for conditions related to terminal illness(es).
- Be admitted for service only if the agency has the ability to provide safe, professional care at the level of intensity needed, and to receive reasonable continuity of care.
- Be informed of what to do in case of an emergency.

## PATIENT RESPONSIBILITIES

- The patient is responsible for providing complete and accurate information to the best of his or her knowledge about present and past illness(es), hospitalizations, pain, medications, allergies and other matters relating to the patient's health.
- The patient is responsible to sign or have his or her legal representative sign the required consents and releases.
- The patient is responsible for signing staff attendance sheets before staff departs their home and for verifying the date and time the services were received.
- The patient is responsible to sign a release when refusing medications, treatments, the recommended plan of care, or when refusing home health services.
- The patient will complete the appropriate physician face-to-face visit as required by regulation. If the patient fails to do so, he/she will be discharged from home health services.
- The patient is responsible for remaining under a doctor's care while receiving skilled agency services; and for seeing his or her physician on an annual basis (minimal criteria) or patient will be discharged from agency.
- The patient is responsible for notifying the agency of changes in his or her condition, medications, physician, treatment regimen, admission to health care facility and the patient's address.
- The patient is responsible for following the plan of care and instructions and accepting responsibility for the outcomes if the patient does not follow the care, treatment or service plan. Refusal to follow the home care plan could result in discharge from service.
- The patient is responsible for expressing any concerns regarding the course of treatment or the patient's ability to understand or comply with instructions.
- The patient is responsible for reporting pain. Discuss pain, pain relief options and questions, worries and concerns about pain medication with staff or appropriate medical personnel.
- The patient is responsible for being available at reasonable times for agency staff visits, and to inform the agency if the patient is not going to be available for a scheduled visit.

- The patient is responsible for providing the agency all insurance and financial information necessary for processing third party payment of charges for items and services provided by the agency and/or making arrangements for payments of the patient's bill. Notify the agency of insurance changes and tell the agency if the patient's Medicare or other insurance coverage changes or if the patient decides to enroll in a Medicare or private HMO (health maintenance organization) or hospice.
- The patient is responsible for promptly meeting the patient's financial obligations and responsibilities agreed upon with the agency.
- The patient/patient's caregiver is responsible for providing the agency with copies of advance directives, if such exist and informing us of changes in advance directives.
- The patient is responsible for notifying the agency of any problems, dissatisfaction or if the patient feels his or her rights are not being respected.
- The patient is responsible for providing a safe environment in which care can be given. Weapons must be locked up and out of sight during home health visits. Displaying a weapon will result in immediate discharge from service. Pets must be secured during home visits.
- The patient is responsible for notifying the agency if the patient is no longer homebound.
- The patient is responsible to treat agency staff with dignity and respect without discrimination as to race, color, religion, sex, age, gender, handicap or national origin as well as any equipment and/or supplies provided by the agency. The agency, with approval of the patient's physician, may refer the patient to another source of care if the patient's refusal to comply with the plan of care threatens to compromise our agency's commitment to safety and quality care.