

## **Specialty Pharmacy Services: PATIENT RIGHTS AND RESPONSIBILITIES**

## As a patient of Lower Lights Community Health Center you have the RIGHT to:

- Be fully informed in advance about care/service to be provided, including the disciplines that furnish care and the frequency of visits, as well as any modifications to the plan of care
- Be informed, in advance both orally and in writing, of care being provided, of the charges, including payment for care/service expected from third parties and any charges for which the patient will be responsible
- Receive information about the scope of services that the program will provide and specific limitations on those services
- Participate in the development and periodic revision of the plan of care
- Refuse care or treatment after the consequences of refusing care or treatment are fully presented
- Have one's property and person treated with respect, consideration, and recognition of patient dignity and individuality
- Be able to identify visiting personnel members through proper identification
- Be free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and misappropriation of patient property
- Voice grievances/complaints regarding treatment or care or lack of respect of property, or recommend changes in policy, personnel, or care/service without restraint, interference, coercion, discrimination, or reprisal
- Have grievances/complaints regarding treatment or care that is [or fails to be]
  furnished, or lack of respect of property investigated
- Confidentiality and privacy of all information contained in the patient record and of Protected Health Information (PHI)
- Be advised on the program's policies and procedures regarding the disclosure of clinical records
- Choose a healthcare provider, including an attending physician, if applicable
- Receive appropriate care without discrimination in accordance with physician's orders, if applicable
- Be informed of any financial benefits when referred to an organization
- Be fully informed of one's responsibilities



- Have personal health information shared with the Patient Management
  Program only in accordance with state and federal law
- Identify the program's staff members, including their job title, and to speak with a staff member's supervisor if requested
- Speak to a health professional
- Receive information about the Patient Management Program
- Decline participation, or disenroll, at any point in time

## As a patient of Lower Lights Community Health Center you have the RESPONSIBILITY to:

- Give accurate clinical/medical and contact information and to notify the Patient Management Program of changes in this information
- Notify the treating prescriber of their participation in the services provided by the pharmacy, such as the Patient Management Program
- Submit forms that are necessary to receive services
- Maintain any equipment provided
- Notify the program of any concerns about the care or services provided