

Community Health Centers, Inc. 110 S Woodland St Winter Garden, FL 34787 (407) 905-8827 (352) 314-7400 WWW.CHCFL.ORG

# SUMMARY OF THE FLORIDA PATIENT'S BILL OF RIGHTS AND RESPONSIBILITIES

Florida 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 this law from your health care provider or health care facility.

## Patient Rights: 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.
- A prompt and reasonable response to questions and requests.
- Retain and use personal clothing or possessions as space permits, unless for him/her to do so would infringe upon the right of another patient or is medically or programmatically contradicted for documented medical safety, or programmatic reasons.
- Know who is providing medical services and who is responsible for his or her care.
- Know what patient support services are available, including whether an interpreter is available if he or she does not speak English.
- Know what rules and regulations apply to his or her conduct.
- Be given by the health care provider information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis.
- Refuse treatment, except as otherwise provided by law.
- Be given, upon request, full information and necessary counseling on the availability of know financial resources for his or her care.
- 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.
- Receive, upon request, prior to treatment, a reasonable estimate of charges for medical care.
- Receive a copy of reasonably clear and understandable, itemized bill and, upon request, to have charges explained.
- Impartial access to medical treatment or accommodations, regardless of race, national origin, religion, physical handicap, or source of payment.
- Treatment for any emergency medical condition that will deteriorate from failure to provide treatment.
- 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.
- 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.
- Bring any person 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 cannot be reasonably accommodated by the facility.
- Appropriate assessment and management of your pain.
- Speak to a manager if you have any issues or concerns with your health care and treatment rendered, or any safety concerns about your health care environment.
- Complete a complaint form if you perceive your care and treatment as not meeting your expectations, or if you feel that you have not been treated with dignity and respect. Your complaint will be investigated and you will be contacted by a management representative for resolution.

## Patient Responsibilities: A patient is responsible for...

- Providing to the heath 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.
- Reporting unexpected changes in his or her condition to the health care provider.
- Reporting to the health care provider whether he or she comprehends a contemplated course of action and what is expected of him or her.
- Following the treatment plan recommended by the health care provider.
- 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.
- His or her actions if he or she refuses treatment or does not follow the health care provider's instructions.
- Assuring that the financial obligations of his or her health care are fulfilled as promptly as possible.
- Following health care facility rules and regulations affecting patient care and conduct.

## Filing Complaints

If you have a complaint, call the Medical Quality Assurance, Consumer Services office at 1.888.419.3456 or write to the address below. You may call 1.888.419.3456 to check the status of complaints.

## **Agency for Health Care Administration**

Medical Quality Assurance Consumer Services 2727 Mahan Drive Tallahassee, FL 32310

### **Advanced Directives**

You have the right to receive information to assist you in preparing a document called an "advance directive". Advance directives allow you to document decisions you have made about your medical care in the event you ever become mentally or physically unable to choose or communicate your wishes.

#### Community Health Centers does not honor Advanced Directives.

However, if a patient has Advanced Directives, Community Health Centers will include this information in the patient's Health Record and the information will be included in any appropriate record releases as per patient's signed consent and approval regarding releases of information. If you have Advanced Directives and wish to have this information included in your health record, please notify a staff member and they will assist you.