

# **PHC Patient Rights**

Your Rights. Your Responsibilities. Our Responsibilities.

#### **Patient Rights**

You have the right to:

Safe, inclusive, and respectful care that enables dignity and independence.



- Participate in and make informed decisions of care & treatment.
- Share your needs and preference for the visit and your care.
- Interpretive services if you are hearing impaired or do not speak English at no charge.
- Choose whom you want to tell about your care and/or condition. In addition, decide if you want them to be able to discuss with your care team directly.
- File a complaint, grievance, or concern with PHC without affecting the quality or delivery of your care.



- Know the names and roles of the people involved in your care, your Care Team.
- Discuss and receive information about proposed treatments or procedures to give informed consent.
- Receive information and explanations regarding the completion of advanced directives.
- That your personal privacy, care plans and/or treatment are being handled in a discreet and confidential manner.

## If you have concerns regarding safety, breach of confidentiality, and/or quality of care

please speak to one of our staff members or ask for a complaint/grievance form. You may also ask to speak with the department manager or designee. Should you find that any concerns or complaint goes unresolved you may contact the Partnership Health Center Compliance Officer.



#### **Patient Responsibilities**

You have the responsibility to:



- Actively participate in your health care decisions.
- Accept what happens if you do not follow the care plan the provider has recommended.
- Provide complete and accurate report of history, present complaints, medications and other matters relating to your medical needs.
- Tell us which friends, family, or care givers you want us to share information with about your care.
- Share feedback and suggestions that help us provide you the best care possible.



- And thoughtful of other patients and visitors in order to maintain a safe and healing environment.
- Of your care team and other patient's time; allow two business days for response to non-emergent needs and cancel or reschedule appointments you cannot keep in a timely manner.
- Understand that abusive, inappropriate, aggressive, threatening or disrespectful behavior will not be tolerated. Such behavior may result in a suspension of services, up to and including termination of receiving future services at any PHC location
- Follow all clinic rules including but not limited to cooperation in your care and treatment of all others with curtsey and respect.



- For assistance if you are in need of additional language support services
- Questions and tell us when you do not understand a treatment or decision we are considering.
- To connect with a billing specialist if you cannot pay your PHC Bills or Balance for services.
- Questions if you do not understand our Privacy Practices.

### Our Responsibilities

We will/are:

Ensure safe, respectful, and inclusive care for all where concerns, complaints, and/or grievances can be voiced without fear of retaliation by Partnership Health Center or its employees.



- Information and discuss your care options and respect your right to make informed decisions.
- Provide a clear and itemized bill with further explanation upon request regardless of source of payment.
- Once informed of any financial difficulties or inability to pay, we will connect you with a billing specialist to discuss available services to reduce financial strain.



- Required by the HIPAA Privacy Rule to maintain the privacy and security of your protected health information while you are a patient at PHC and for seven years after. See Partnership Health Center's Notice of Privacy Practices.
- NOT release you confidential information to others without your specific written approval unless ordered/required by law.
- Let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- Review concerns, complaints, or grievances in a timely manner in order to address all feedback with the utmost care and respect.

#### **Partnership Health Center**

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