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| **Patient Rights and Responsibilities** |

**PATIENT RIGHTS**

**Information Disclosure**

You have the right to accurate and easily understood information about your health plan, health care professionals, and health care facilities. If you speak another language, have a physical or mental disability, or just don’t understand something, assistance will be provided so you can make informed health care decisions.

**Choice of Providers and Plans**

You have the right to a choice of health care providers and we will do our best to honor such requests. We are committed to providing you with access to appropriate, high quality health care.

**Access to Emergency Services**

If you have severe pain, an injury, or sudden illness that convinces you that your health is in serious jeopardy, you have the right to receive screening and stabilization emergency services whenever and wherever needed, without prior authorization or financial penalty.

**Participation in Treatment Decisions**

You have the right to know your treatment options and we encourage you to participate in decisions about your care. Parents, guardians, family members, or other individuals that you designate can participate in your care decisions at your request and/or represent you if you cannot make your own decision.

**Respect and Nondiscrimination**

You have a right to considerate, respectful and nondiscriminatory care from your doctors, health plan representatives and other health care providers. Unity Care NW complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. UCNW does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. For more information, see UCNW’s *Nondiscrimination Notice and Language Access Services* handout.

**Confidentiality of Health Information**

You have the right to talk in confidence with health care providers and to have your health care information protected. You also have the right to review and for a fee, receive a copy of your own health record. You may request to amend your record if it is not accurate, relevant or complete. We will not disclose your record to others, except as described in our Notice of Privacy Practices or required by law. You may get more information about your rights pertaining to your health record by contacting our Privacy Office at (360) 788-2663.

**Complaints and Appeals**

You have the right to a fair, fast, and objective review of any complaint you have against your health plan, providers, hospitals or other health care personnel. This includes complaints about waiting times, operating hours, the conduct of health care personnel, and the adequacy of health care facilities. To make a complaint or appeal, please call (360) 676-6177.

**PATIENT RESPONSIBILITIES**

**Payment**

Unity Care Northwest (UCNW) will bill Medicaid, Medicare, CHIP, Community Health Plan of Washington (CHPW), Molina, and most other insurance companies. Patients will be billed in the event their insurance company does not pay all or part of the charges. Patients should bring their insurance card to each visit.

For patients who do not have insurance, UCNW has staff that can help you enroll in plans for which you may be eligible. Additionally, we offer a Sliding Fee Discount Program that provides discounts based on household income and family size to ensure no one will be denied access to services due to inability to pay or method of payment. Please inquire at the front desk if you are interested in either of these options.

Payment is expected at the time of service. If you are unable to pay the total amount of your adjusted charge at the time of service, you will need to set up a payment plan with our billing department.

**Appointment Cancellations and “No Shows”**

If you are unable to keep a scheduled appointment in the future, you are required to call us 24 hours in advance to cancel your appointment. If you call to cancel the day of your appointment, don’t call to cancel, or don’t show up for your appointment, it is considered a “no-show.” Multiple missed appointments or “no shows” may result in disciplinary action, including being placed on a “Standby Basis” for future visits, or in some cases, dismissal from our health care practice.

**Patient Follow Through**

We believe individual patient actions are an important part of the healing process. When you are given instructions (such as prescription usage, home health care treatments, etc.), we ask that you follow them. If you have any questions or concerns regarding instructions, please contact us. Repeated noncompliance with your care team’s instructions may lead to a decision to discontinue your health care services.

**Treatment of Staff and Patient Dismissal Policy**

We are committed to providing high-quality care in an environment that maintains the integrity and safety of our patients and staff. To do that, we need and expect your cooperation. You are responsible for treating UCNW staff,fellow patients, and facilities with courtesy and respect. In the absence of such behavior, we may determine that you would be better served by another health care practice.

Patients may be discharged for:

* Abusive or disruptive behavior, including threats or vulgar language
* Forging prescriptions or getting prescriptions under false pretenses
* Violating an agreed-upon provider-patient care plan or refusing to follow a care plan that is recommended for patient safety
* Repeatedly missing or canceling appointments with less than 24 hours notice

Generally, a patient will receive a warning and be notified before being dismissed from care. However, in the case of physical abuse, threatening behavior, violation of a provider-patient medication contract, or forgery, the dismissal may occur without warning.