Patient Bill of Rights

Healthcare patients have a right to be notified in writing of their rights and obligations before care/ service is provided. Healthcare providers have an obligation to protect and promote the rights of their patients to care, treatment and services within their capability and mission, and in compliance with applicable laws, regulations and standards, including the following rights.

You Have the Right to:

- Be fully informed in advance about services/care to be provided, including the company representatives that provide care/services, and the frequency of care as well as any modifications to the service/care plan.
- Be treated, and have your property treated, with dignity, courtesy and respect, recognizing that each person is a unique individual.
- Be able to identify company representatives through name badge and job title and to speak with the staff member's supervisor if requested.
- Choose a healthcare provider.
- Receive information about the scope of care/services that are provided through Gentry Health Services directly or through contractual arrangements, as well as any limitations to the company's care/service capabilities.
- Reasonable coordination and continuity of services from the referral source to Gentry Health Services, timely response when care, treatment, services and/ or equipment is needed or requested and to be informed in a timely manner of impending discharge.
- Receive in advance of care/services being provided, complete verbal and written explanations of charges for care, treatment, services and equipment, including the extent to which payment may be expected from Medicare, Medicaid, or any other third party payer, charges for which you may be responsible, and an explanation of all forms you are requested to sign.
- Receive quality medications, supplies and services that meet or exceed professional and industry standards regardless of race, religion, political belief, sex, social or economic status, age, disease process, or disability in accordance with physician orders.
- Participate in decisions concerning the nature and purpose of any technical procedure that will be performed and who will perform it, the possible alternatives and/or risks involved and your right to refuse all or part of the services and to be informed of expected consequences of any such action based on the current body of knowledge.
- Confidentiality and privacy of all the information contained in your records and of Protected Health Information (except as otherwise provided for by law or third-party payer contracts) and to review and even challenge those records and to have your records corrected for accuracy.
- Receive information about to whom and when your personal health information was disclosed, as permitted under applicable law and as specified in the company's policies and procedures.
- Express dissatisfaction/concerns/complaints about any care/treatment or service, lack of respect of property and to suggest changes in policy, staff or care/ services without discrimination, restraint, reprisal, coercion, or unreasonable i interruption of care/services.
- Have concerns/complaints/dissatisfaction about services that are (or fail to be) furnished, or lack of respect of property investigated in a timely manner.
- Be informed of any financial benefits when referred to an organization.
- Be advised of any change in the plan of service before the change is made.
- Participate in the development and periodic revision of the plan of care/service.

- Have personal health information shared only in accordance with state and federal law.
- Speak to a health professional
- Obtain program staff members' name and job title and speak with a supervisor if requested
- Receive information in a manner, format and/or language that you understand.
- Receive information about the patient management program and decline participation, or disenroll, at any point and time
- Have family members, as appropriate and as allowed by law, with your permission or the permission of your surrogate decision maker, involved in care, treatment, and/or service decisions.
- Be fully informed of your responsibilities.

Patient Responsibilities:

- Adhere to the plan of treatment or service established by your physician.
- Adhere to the company's policies and procedures.
- Participate in the development of an effective plan of care/treatment/services.
- Provide, to the best of your knowledge, accurate and complete medical and personal information necessary to plan and provide care/services.
- Give accurate clinical and contact information and provide notification when there is a change
- Notify treating prescriber of their participation in patient management program
- Ask questions about your care, treatment and/or services, or to have clarified any instructions provided by company representatives.
- Communicate any information, concerns and/or questions related to perceived risks in your services, and unexpected changes in your condition.
- Be available at the time deliveries are made and notify the company if you are going to be unavailable.
- Treat company personnel with respect and dignity without discrimination as to color, religion, sex, or national or ethnic origin.
- Care for and safely use medications, supplies and/or equipment, according to instructions provided, for the purpose it was prescribed and only for/on the individual for whom it was prescribed.
- Communicate any concerns about your/caregiver's/family member's ability to follow instructions or use the equipment provided.
- You are responsible for prompt settlement in full of your accounts unless prior arrangements have been approved by company administration. The company should be notified of any changes in your physical condition, physician's prescription or insurance coverage. Notify the company immediately of any address or telephone changes whether temporary or permanent.

Patient Complaint Procedure:

- You have the right and responsibility to express concerns, dissatisfaction or make complaints about services you do or do not receive without fear of reprisal, discrimination or unreasonable interruption of services. The company corporate office telephone number is 1-844-443-6879. When you call, ask to speak with the CEO/his designee during regular business hours or the company representative on call, if you are calling outside of regular business hours, including weekends and holidays.
- Gentry Health Services has a formal grievance procedure that ensures that your concerns/complaints shall be reviewed and an investigation started within five business days of receipt of the concern/complaint. Every attempt shall be made to resolve all grievances within 14 days. You will be informed in writing of the resolution of the complaint/grievance. If more time is needed to resolve the concern/complaint, you will also be informed verbally and in writing.
- If you feel that Gentry Health Services has not properly resolved your concerns, you can also contact the State Board of Pharmacy in Ohio at 614-466-4143, the Accreditation Commission for Health Advocacy (ACHC) at 1-855-937-2242 or the Utilization Review Accreditation Commission (URAC) at 202-216-9100 during normal business hours for further assistance.