

# PATIENT RIGHTS

IT IS THE POLICY OF CGH-ENDOSCOPY DIVISION TO PROVIDE A COPY OF PATIENT RIGHTS AT THE TIME OF SCHEDULING PROCEDURES. PATIENT RIGHTS INFORMATION IS GIVEN TO SCHEDULED PATIENTS WITHIN A MINIMUM OF 24 HOURS PRIOR TO SCHEDULING. PATIENT ACKNOWLEDGMENT RECEIPT IS SIGNED AND BECOMES A PART OF THE PATIENT ENDOSCOPY ENCOUNTER. A COPY OF PATIENT RIGHTS IS AVAILABLE AND POSTED IN EACH ENDOSCOPY WAITING AREA.

## 1. Access to Care

Patients shall be accorded impartial access to treatment or accommodations as to his or her requests and needs for treatment or services that are within the practice's capacity, availability, its stated mission and applicable law and regulation, regardless of race, creed, sex, national origin, religion, disability/handicap, or source of payment for care.

## 2. Respect, Consideration and Dignity

Patients shall be treated with respect, dignity and consideration at all times and under all circumstances, with recognition of his or her personal dignity and his or her psychosocial, spiritual and cultural variables that influence the perceptions of illness.

## 3. Privacy

Patients shall be provided with appropriate privacy.

## 4. Confidentiality & Access to Records

Patient information and records are treated confidentially, and, except when required by law, patients are given the opportunity to approve or refuse their release. Patients also have the right to receive a copy of his/her medical records.

## 5. Personal Safety/Accommodations for Disabilities

The patient has the right to expect reasonable safety in the practice, and to expect a humane treatment environment that provides reasonable protection from harm. Further, patients have the right to expect the availability of provisions to reasonably accommodate disabled individuals.

## 6. Employee Identity/Right to Know

The patient, or his or her parent or legally designated representative, has the right to know the identity and professional status of individuals providing services to him or her and to know which physician or other practitioner is primarily responsible for his or her care. This includes the right to know of the existence of any professional relationship among individuals who are treating him or her, as well as the relationship of the practice to any other health care services or educational institution involved in his or her care. Participation by patients in clinical training programs, experimental research or in the gathering of data for research purposes is voluntary.

## 7. Information Regarding Medical Care

Patients are provided, to the degree known, complete information concerning their diagnosis, evaluation, treatment and prognosis. When it is medically inadvisable to give such information to a patient, the information is provided to a person designated by the patient or to a legally authorized person.

## 8. Participation in Decision-making/Consent

Patients are given the opportunity to participate in decisions involving their health care, except when such participation is contraindicated for medical reasons. The patient, or his or her parent or legally designated representative, has the right to the information necessary to enable him or her, in collaboration with the health care provider, to make treatment decisions involving his or her health care that reflect his or her wishes. To the degree possible, this should be based on a clear, concise explanation of his or her condition and of all proposed technical side effects, problems related to recuperation and probability of success. The patient should not be subjected to any procedure without voluntary, competent and understanding consent by the individual or that of his or her parent or legally designated representative. Where a medically significant need for care or treatment exists, the patient or his or her parent or legally designated representative shall be so informed. The patient has the right to refuse participation in any experimental research.

## **9. Accept/Reject Proposed Treatment**

The patient, or his or her parent or legally designated representative, has the right to accept medical care or to refuse treatment to the extent permitted by law, and be informed of the medical consequences of such refusal. When refusal of treatment by the patient or his or her parent or legally designated representative prevents the provision of appropriate care in accordance with ethical and professional standards, the relationship with the patient may be terminated upon reasonable notice.

## **10. Transfer**

Patients have the right to change physicians inside or outside CGH-Endoscopy Division.

## **11. Payment for Services**

The patient or his or her parent or legally designated representative has the right to request and receive an itemized and detailed explanation of his/her bill for services rendered. Patients shall be provided with a complete explanation of his/her financial obligations prior to treatment.

## **12. Registering of a Complaint**

Patients may submit a complaint regarding care or service received at CGH-Endoscopy Division verbally or in writing, without fear of retaliation or discrimination.

## **13. Policies and Procedures**

The patient, or his or her parent or legally designated representative, should be informed of CGH-Endoscopy Division's policies and procedures applicable to his or her conduct as a patient. Patients are entitled to information about the mechanism for the initiation, review and resolution of patient grievances and the address of protective and regulatory agencies.

## **14. Ownership of CGH- Endoscopy**

CGH-Endoscopy Division is owned in its entirety by all member physicians of Charlotte Gastroenterology & Hepatology, NPI # 1730100801. Each physician's ownership percentage is equal to 6.67%.

## **15. Credentialing of Health Care Providers & Malpractice Insurance Coverage**

All physicians and other licensed health care professionals who are employed by or contracted with CGH-Endoscopy Division and who provide medical care to CGH-Endoscopy Division patients have been credentialed by CGH-Endoscopy Division, and CGH-Endoscopy Division's contracted health plans pursuant to applicable NCQA standards and CGH-Endoscopy Division policies and procedures. All CGH-Endoscopy Division physicians and nurses (and other licensed personnel) have malpractice insurance coverage.

## **16. Complaints and Concerns**

Patients have the right to contact the below agencies with complaints or concerns:

CGH- Endoscopy Division -13808 Professional Center Drive – Huntersville NC 28078

Kathy J Sammis, CEO – 704-377-4009

NC Division of Health Regulation – 2701 Mail Service center – Raleigh, NC 27699

Medicare Beneficiary Ombudsman [www.medicare.gov/ombudsman/resources/asp](http://www.medicare.gov/ombudsman/resources/asp)

[www.charlottegastro.com](http://www.charlottegastro.com)