

TALLAHASSEE OUTPATIENT SURGERY CENTER

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 when 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. A summary of your rights and responsibilities follows:

- ❖ 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 patient has the right to a prompt and reasonable response to questions and request.
- ❖ A patient has the right to know who is providing medical services and who is responsible for his or her care.
- ❖ A patient has the right to know what patient support services are available, including whether an interpreter is available or if he or she does not speak English.
- ❖ A patient has the right to know what rules and regulations apply to his or her conduct.
- ❖ A patient has the right to be given by his health care provider information concerning diagnosis, planned course of treatment, alternatives, risk and prognosis.
- ❖ A patient has the right to refuse treatment, except as otherwise provided by law.
- ❖ A patient has the right to be given, upon request, full information as necessary counseling on the availability of known financial resources for his or her care.
- ❖ A patient who is eligible for Medicare has the right to know, up front and in advance of treatment, whether the health care provider or health facility accepts the Medicare assignment rate.
- ❖ A patient has the right to receive, upon request, prior to treatment, a reasonable estimate of charges for medical care.
- ❖ A patient has the right to receive a copy of a reasonably clear and understandable, itemized bill and, upon request, to have charges explained.
- ❖ A patient has the right to impartial access to medical treatment or accommodations, regardless of race, national origin, religion, physical handicap, or source of payment.
- ❖ A patient has the right to treatment for an emergency medical treatment that will deteriorate from failure to provide treatment.
- ❖ A patient has the right to 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.
- ❖ A patient has the right to express grievances regarding 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.
- ❖ A patient is responsible for providing to the health 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.
- ❖ A patient is responsible for 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.
- ❖ A patient is responsible for his or her actions if he or she refuses treatment or does not follow the health care provider's instructions.
- ❖ A patient is responsible for assuring that the financial obligations of his or her health care are fulfilled as promptly as possible.
- ❖ A patient is responsible for following health care and facility rules and regulations affecting patient care and conduct.

Your physician ☐ does ☐ does not have limited ownership in this facility.

FILING COMPLAINTS

If you have a complaint against a hospital or ambulatory surgical center, call the Consumer Assistance Unit at 1-888-419-3456 (Press 1) or write to the address listed below.

AGENCY FOR HEALTH CARE ADMINISTRATION
CONSUMER ASSISTANCE UNIT
2727 MAHAN DRIVE / BLD. 1
TALLAHASSEE, FL 32308

If you have a complaint against a health care professional and want to receive a complaint form, call the Consumer Services Unit at 1-888-419-3456 (Press 2) or write to the address listed below.

AGENCY FOR HEALTH CARE ADMINISTRATION
CONSUMER ASSISTANCE UNIT
P.O. BOX 14000
TALLAHASSEE, FL 32308

Website for Medicare beneficiary Ombudsman www.cms.hhs.gov/center/ombudsman.asp