

## Eastern Plains Medical Clinic of Calhan

560 Crystola Street \* P.O. Box 275

Calhan, CO 80808

(719)347-0100 (o) \* (719)347-0851 (f)

### Patient Bill of Rights & Responsibilities

At Eastern Plains Medical Clinic, we believe that you are in control of your health and decisions about your health.

At our clinic, we have established a Patient Bill of Rights and Responsibilities. Knowing your rights and understanding your responsibilities as a patient will help you make better decisions about your healthcare.

This Bill of Rights and Responsibilities also describes your responsibilities as a patient. Patients who choose to disregard their rights and responsibilities agree to accept the consequences which could jeopardize our goal of providing you a superior patient experience and could impact your quality of care.

#### You have the right to:

- Be informed of your patient rights in advance of receiving or discontinuing care when possible.
- Receive care and/or treatment regardless of disability, national origin, culture, age, color, race, religion, gender identity, sexual orientation.
- Be informed of your health status/prognosis, including unanticipated outcomes of care and the treatment and services related to serious preventable adverse events.
- Participate in all areas of your care plan, treatment, care decisions, and follow-up plan.
- Be treated with respect and dignity.
- Experience confidentiality of all communication and clinical records related to your care.
- Be communicated with in a manner you can understand which takes into account your age, language, understanding and ability including, but not limited to, access to sign language interpreter services and communication aides, at no cost.
- Request medically necessary and appropriate care and treatment.
- Refuse any drug, test, procedure, or treatment and be informed of the medical consequences of such a decision.
- Have access to your medical records within a reasonable timeframe.
- Request and receive, prior to the initiation of non-emergent care or treatment, the charges (or estimate of charges) for routine, usual, and customary services and any co-payment, deductible, or non-covered charges, as well as the facility's general billing procedures including receipt and explanation of an itemized bill. This right is honored regardless of the source(s) of payment.
- Be informed of the clinic's complaint and grievance procedure and whom to contact to file a concern, complaint or grievance.

#### You have the responsibility to:

- Ask questions and promptly voice concerns.
- Give full and accurate information as it relates to your health, including prescription and non-prescription medications.

## **Eastern Plains Medical Clinic of Calhan**

560 Crystola Street \* P.O. Box 275

Calhan, CO 80808

(719)347-0100 (o) \* (719)347-0851 (f)

- Report changes in your condition or symptoms, including pain, and request assistance of a member of the health care team.
- Educate yourself. Learn about the medical tests that are being performed and understand your treatment plan.
- Follow your recommended treatment plan.
- Be considerate of other patients and staff.
- Follow clinic rules and regulations.
- Respect property that belongs to the clinic or others.
- Understand and honor financial obligations related to your care, including understanding your own insurance coverage.