

PATIENT'S BILL OF RIGHTS AND RESPONSIBILITIES

Minnetonka Ambulatory Center presents a Patient's Bill of Rights and Responsibilities with the expectation that observance of these rights will contribute to more effective patient care and greater satisfaction for the patient, their physician, and Minnetonka Ambulatory Surgery Center.

It is recognized that a personal relationship between the physician and the patient is essential for the provision of proper medical care. The traditional physician patient relationship takes on a new dimension when care is rendered within an organizational structure. Legal precedent has established that the institution itself also has a responsibility to the patient. It is in recognition of these factors that these rights are affirmed. The patient will be informed of these rights and the grievance procedure in advance of the date of the procedure in a manner and language that the patient or the patient's representative understands. These rights may be exercised without discrimination or reprisal.

1. The patient has the right to considerate and respectful care.
2. The patient has the right to obtain from their physician complete current information concerning their diagnosis, treatment, and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person on their behalf. They have the right to know, by name, the physician and his/her credentials, who is responsible for coordinating their care.
3. The patient has the right to receive from their physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Such information for informed consent should include but not necessarily be limited to the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information.
4. The patient has the right to be involved in care planning and treatment, being informed of their health status and prognosis.
5. The patient has the right to request or refuse treatment to the extent permitted by law and to be informed of the medical consequences of his action.
6. The patient has the right to every consideration of their privacy concerning their own care program. Case discussion, consultation, examination, treatment, and records management are confidential and should be conducted discreetly. Those not directly involved in their care must have the permission of the patient to be present. The surgery center will comply with all federal and state privacy protection laws and regulations.
7. The patient has a right to receive care in a safe setting in an environment that is free of abuse or harassment.
8. If a patient is adjudged to be incompetent, under state health and safety laws by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed under State law to act on the patient's behalf.
9. If a court has not determined a patient to be incompetent, any legal representative designated by the patient may exercise the patient's rights to the extent allowed by state law.
10. The patient has the right to change their physician if another qualified physician or dentist is available.
11. The patient has the right to expect that within its capacity the surgery center must make a reasonable response to the request of a patient for services. The surgery center must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically necessary, a patient may be transferred to another facility. The patient should receive a complete explanation of the need for transfer. The patient should be involved in the selection of the transfer facility.
12. The patient has the right to obtain information as to any relationship of the surgery center to other health care and educational institutions insofar as their care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating them.
13. The patient has the right to expect reasonable continuity of care. They have the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect the surgery center will provide a mechanism whereby they are informed by their physician or a delegate of the physician regarding the patient's continuing health care requirements following discharge.
14. The patient has the right to examine and receive an explanation of his/her bill regardless of source of payment.
15. The patient has the right to know what surgery center rules and regulations apply to his conduct as a patient.
16. It is the patient's responsibility to provide complete and accurate information to the best of his/her ability about his/her health, any medications, including over-the-counter products and dietary supplements, and any allergies or sensitivities.
17. It is the patient's responsibility to follow the instructions that are given by your healthcare providers and informing them if there will be any problems following these instructions.
18. It is the patient's responsibility to report any changes in health status to your physician (for example, if you experience signs or symptoms that are not expected or described in the discharge instructions given by your healthcare providers).
19. It is the patient's responsibility to assure that financial obligations for your healthcare are satisfied.
20. It is the patient's responsibility to provide a responsible adult to transport him/her home from the facility and remain with him/her for 24 hours, if required by his physician.
21. It is the patient's responsibility to be respectful of all health care providers and staff, as well as other patients and their families.
22. It is the patient's responsibility to inform the provider about any living will, medical power of attorney, or other directive that could affect his/her care.

Minnetonka Ambulatory Surgery Center (ASC) is certified by the Centers of Medicare and Medicaid Services. Additional Surgery Center patient's rights follow:

§416.50 Condition for Coverage — Patient Rights

The ASC must inform the patient or the patient's representative or surrogate of the patient's rights, and must protect and promote the exercise of these rights, as set forth in this section. The ASC must also post the written notice of patient rights in a place or places within the ASC likely to be noticed by patients waiting for treatment or by the patient's representative or surrogate, if applicable.

§416.50(a) Standard: Notice of Rights

An ASC must, prior to the start of the surgical procedure, provide the patient, or the patient's representative, or the patient's surrogate with verbal and written notice of the patient's rights in a language and manner that ensures the patient, the representative, or the surrogate understand all of the patient's rights as set forth in this section. The ASC's notice of rights must include the address and telephone number of the State agency to which patients may report complaints, as well as Website for the Office of the Medicare Beneficiary Ombudsman.

§416.50(b) Standard: Disclosure of physician financial interest or ownership

The ASC must disclose, in accordance with 42 CFR Part 420, and where applicable, provide a list of physicians who have financial interest or ownership in the ASC facility. Disclosure of information must be in writing.

1. Minnetonka Ambulatory Surgery Center is partially owned by physicians and meets the federal definition of a physician owned ASC as specified in CMS ASC Conditions for Coverage 416.50.
2. You have the right to choose the provider of your health care services. Therefore, you have the option to use a health care facility other than Minnetonka Ambulatory Surgery Center.
3. You will not be treated differently by your physician if you choose to use a different facility. If desired, your physician can provide information about alternative providers.

§416.50(c) Advance Directives

The ASC must comply with the following requirements:

1. Provide the patient or, as appropriate, the patient's representative with written information concerning its policies on advance directives, including a description of applicable State health and safety laws and, if requested, official State advance directive forms.
2. Inform the patient or, as appropriate, the patient's representative of the patient's rights to make informed decisions regarding the patient's care.
3. Document in a prominent part of the patient's medical record, whether or not the individual has executed an advance directive.

§416.50(d) Standard: Submission and investigation of grievances

The ASC must establish a grievance procedure for documenting the existence, submission, investigation, and disposition of a patient's written or verbal grievance to the ASC.

1. All alleged violations/grievances relating, but not limited to, mistreatment, neglect, verbal, mental, sexual, or physical abuse, must be fully documented.
2. All allegations must be immediately reported to a person in authority in the ASC.
3. Only substantiated allegations must be reported to the State authority or the local authority, or both.
4. The grievance process must specify timeframes for review of the grievance and the provisions of a response.
5. The ASC, in responding to the grievance, must investigate all grievances made by a patient, the patient's representative, or the patient's surrogate regarding treatment or care that is (or fails to be) furnished.
6. The ASC must document how the grievance was addressed, as well as provide the patient, the patient's representative, or the patient's surrogate with written notice of its decision. The decision must contain the name of an ASC contact person, the steps taken to investigate the grievance, the result of the grievance process and the date the grievance process was completed.

§416.50(e) Standard: Exercise of rights and respect for property and person.

1. The patient has the right to the following:
 - a. Be free from any act of discrimination or reprisal.
 - b. Voice grievances regarding treatment or care that is (or fails to be) provided.
 - c. Be fully informed about a treatment or procedure and the expected outcome before it is performed.
2. If a patient is adjudged incompetent under applicable State laws by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed under State law to act on the patient's behalf.
3. If a State court has not adjudged a patient incompetent, any legal representative or surrogate designated by the patient in accordance with State law may exercise the patient's rights to the extent allowed by State law.

§416.50(f) Standard: Privacy and Safety.

The patient has the right to:

1. Personal privacy.
2. Receive care in a safe setting.
3. Be free from all forms of abuse or harassment.

Grievance Procedure:

- A patient or their representative has the right to file a grievance. These grievances may address care or treatment that is (or fails to be) furnished.
- A patient or their representative that would like to file a grievance can do so by forwarding a written or oral explanation of the grievance (including patient name, address and date of service) provided to:

Compliance Officer and/or Minnesota Department of Health
Children's Minnesota Office of Health Facility Complaints
5901 Lincoln Drive PO Box 64970
Edina, MN 55436 85 E 7th Place, Suite 300
952-992-5463 St. Paul, MN 55104
800-369-7994

You may also contact the office of the Medicare Beneficiary Ombudsman at www.cms.gov/Center/Special-Topic/Ombudsman-Center.html.

Upon receipt of patient's grievance at the surgery center, an investigation will be conducted and the patient will generally be sent a written response within 30 days. Your written response will contain how the grievance was addressed; the contact person at the surgery center, the steps taken to investigate the grievance, the results of the grievance investigation and the date the grievance process was completed.