

race, color, national origin, religion, sex, gender identity, sexual orientation, or disability; and

- To have his/her visitors enjoy full and equal visitation privileges consistent with patient preferences.

HOSPITAL CHARGES

- To access the cost, itemized when possible, of services rendered within a reasonable time frame regardless of the source of payment for his/her care.
- To be informed of the source of the hospital's reimbursement for his/her services and any limitations which may be placed on his/her care.
- To be informed of available payment methods including, but not limited to private insurance carrier, government insurance carrier, cash, check, monthly payments, federal and state funding sources, and the MGH patient assistance program.
- To timely notice prior to termination of his/her eligibility for reimbursement by any third-party payer for the cost of his/her care.

HOSPITAL RULES AND REGULATIONS

- To be informed of the hospital rules and regulations applicable to his/her conduct as a patient. The patient has a right to know about hospital rules and regulations that affect his/her treatment.
- To know about hospital resources, such as patient representatives or ethics committees that can help him/her resolve any problems or questions.
- To ethical advice.
- To information about the hospital's mechanism for the initiation, review and resolution of patient complaints through grievance.

GRIEVANCE PROCEDURE

- To information about the hospital's mechanism for the initiation, review and resolution of patient complaints and/or grievances.
- To voice complaints about his or her care and to have those complaints reviewed, and when possible, resolved in a timely manner. The manager of the unit where the patient is located is to be contacted. If satisfaction is not obtained by speaking with the manager of the unit, Administration may be contacted for further review of the complaints. Phone contact can be made by calling the Hospital operator at 765-660-6000 and asking for the unit manager in the department where services were provided, or Administration.
- To file a complaint directly to the organizations separate from the hospital at any time regardless of whether he/she has first used the hospital's grievance process.

Indiana State Department of Health
Phone: 800-246-8909 (for both verbal and TTY access)

Mailing address:

Indiana State Department of Health
Healthcare Facility Compliant Program
2 North Meridian Street, 4B
Indianapolis, IN 46204

American Osteopathic Association Healthcare
Facilities Accreditation Program. Online address:
<http://www.hfap.org>.

Mailing address:
HFAP c/o Complaint Department
142 E. Ontario Street, 10th Floor
Chicago, IL 60611

Medicare patients may choose to go directly to the state Quality Improvement Organization for issues involving quality of care issues, coverage issues, and to appeal a premature discharge.

Mailing address:
KEPRO
5201 West Kennedy Blvd., Suite 900
Tampa, FL 33609
Phone: 855-408-8557. Fax: 844-834-7130
TTY: 855-843-4776

PATIENT RESPONSIBILITIES

Marion General Hospital also has the right to expect behavior on the part of patients and their relatives, visitors and friends, which, considering the nature of their illness is reasonable and responsible.

THE PATIENT OR, WHEN APPROPRIATE, THE PATIENT'S REPRESENTATIVE HAS THE FOLLOWING RESPONSIBILITIES:

PROVISION OF INFORMATION

- To ensure that the hospital has a copy of his/her advance directive if he/she has one.
- To provide, to the best of his/her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his/her health.
- To report unexpected changes in his/her condition to the responsible practitioner, including the presence of pain, when changes first occur, and on an ongoing basis.
- To report whether he/she clearly understands and comprehends a contemplated course of action or treatment, his/her diagnosis, his/her

plan of care including pain management, and what is expected of him/her.

COMPLIANCE WITH INSTRUCTIONS

- To follow the treatment plan recommended by the practitioner primarily responsible for his/her care. This may include following the instructions of nurses and allied health personnel as they carry out the coordinated plan of care, and abide by all applicable hospital rules and regulations.
- To keep all appointments for continued care, and when he/she is unable to do so for any reason, to notify the responsible practitioner or the hospital.
- To notify the responsible practitioner of any changes in his/her condition and to recognize the impact of his/her lifestyle on his/her health.

REFUSAL OF TREATMENT

- For his/her actions if he/she refuses treatment or does not follow the practitioner's instructions.

HOSPITAL CHARGES

- For assuring that the financial obligations of his/her health care are fulfilled as promptly as possible. This responsibility includes providing correct information necessary for insurance processing, making payment arrangements, and asking questions concerning his/her financial obligations.

HOSPITAL RULES AND REGULATIONS

- For following all hospital rules and regulations affecting patient care and conduct.

RESPECT AND CONSIDERATION

- To be considerate of the rights of other patients and hospital personnel and for assisting in the control of noise and the number of his/her visitors.
- To be respectful of other persons' property as well as the hospital's property.

PATIENT VALUABLES AND PERSONAL PROPERTY

- To understand the hospital will not assume the responsibility for property which may be lost or stolen. If it is impossible for the patient to leave his/her valuables at home or to send them home with members of his/her family, those items may be deposited in the hospital safe. Contact Protective Services at (765) 660-6000 to request this service. Any found items are turned in to Protective Services. If an item is lost, the patient may call (765) 660-6000 to identify his/her property.



MGH Patient Rights and Responsibilities



MGH Patient Rights and Responsibilities

Marion General Hospital recognizes that patients have a right to their independence of expression, decision, action, concern for personal dignity and human relationships during their hospitalization. It will be the prime responsibility of all employees to assure that these rights are preserved for their patients.

THE PATIENT OR, WHEN APPROPRIATE, THE PATIENT'S REPRESENTATIVE HAS THE FOLLOWING RIGHTS:

ACCESS TO CARE

Individuals shall be accorded impartial access to treatment, regardless of race, national origin, religion, sex, sexual orientation, gender identity, sex stereotyping, ethnicity, age or handicap, or sources of payment for care.

PLAN OF CARE

- To actively participate in the development, implementation, and revision of his/her plan of care, make informed decisions regarding his/her care, including the discontinuance of care and be informed of his/her health status

RESPECT AND DIGNITY

- To considerate, respectful care at all times and under all circumstances, with recognition of his/her personal dignity.
- To be free from all forms of abuse or harassment.

PRIVACY AND CONFIDENTIALITY

- To personal privacy and to refuse to talk with or see anyone not officially connected with the hospital or his/her care, or persons officially connected with the hospital but not directly involved in his/her care (including visitors).
- To wear appropriate personal clothing and religious, or other symbolic items, as long as they do not interfere with diagnostic procedures or treatment.
- To be interviewed and examined in a surrounding designed to assure reasonable visual and auditory privacy.
- To have a person of the same sex present during certain parts of a physical examination, treatment, or procedure performed by someone of the opposite sex.
- To not remain disrobed any longer than is required for accomplishing the medical purpose for which the patient was asked to disrobe.
- To expect that any discussion or consultation involving him/her will be conducted discreetly and that individuals not directly involved in his/her care will not be present without his/her permission. *
- To the confidentiality of his/her clinical records and to have his/her clinical records read only by individuals directly involved in his/her treatment or in the monitoring of its quality. Other individuals can read his/her clinical record only after his/her



written authorization or that of his/her authorized representative.

- * To expect all communications and other records pertaining to his/her care, including the source of payment for treatment, to be treated as confidential. *
- To request a transfer to another room if another patient or a visitor in the room is unreasonably disturbing him/her by undesirable actions.
- To be placed in protective privacy when considered necessary for personal safety.

** (Except as The Health Insurance Portability and Accountability Act of 1996 (HIPAA) Public Law 104-191, permits or requires.)*

PERSONAL SAFETY AND COMFORT

- To receive care in a safe setting, and expect reasonable safety insofar as the hospital practices and environment are concerned.
- To protective services if requested or needed.
- To be free from physical and mental abuse and corporal punishment.
- To be free from restraints or seclusion, of any form that are not medically necessary or are used as a means of coercion, discipline, convenience, or retaliation by staff. Restraint or seclusion may only be imposed to ensure the immediate physical safety of the patient, a staff member, or others and must be discontinued at the earliest possible time.
- To have his/her pain treated as effectively as possible which includes appropriate assessment and management of pain and a timely response to reports of pain.

IDENTITY

- To know the identity and professional status of any person providing his/her care/services.
- To know which physician or other practitioner is primarily responsible for his/her care.
- To know the reasons for any proposed change in the Professional Staff responsible for his/her care.
- To know of the relationship(s) of the hospital to other persons or organizations participating in the provision of his/her care.
- To have only voluntary participation in clinical training programs or in the gathering of data for research purposes.
- To know of any business relationships the hospital has that may influence his/her treatment or care.

INFORMATION

- To receive information in advance of furnishing or discontinuing patient care whenever possible concerning patient rights and responsibilities.
- To exercise his/her rights while receiving care or treatment in the hospital, or have a designated individual or a legally authorized individual (parent, legal guardian, person with medical power of attorney) exercise their rights when he/she is incapable of doing so without coercion, discrimination or retaliation.
- To obtain from the practitioner responsible for his/her care complete and current information concerning his/her diagnosis (to the degree known), treatment, and any known prognosis. When it is not medically advisable to give such information to the patient, the information should be made available to a legally authorized individual.
- To have information communicated in terms the patient can reasonably be expected to understand.
- To review his/her clinical records and to have the information explained, except when restricted by law.
- To access information contained in his/her clinical records within a reasonable time frame. The hospital must not frustrate the legitimate efforts of individuals to gain access to their medical records and must actively seek to meet these requests as quickly as its record keeping system permits.

COMMUNICATION

- To access people outside the Hospital by means of visitors and by verbal and written communications.
- To have a family member or representative of his/her choice and his/her physician or designee notified promptly of his/her admission to the hospital.
- To have access to language assistance services when the patient has limited English proficiency.

CONSENT

- To reasonable, informed participation in decisions involving his/her health care. To the degree possible, this should be based on a clear, concise explanation of his/her condition and of all proposed technical procedures, including the possibilities of any risk of mortality or serious side effects, problems related to recuperation, and probability of success.
- To not be subjected to any procedures without his/her voluntary, competent, and understanding consent or the consent of his/her legally authorized representative.
- To be informed when medically significant alternatives for care or treatment exist.
- To know who is responsible for authorizing and performing the procedures or treatment.
- To be fully informed of and to consent or refuse to participate in any unusual, experimental or research project without compromising his/her access to services. A

patient who declines to participate in research or experimentation is entitled to the most effective care that the hospital can otherwise provide.

- For his/her family to have informed consent for donation of organs and/or tissues.

CONSULTATION

- To consult with a specialist at his/her own request and expense.

REQUEST OR REFUSAL OF TREATMENT

- To request or refuse treatment. This must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate. The patient may refuse treatment to the extent permitted by law. If the patient refuses a recommended treatment, he/she will receive other available care. When refusal of treatment by the patient or his/her legally authorized representative prevents the provision of appropriate care in accordance with professional standards, the relationship with the patient may be terminated upon reasonable notice.

ADVANCE DIRECTIVES

- To formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives. These documents express his/her choices about future care, or name someone to decide if he/she cannot speak for themselves.
- To designate a health care decision maker.
- To timely information about any policy that may limit the hospital's ability to implement legally valid advance directives.
- To request assistance, if patient does not have advanced directives, in preparing advance directives and expect that such will be honored.

TRANSFER AND CONTINUITY OF CARE

- To know the reasons for his/her transfer either within or outside the hospital. A patient may not be transferred to another facility or organization unless he/she has received a complete explanation of the need for the transfer and of the alternatives to such a transfer and unless the transfer is acceptable to the other facility or organization.
- To reasonable continuity of care. The patient has the right to be informed by the practitioner responsible for his/her care, or his/her delegate, of any continuing health care requirements following discharge from the hospital.

VISITATION

- To be informed of his/her visitation rights and any clinical restriction or limitation on his/her rights;
- To be informed of the right to receive, subject to his/her consent, the visitors he/she designates, including, but not limited to, a spouse, domestic partner (including a same-sex domestic partner), another family member, or a friend, and the patient's right to withdraw or deny consent at any time;
- To visitation privileges that are not restricted, limited or otherwise denied on the basis of

