



Patient Rights and Responsibilities

Effective: February 2021

Form # COMP025 eng
Form Date: 2/09/21

You have Rights and Responsibilities with respect to the care and treatment you receive at Peak Vista Community Health Centers. These Rights and Responsibilities are set forth below.

You and your representatives have the right to:

- Seek care at Peak Vista Community Health Centers (PVCHC). Your payment may be based upon a sliding fee scale or other program eligibility.
- Considerate and respectful treatment, free from discrimination, regardless of race, ethnicity, gender, color, age, religious preference, national origin, disability, marital status, sexual orientation, political beliefs, or payer source, in a manner showing dignity and respect regarding your personal values and belief systems. *For further information on this policy, contact: Compliance Manager at 3205 N. Academy Blvd., Suite 130, Colorado Springs, CO 80917 or by calling (719) 344-6600.*
- Be provided with accessible and usable facilities and services for all patients.
- Have your property treated with respect.
- Know the name, profession and experience of staff caring for you, including the disclosure of any staff in training, students and/or residents.
- Assist in managing your health care.
- Be provided with answers to health questions.
- Have your health concerns listened to by your health care team.
- Coordinate your care through additional services and other medical experts, if necessary.
- Play an active role in your own health care.
- Receive relevant, current, and understandable information concerning diagnosis, treatment, and prognosis. Consent to treatment may be given by you or your legal representative.
- In order to give informed consent, you will be provided with an explanation to include:
 - Recommended treatments or procedures, in terms you understand.
 - The treatment alternatives available and the risks and benefits of each alternative, mortality risks, prognosis, serious side-effects, and the consequences if you decide not to undergo any treatment.
 - The nature of recovery, anticipated problems, or potential problems that may occur during recovery, and the anticipated length of recuperation.
- Participate in decisions regarding your care in a manner that is consistent with state and federal laws and regulations.
- Ask for another PVCHC provider's opinion or to ask that a new provider take charge of your case.
- Have all physical examinations, interviews, and discussions take place privately and to have all communications and records about your care handled securely and confidentially. If you feel that your health information has not been maintained securely or confidentially, you may report your concerns:

Compliance Manager: **(719) 344-6600**

Or you may send a letter to: Peak Vista Community Health Centers, ATTN: Compliance Manager, 3205 N. Academy Blvd., Suite 130, Colorado Springs, CO 80917

- Be informed about your treatment, diagnosis and prognosis, and to accept or refuse health care advice or treatment.
- Plan in advance for your health care and treatment, and to choose someone to make decisions for you, to the extent permitted by law, in case you become unable to make them for yourself.
- Be informed of any clinical experimentation or other research/educational projects affecting your treatment, and to refuse participation in such experimentation or research.
- Freedom from all forms of abuse, including mental, physical, sexual, verbal, and neglect or exploitation.
- Freedom from restraints of any form that are not medically necessary.
- Disclosure as to whether referrals are to providers in which PVCHC has a financial interest.
- Timely response to your reports of pain and to have a clinically appropriate pain relief plan included in your health care plan.
- Make an appointment by calling **(719) 632-5700**.
- When possible, be advised of changes to appointment, service, or plan of care prior to change being made.
- Access your health records in a manner consistent with state and federal laws. Contact our Medical Records Department **(719) 632-5700** Monday through Friday, 8 a.m. until 5 p.m.
- Examine and receive an explanation of your bill, regardless of the source of payment by contacting Patient Accounts **(719) 344-6444** Monday through Friday, 8 a.m. until 5 p.m.

You and your representatives have the responsibility to:

- Conduct yourself appropriately in a health care center or at any location a PVCHC team member is providing care. You may not verbally or physically abuse fellow patients, personnel or property.
- Keep your appointment at PVCHC, be at the specified location for appointments with PVCHC at the agreed upon date and time or notify PVCHC in advance to cancel or reschedule your appointment.
- Provide accurate proof of your financial situation and to meet program requirements.
- Pay your portion of charges at the time of service and any additional balances billed.
- Question your provider about anything you do not understand about your care.
- Give, to the best of your knowledge, accurate and complete information about health complaints, past illnesses, medications, hospitalization and other matters relating to health care.
- Follow the instructions given to you by your health care provider. You are responsible for the consequences of your own actions if you fail to follow these instructions, or if you refuse treatment.
- Tell your health care provider when you are in pain and participate in your pain relief plan.
- Talk openly with your health care team, such as discussing if you are having trouble sticking with your care plan and informing your team if your care plan is not working, so you can work together to make changes.
- Follow/respect the rules.
 - PVCHC is a Weapons-Free Environment. You are not allowed to bring weapons of any kind into a PVCHC facility or at any location a PVCHC team member is providing care.
 - PVCHC is a tobacco-free environment. You are not allowed to smoke, vape or chew tobacco on any PVCHC property. For any other location, you may not smoke, vape, or chew tobacco while a PVCHC team member is providing care.

- PVCHC does not allow patients to consume alcohol, marijuana, or other recreational or illicit drugs at any PVCHC facility or at any location a PVCHC team member is providing care.
- PVCHC does not allow patients or visitors to take any recordings, photographs, or video recordings at any PVCHC location at any time or at any other location while care is being provided by a Peak Vista team member unless pre-approved consent is obtained.
- Only service animals may be present while a PVCHC team member is providing care. Any animal that impedes care must be removed if requested by a PVCHC team member.
- Be an active team player in your own health care by asking questions when you do not understand information and instructions, sharing your past health care successes and challenges, informing your team of other health care professionals caring for you and telling your team how you feel about the care you are receiving from them.
- Take care of your health by following the health care plan you and your health care team have discussed. This means understanding how to follow the care plan and setting goals you can reach. Once you begin seeing results, you and your health care team can discuss adding new health goals.
- Notify your health care team by calling **(719) 632-5700** in advance to request special accommodations for language interpretation, reading, volume adjustment, larger print, etc. It is important to call in advance so appropriate arrangements can be made.
- Immediately inform your physician or staff that language interpretation is required in order for you to understand and provide informed consent regarding your care and treatment.

Grievance Process

You and your representative have the right to:

- Offer ideas, concerns or complaints about the health care received. Please ask for the Clinical Team Manager or take time to fill out a Patient Feedback Form.
- Voice a complaint to your healthcare providers and administrators without fear of reprisal or retaliation.
- Voice an Americans with Disabilities Act (ADA) complaint.
- Voice a complaint based on your rights to privacy and confidentiality.

You may contact:

- Clinical Team Manager or Director of Clinical Operations in the center with your ideas, concerns or complaints. We would like to help in solving issues for you in the center.
- Management Representative at **(719) 344-7105** to file a formal grievance/complaint.
- For ADA Complaints contact the Compliance Department at: **(719) 344-6600**.
- Risk Management by sending a letter to: Peak Vista Community Health Centers, ATTN: Risk Management, 3205 N. Academy Blvd., Suite 130, Colorado Springs, CO 80917.
- Colorado Medical or Dental Board: www.colorado.gov/dora or call **(800) 886-7675**.
- Department of Health and Human Services, Office for Civil Rights: www.hhs.gov/ocr or call **(800) 368-1019** or TDD **(800) 537-7697**.
- Colorado Department of Health Care Policy & Financing: www.colorado.gov/hcpf or call **(800) 221-3943** or TDD **(800) 659-2656**.
- Audiology: Pikes Peak Area Agency on Aging; 15 S 7th Street, Colorado Springs, CO 80915 or www.ppacg.org or **(719) 471-7080 ext. 103**.
 - State Contact: Division of Aging and Adult Services; 1575 Sherman, 10th Floor, Denver, CO 80203 **(303) 866-2800**