

## PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

### As a Client You Have the Right to:

- Know about the philosophy and characteristics of Accurate Rx Pharmacy and their Programs;
- Be fully informed in advance about the care/service to be provided, including the disciplines that furnish the care and the frequency of visits, as well as any modifications to the plan of care;
- Receive information about the scope of services that the organization will provide and specific limitations on those services;
- Be informed, both orally and in writing, in advance of care being provided, of the charges, including payment for care/service expected from third parties and any charges for which the client/patient will be responsible;
- Have *personal health information* shared with Accurate Rx Pharmacy employees and assigns only in accordance with state and federal law;
- Confidentiality and privacy of all information contained in the client/patient record and of Protected Health Information;
- Be advised on agency's policies and procedures regarding the disclosure of clinical records;
- Be able to identify personnel members through proper identification, including their job title;
- Speak with a staff member's supervisor if requested;
- Speak to a *health professional*;
- Choose a health care provider, including choosing an attending physician, if applicable;
- Receive appropriate care without discrimination in accordance with physician orders, if applicable;
- Participate in the development and periodic revision of the plan of care;
- Informed of client/patient rights under state law to formulate an Advanced Directive, if applicable;
- Have one's property/person treated with respect, consideration, and recognition of client/patient dignity and individuality;
- Free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and misappropriation of client/patient property;
- Voice grievances/complaints regarding treatment or care, lack of respect of property or recommend changes in policy, personnel, or care/service without restraint, interference, coercion, discrimination, or reprisal by calling the Accurate Rx Performance Improvement Coordinator at 888-335-4279. Accurate Rx must acknowledge the existence of the complaint made by a patient or caregiver within 5 business days and investigate the complaint and document a resolution within 14 business days of acknowledgement;
- Report complaints or ask questions of Accreditation Commission for Health Care, Inc. (ACHC) at 855-937-2242;
- Report complaints or ask questions regarding local Health Service Regulations by calling the MO Department of Health and Senior Services Bureau of Health Services Regulation at 573-751-6303 or by visiting [www.health.mo.gov/safety/healthservregs/complaints.php](http://www.health.mo.gov/safety/healthservregs/complaints.php) and in Illinois for Home Health Agency questions or complaints call 800-252-4343 (24 hours a day, 7 days a week);
- The right to have grievances/complaints regarding treatment or care that is (or fails to be) furnished, or lack of respect of property investigated;
- The right to decline participation, revoke consent, or dis-enroll at any point in time;
- The right to refuse care or treatment after the consequences of refusing care or treatment are fully presented;
- Be informed of any financial benefits when referred to an organization;
- The right to receive reasonable and timely administrative information regarding changes in, or termination of, Accurate Rx Pharmacy service or plans for transfer to another agency. You will be informed of any financial benefit to the referring agency;
- Be fully informed of one's responsibilities;

### As a Client You Have the Responsibility to:

- Submit any forms that are necessary to participate in the program, to the extent required by law;
- Provide Accurate Rx Pharmacy with accurate health (including your medical history) and contact information and notify Accurate Rx Pharmacy of any changes in this information;
- Maintain any equipment provided by Accurate Rx Pharmacy;
- Assist in developing and maintaining a safe environment;
- Provide Accurate Rx Pharmacy with requested insurance and financial information and to inform them when any changes occur to the same;
- Sign and return the required consents, delivery tickets, and releases for insurance billing and compliance regulations;
- Treat Accurate Rx personnel with respect and consideration;
- Inform Accurate Rx Pharmacy when you will be unable to keep an appointment;
- Notify the organization of any concerns about the care of services provided;
- Participate in, ask questions, and adhere to, the development and updates to your care plan; **and**
- Notify your treating *provider* of your participation in the Accurate Rx Pharmacy programs, if applicable.

**By signing below, I acknowledge that I have read and understand this Patient Bill of Rights and Responsibilities.**

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Signature of Patient/Signature of Parent or Guardian if Patient is less than 18 Years of Age

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Printed Name

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Date