



## UNIVERSITY HEALTH SERVICES *Tang Center*

### **PATIENT RIGHTS & RESPONSIBILITIES**

The staff at University Health Services (UHS) is pleased to work with you to keep you in optimal health. We would like your visits with our staff to be valuable, whether they are to learn about and maintain your health or to help you recover from illness or injury.

We encourage you to take an active role in managing your health. We can work together most effectively if you understand what to expect from us and what we expect from you. Here is a summary of your rights and responsibilities as a user of health services. If you would like more information about any of these points, please ask your provider or another UHS staff member.

#### **YOUR RIGHTS**

**As a health care consumer, you have the right to:**

**Choice of Service Providers** – Choose or change your provider from among the UHS staff of qualified health care professionals.

**Considerate and Respectful Care** – Have your individual dignity respected regardless of age, gender, race, ethnicity, national origin, culture, sexual orientation, class, physical ability, genetic information, position in the community, lifestyle or other personal attributes.

**Privacy** – Expect that your discussions, examinations and treatments will be conducted in a private, safe environment.

**Confidentiality** – Expect confidential treatment of all communications and records relating to you. Except as provided by law, your written permission must be obtained before information is given to anyone not directly connected with your care. Before you consent to a release of information, you may discuss what information will be released.

**Responsive Service** – Expect a timely response to any reasonable requests made for service. However, you do not have the right to insist on inappropriate or medically unnecessary treatment or services.

**Access to Your Records** – Have access to information contained in the records within a reasonable time frame, except in certain circumstances specified by law.

**Written Notice** – Receive a written “Notice of Privacy Practices” that explains how your protected health information will be used and disclosed.

**Interpreter Service** – Request the services of an interpreter if needed, at no cost to you.

**Know Your Fees** – Be informed of fees incurred during your visit and of payment policies.

**Understanding** – Be an active participant in decisions regarding your health. You have the right to understand, and to request information about, the following:

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## YOUR RIGHTS (continued)

- University Health Services policies
- The name and title of the person providing service to you
- Our assessment of your problem
- What tests are being recommended and why
- What treatment and/or medication is recommended and its side effects and significant risks
- Alternate courses of treatment or non-treatment, and the side effects and significant risks associated with each
- The prospects for resolution of your problem, and how this problem might be prevented in the future
- Your right to refuse participation in any research projects being conducted at UHS
- How to express concerns to the organization, either through UHS procedures or through campus resources such as the Student or Faculty/Staff Ombudsperson.

## YOUR RESPONSIBILITIES

**As a health care consumer, you have the responsibility to:**

**Answer Questions Fully** – To the best of your ability, provide accurate and complete information to your health care providers about any matters pertaining to your health, any medications (including over-the-counter products and dietary supplements) and any allergies or sensitivities. If you do not understand why certain information is necessary, please ask.

**Make Sure You Understand** – Ask your healthcare provider about anything you do not understand, such as a diagnosis, treatment plan, test or policy. Diagnosis and treatment are often very individualized. Your symptoms may require the practitioner to differentiate between several diagnoses, or you may have to try more than one treatment plan to resolve your problem.

**Be Open** – Discuss how you feel about your visit -- anything from your treatment to your ability to pay fees.

**Follow the Prescribed Plan**—Advise us whether you think you can, and want to, follow the prescribed treatment plan. The most effective plan is the one which all participants agree is the best and which is carried out exactly. If you choose to refuse or not comply with the instructions given to you by your healthcare provider, you will need to accept the consequences of these decisions and actions.

**Inform** – Notify your health care provider about any living will, medical power of attorney, or other directive that could affect your care.

**Report Changes** – Tell us about any changes in your health or adverse affects of your treatment, or if your symptoms don't improve. Also tell us about changes in your schedule, and let us know at least 24 hours in advance if you cannot make an appointment.

**Know Your Health Care Providers** – Try to know and remember the names of the people who serve you. We encourage continuity of care and will do our best to make this an easy task.

**Respect Your Fellow Patients, UHS Staff and the Facility** – Show respect for the rights and property of your fellow patients and UHS staff by according them the dignity and courtesy that you expect to receive. Be considerate of the facilities and equipment.

**Arrange Transportation** – If required by your health care provider, provide a responsible person to transport you home from the facility and remain with you for 24 hours.

**Pay Your Fees** – Pay fees on the day of your service or make payment arrangements with the UHS Cashier's Office to assure your financial obligations for your health care are fulfilled.

**Maximize Healthy Habits** – Take responsibility for your health by maximizing healthy habits such as exercising, eating a healthful diet and not smoking. Avoid knowingly spreading disease.

## **RIGHTS & RESPONSIBILITIES OF STUDENT HEALTH INSURANCE PLAN MEMBERS**

If you are a member of the Student Health Insurance Plan (SHIP), University Health Services serves you in two ways: as your health care provider and as your health insurance plan. All of the rights and responsibilities of UHS patients apply to students enrolled in SHIP. In addition, as a SHIP member, you also have the following rights and responsibilities.

### **AS A SHIP MEMBER, YOU HAVE THE RIGHT TO:**

#### **Understand How the Plan Works**

Request information, and have your questions answered, about:

- The benefits of the Student Health Insurance Plan.
- The network of providers available to serve you at UHS and in the medical community.
- How to receive access to care, both at the Tang Center and off-campus.
- How to waive the plan if you have comparable major medical insurance coverage.
- How to express grievances or provide suggestions concerning the plan.

#### **Receive Appropriate Access to Health Services**

Obtain authorization and payment for medically necessary services covered by the plan, including

- Coverage of emergency care services as specified in the plan.
- Authorizations for visits to a specialist, based on an approved treatment plan.
- Coverage for hospitalization as specified in the plan.

**Receive a written "Notice of Privacy Practices"** that explains how your protected health information will be used and disclosed.

### **You have the responsibility to:**

#### **Learn About the Plan**

Become knowledgeable about the covered benefits, limitations and exclusions of the Student Health Insurance Plan. Know and abide by the administrative and operational procedures of the plan.

#### **Meet Your Financial Obligations**

Make a good-faith effort to meet your financial obligations under the plan, including paying premiums (included with your registration fees) and any co-payments.

#### **Be Open**

Provide information relevant to your participation in the plan and use of plan benefits.

#### **Let Us Know How We're Doing**

Use established complaint resolution procedures to address any concerns you may have about the plan.