PATIENT RIGHTS & RESPONSIBILITIES



As a valued member and patient of North East Medical Services (NEMS), you have the <u>RIGHT</u> to:

ACCESS TO CARE

- Receive reasonable access to care.
- Know the time and location of appointments in advance.

CONSIDERATE AND RESPECTFUL CARE

- Receive considerate and respectful care regardless of your race, color, creed, religion (includes religious dress and grooming practices), age, sex/gender (includes pregnancy, childbirth, breastfeeding and/or related medical conditions), gender identity, gender expression, sexual orientation, marital status, medical condition (genetic characteristics, cancer or a record or history of cancer), military or veteran status, national origin (includes language use and possession of a driver's license issued to persons unable to provide their presence in the United States is authorized under federal law), ancestry, disability (mental and physical including HIV/AIDS, cancer, and genetic characteristics), genetic information, retaliation for reporting patient abuse in tax-supported institutions, age (over 40), enrollment in a Health Benefit Plan, state of health, need for health services, status as a litigant, status of a Medicare or Medicaid beneficiary source of payment for your care, or any other basis prohibited by law.
- Receive care in a safe setting, free from abuse and harassment.
- Receive information in a manner that you can understand.
- Receive interpreter services to assist you.

ACTIVE PARTICIPATION IN YOUR CARE

- Participate in all decisions relating to your health care.
- Designate a representative or surrogate decision maker if you are unable to fully participate in treatment decisions, as allowed by law.
- Have written instructions about your care prepared in advance (advance directives) and have those instructions honored.
- Participate in resolving conflicts about care, including ethical issues that impact care.
- Receive appropriate assessment and management of pain.
- Leave the NEMS clinic(s) and/or refuse care even against the advice of providers.
- Choose if you would like to allow health professional students and medical residents to participate in your care.

KNOWLEDGE AND INFORMATION

- Know the names of the providers who are treating you.
- Know who has primary responsibility for coordinating your care.
- Receive the necessary information about any proposed treatment or procedure you may need in order to give informed consent or refuse a course of treatment, in accordance with the law.

PATIENT RIGHTS & RESPONSIBILITIES



- Receive information about the outcomes of care, treatments, or services that have been provided, including unanticipated outcomes.
- Be informed about NEMS' payment policies.
- Examine and receive an explanation of your bill regardless of source of payment.
- Be informed about NEMS and NEMS' physicians' status in your insurance network, and any changes
 to the participating status related to your insurance network and/or coverage. You may be
 responsible for the charges related to services that you receive at NEMS if NEMS is not a
 participating provider in your insurance network.

PRIVACY AND CONFIDENTIALITY

- Confidentiality and privacy of all communications and information pertaining to your care.
- Access, review, and request amendments to your medical records.
- Know how your protected health information (PHI) will be shared within NEMS or with outside agencies.

RESPECT FOR YOUR PATIENT RIGHTS

• Have your complaints heard, and to have a fair and efficient process for resolving your differences with the clinic or with NEMS providers. You have the right to file a complaint or grievance with the State Department of Health Services.

As a valued member and patient of NEMS, you also have the <u>RESPONSIBILITY</u> to:

- Cooperate with the providers who are caring for you at NEMS. You should follow their instructions and treatment guidelines.
- Provide, to the best of your knowledge, accurate and complete information about your present complaints, past illnesses, hospitalizations, medications, and other matters relating to your health.
- Report unexpected changes in your condition.
- Ask questions if you do not understand something or if you are unsure about the advice you are given.
- Work with your health care provider to develop a pain management plan.
- Accept the consequences if you do not follow the care, service, or treatment plan.
- Keep appointments on time. If you need to cancel or reschedule an appointment, please call NEMS as soon as possible.
- Use your NEMS Identification (ID) card or "yellow card" for yourself only. Your NEMS ID card cannot be used by anyone else, nor are you permitted to use someone else's NEMS ID card, to access services. False identification in order to access care from NEMS is a form of healthcare fraud, which is not permitted.
- Inform NEMS of any changes in address, telephone number, or insurance coverage as soon as possible.

PATIENT RIGHTS & RESPONSIBILITIES



- Bring in any forms or identification cards—including your NEMS ID/yellow card, a photo ID, and all health insurance cards—that are necessary for your treatment **every time** you come to the clinic.
- Know what your insurance covers. Your insurance may not cover certain services that you receive from NEMS. Although NEMS offers insurance eligibility verification as a courtesy, this does not guarantee that your insurance company will pay for all services and fees. You are responsible for any fees not covered by your insurance plan or health coverage.
- Follow all NEMS rules and regulations regarding conduct. Be considerate of other patients by helping to control noise; not eating, drinking or smoking; respecting others' property and privacy; and following health and safety guidelines.
- Refrain from yelling, profanity, threats, derogatory names, racial insults, harassment, violence of any form, and all other physical or verbal abuse of NEMS staff and/or other patients. Threats of any type or persistent misconduct or abuse could be grounds for termination of care.
- Follow NEMS' Weapons Free Policy and understand that most weapons are not permitted at NEMS.
- Please switch all mobile phones and devices to the silent or off mode while in the clinic, and refrain from answering or making phone calls. Phone calls are only allowed in the first floor lobby or main entrance area of each building. Please do not disturb other patients when speaking.
- Recordings of any type (including photos, images, video, voice or audio recordings, etc.) and on any device or format are strictly prohibited within or near all NEMS facilities unless specifically permitted by NEMS Administration. This is to protect the privacy of other patients, staff, and visitors.
- Be responsible for your personal belongings. NEMS is not responsible for loss or damage of any personal items that that are left unattended on NEMS premises.
- Go to the nearest hospital or call 911 when you have a medical emergency.



a california health center

NON-DISCRIMINATION DISCLOSURE & NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND AUXILIARY AIDS AND SERVICES

Revised 11/2024

North East Medical Services (NEMS) complies with applicable Federal civil rights laws and does not differentiate, exclude, or discriminate against any individual on the basis of race, color, creed, religion (e.g., religious dress and grooming practices), age (e.g., those over 40), sex/gender (e.g., sex characteristics, intersex traits, pregnancy, childbirth, breastfeeding and/or related medical conditions), gender identity, gender expression, sexual orientation, sex stereotypes, marital status, medical condition (e.g., genetic characteristics, cancer or a record or history of cancer), military or veteran status, national origin (e.g., limited English proficiency, language use and possession of a driver's license issued to persons unable to prove their presence in the United States is authorized under federal law), ancestry, disability (e.g., mental and physical, including HIV/AIDS, cancer, and genetic characteristics), genetic information, retaliation for reporting patient abuse in tax-supported institutions, enrollment in a Health Benefit Plan, state of health, need for health services, status as a litigant, status of a Medicare or Medicaid beneficiary, source of payment for care, or any other basis prohibited by law.

NEMS:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (e.g., large print, audio, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact NEMS Member Services Department at 415-391-9686 ext. 8160.

How to file a grievance with NEMS

If you believe that NEMS has failed to provide these services or discriminated in another way based on any of the characteristics listed above, you can file a grievance with NEMS Member Services. If you need help filing a grievance, NEMS Member Services Department is available to help you.

- By phone: Call 415-391-9686 ext. 8160
- **By mail:** Call us at 415-391-9686 ext. 8160 and ask to have a form sent to you.
- In Person: Visit the NEMS Member Services Department.

You may also contact the NEMS Civil Rights Coordinator

Attn: NEMS Section 1557 Coordinator North East Medical Services 1520 Stockton Street San Francisco, CA 94133 NEMSSection1557@nems.org

This notice is available at: nems.org

How to file a grievance with U.S. Department of Health and Human Services, Office of Civil Rights

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights

- **By phone:** Call 1-800-368-1019 (TTY 711 or 1-800-537-7697)
- **By mail:** Fill out a complaint form or send a letter to:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building

Washington, D.C. 20201

Complaint forms are available at:

http:www.hhs.gov/ocr/office/file/index.html

• Online: Visit the Office of Civil Rights Complaint Portal at:

https://ocrportal.hhs.gov/ocr/portal/lobby.jsf

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NON-DISCRIMINATION DISCLOSURE & NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND AUXILIARY AIDS AND SERVICES

Revised 11/2024

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Spanish ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) o hable con su proveedor.

Chinese 注意:如果您說中文,我們可以為您提供免費語言協助服務。也可以免費提供適當的輔助工具與服務,以無障礙格式提供資訊。請致電 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) 或與您的提供者討論。

Vietnamese LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 415-391-9686 ext. 8160 (Người khuyết tật: 1-800-735-2929) hoặc trao đổi với người cung cấp dịch vụ của ban."

Korean 주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 415-391-9686 ext. 8160 (TTY: 1-800-735-2929)번으로 전화하거나 서비스 제공업체에 문의하십시오."

کمک رایگان خدمات ،کنیدمی صحبت فارسی زبان به اگر :توجه Persian در زبانی برای مناسب کمکی خدمات و هاکمک همچنین شماست دسترس در زبانی با .است دسترس در رایگان صورتبه دسترس قابل هایقالب در اطلاعات نماس (TTY: 1-800-735-2929) داخلی 8160-191-391 شماره کنید صحبت خود دهندهارائه با یا بگیرید

Japanese 注:日本語を話される場合、無料の言語支援サービスをご利用いただけます。アクセシブル(誰もが利用できるよう配慮された)な形式で情報を提供するための適切な補助支援やサービスも無料でご利用いただけます。415-391-9686 ext. 8160 (TTY: 1-800-735-2929)までお電話ください。または、ご利用の事業者にご相談ください。

Armenian ՈՐՇԱԴՐՈՐԹՅՈՐՆ. Եթե խոսում եք հայերեն, Դուբ կարող եք օգտվել լեզվական աջակցության անվճար ծառայություններից։ Մատչելի ձևաչափերով տեղեկատվություն տրամադրելու համապատասխան օժանդակ միջոցներն ու ծառայությունները նույնպես տրամադրվում են անվճար։ Չանգահարեք 415-391-9686 ext. 8160 հեռախոսահամարով (TTY՝ 1-800-735-2929) կամ խոսեք Ձեր մատակարարի հետ։

Arabic تنبيه :إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات متاسبة لتوفير المساعدة اللغوية المجانية .كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا .اتصل على الرق 415-391-9686 ext. 8160 (1-800-735-2929) ."أو تحدث إلى مقدم الخدمة (2929-735-810)

Thai หมายเหตุ: หากคุณใช้ภาษา ไทย เรามีบริการความช่วยเหลือด้านภาษาฟรี นอกจากนี้ ยังมีเครื่องมือและบริการช่วยเหลือเพื่อให้ข้อมูลในรูปแบบที่เข้าถึงได้โดยไม่เสียค่าใช้จ่าย โปรดโทรติดต่อ 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) หรือปรึกษาผู้ให้บริการของคุณ"

Tagalog PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) o makipag-usap sa iyong provider. Punjabi ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫ਼ਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹੁੰਦੀਆਂ ਹਨ। ਪਹੁੰਚਯੋਗ ਫਾਰਮੈਟਾਂ ਵਿੱਚ ਜਾਣਕਾਰੀ ਪ੍ਰਦਾਨ ਕਰਨ ਲਈ ਢੁਕਵੇਂ ਪੂਰਕ ਸਹਾਇਕ ਸਾਧਨ ਅਤੇ ਸੇਵਾਵਾਂ ਵੀ ਮੁਫ਼ਤ ਵਿੱਚ ਉਪਲਬਧ ਹੁੰਦੀਆਂ ਹਨ। 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) 'ਤੇ ਕਾਲ ਕਰੋ ਜਾਂ ਆਪਣੇ ਪ੍ਰਦਾਤਾ ਨਾਲ ਗੱਲ ਕਰੋ।"

Hindi ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध होती हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं। 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) पर कॉल करें या अपने प्रदाता से बात करें।"

Hmong LUS CEEV TSHWJ XEEB: Yog hais tias koj hais Lus Hmoob muaj cov kev pab cuam txhais lus pub dawb rau koj. Cov kev pab thiab cov kev pab cuam ntxiv uas tsim nyog txhawm rau muab lus qhia paub ua cov hom ntaub ntawv uas tuaj yeem nkag cuag tau rau los kuj yeej tseem muaj pab dawb tsis xam tus nqi dab tsi ib yam nkaus. Hu rau 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) los sis sib tham nrog koj tus kws muab kev saib xyuas kho mob."

Khmer សូមយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនិយាយ ភាសាខ្មែរ

សេវាកម្មជំនួយភាសាឥគគិតថ្លៃគឺមានសម្រាប់អ្នក។ ជំនួយ និងសេវាកម្មដែលជាការជួយដ៍សមរម្យ ក្នុងការផ្ដល់ព័ត៌មានតាមទម្រង់ដែលអាចចូលប្រើប្រាស់បាន កំអាចរកបានដោយឥគគិតថ្លៃផងដែរ។ ហៅទូរសព្ទទៅ 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) ឬនិយាយទៅកាន់អ្នកផ្ដល់សេវារបស់អ្នក។"

Russian BHИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 415-391-9686 ext. 8160 (TTY: 1-800-735-2929) или обратитесь к своему поставщику услуг.

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