

Stevens Point WI 54481-3897 715-346-4646; Fax 715-346-4752 http://www.uwsp.edu/stuhealth

Patient Rights and Responsibilities

Our goal is to provide you with the safest, highest quality care possible. It is important that you are aware of your rights.

Please discuss any concerns regarding your medical are and treatment with you physicians and nurses. If you feel your concerns are not addressed, please contact the UWSP Student Health Service Medical Director at (715)346-4646.

As a patient, you have the right to:

Treatment without discrimination

- Receive care and treatment regardless of race, color, national origin, ancestry, age, sex, gender, sexual orientation, gender identity, disability, creed, religion, marital status, newborn status, military status, or source of payment.
- 2. Receive emergency treatment even if you cannot pay.

Respect, confidentiality and person dignity

- 1. Be treated with respect and courtesy in an environment free from all forms of abuse and harassment.
- 2. Privacy during your treatment, so you are not seen or overheard during your treatment by people not involved in your care.
- 3. Have health care information treated as private and confidential. Details of your condition and treatment will not be shared except with those who are allowed to receive the information.
- Request restrictions according to federal law on certain uses and disclosures of your health information.
- 5. Request how and where we communicate with you outside if the hospital and clinics.

Information you can understand

- 1. Know about clinic policies and procedures.
- Receive help from interpreters or use adaptive equipment if you speak limited English or are deaf or hard of hearing.

- 3. Receive complete information on your condition, treatment plan and outlook for recovery.
- 4. Have your health status explained to you and encourage you to participate in planning your care and treatment, including managing your pain.

Participation in decisions about your care

- Request a limit on the number of student learners involved in your care. If you wish to limit the involvement of students, please speak with your doctor. Your request will be honored to the extent possible, if doing so will not negatively affect your care, treatment or services.
- 2. Provide a Power of Attorney for Healthcare or Living Will (known as Advance Directives) if you are least 18 years old. These legal documents tell us your wishes for future health care; the POA for Healthcare also allows you to appoint someone to make your health care decisions if you should become unable to do so. It is our policy to follow Advance Directives to the extent permitted by
- 3. Identify a support person to be involved in care, treatment decisions and services (to the extent authorized by the patient).
- 4. Be involved in decisions about your health care and to agree to treatment before it is given, except in emergencies. When you are asked to agree to treatment, you will be told about your condition; the planned procedures or treatment; alternative treatments; the risks and side effects; what could happen if you don't get treatment for

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your condition; and how likely it is to be successful.

- Choose not to be treated. Your doctor will tell you
 what could happen if you don't get treatment.
 You are responsible for the results if you choose
 not to be treated or if you do not follow your
 doctor's instructions.
- 6. Be informed about the outcomes of your care, including unexpected outcomes.
- 7. Refuse to participate in research and experimental treatment.
- 8. Participate in discussion of ethical issues related to you care. Such issues might include not starting or stopping life-sustaining medical treatment.

Care that supports you and your family

- 1. Be told the name of the physician or other professional responsible for you care.
- Provide care that meets your emotional, spiritual and cultural needs. You may perform cultural or spiritual practices as long as they do not harm others or interfere with medical treatment.
- 3. Access to protective services, such as guardianship, when needed.
- 4. Receive care in a safe setting.
- Receive medical treatment without seclusion or restraints unless your medical condition requires it, or it is necessary because of aggressive or violent behavior.
- 6. Be partners with staff to assess and manage your pain.

Access to your billing and medical records

- 1. Have access to your medical and billing records.
- 2. Request copies of your medical records in a reasonable time at a reasonable cost.
- 3. Receive a copy of your bill sowing charges for each service received.
- 4. Request a correction of your medical record and challenge the accuracy of your billing records.
- 5. Request an accounting of the disclosure of your health care information.
- 6. Prevent your medical records from being used for research purposes.

You can help us provide you with the best possible care by following through on these responsibilities. You have the responsibility to:

- 1. Follow clinic rules and regulations.
- 2. Respect the rights of other patients, families, visitors and staff.
- Provide accurate and complete information to your medical team about your health and health care.
- 4. Ask for more information if you do not understand your illness or treatment.
- 5. Work actively with your caregivers to implement your treatment plan.
- 6. Report any changes in your condition after discharge.
- Provide accurate health insurance information or contact our billing office to arrange payment for services provided.
- 8. Keep your medical appointments or notify your clinic well in advance if you are unable to do so.
- 9. Treat health care providers, employees and other patients with respect.

If you have concerns about your patient care, you can file a complaint:

- Student Health Service, Delzell Hall, 910 Fremont St., Stevens Point, WI 54481 Phone: (715)346-4646 Fax: (715)346-4752 Comments can be directed to wendy.kremnitzer@uwsp.edu
 Website: www.uwsp.edu/stuhealth
- You can also file a complaint with:
 - The State of Wisconsin, Department of Health & Family Services, Division of Quality Assurance, Bureau of Health Services, P.O. Box 2969, Madison, WI 53701-2969. Phone: (800)642-6552

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 You can file a formal service delivery discrimination complaint at:

> Department of Health Services, Civil Rights Compliance ATTN: Attorney Pamela McGillivray, 1 West Wilson St., Room 651, P.O. Box 7850, Madison, WI 53707-7850 Phone: (608)266-1258

Fax: (608)267-1434, TTY: 1-800-947-3529 Email: DHSCRC@dhs.wisconsin.gov Website: dhs.wisconsin.gov/civil-rights

 U.S Department of Health and Human Services, Director, Office for Civil Rights Room 509F, HHH Bldg., 200 Independence Ave. S.W., Washington, D.C. 20201 Phone: (202)619-0403 TTY/TDD: (202)619-3257 Office for Civil Rights, U.S Department of Health and Human Services
 233 N. Michigan Ave., Ste. 240, Chicago, IL 60601
 Customer Response Center (800)368-1019 Fax: (202) 619-3818, TDD (800) 537-7697

You can file a laboratory test complaint at:

- Centers for Medicare & Medicaid Services (CMS) Central Office, Division of Laboratory Services (CLIA), toll free (877)267-2323 extension 63531
- College of American Pathologists (CAP), toll free (866)236-7212