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## Patient Rights and Responsibilities Statement

### Your Patient Rights:

As an individual receiving substance use disorder treatment from Wayspring you have the following rights and responsibilities.

You have the right to:

- Receive information about our services, our practitioners, providers and patient rights and responsibilities.
- Choose the provider that gives you care whenever possible and appropriate. Discuss information that is private, and on appropriate or medically necessary treatment options for your condition, regardless of cost or benefit coverage.
- Be able to take part in decisions about your health care unless it is not in your best interest.
- Receive all facts from your doctor about your medical condition, treatment plan, given in a way that you can follow.
- Be given information about your health. This information may also be available to someone who you have legally approved to have the information or who you have said should be reached in an emergency when it is not in the best interest of your health to give it to you.
- Be told of any experimental care and be able to refuse to be part of the care.
- Be able to say no to treatment or therapy. If you say no, the doctor must talk to you about what could happen, and they must put a note in your medical record about it.
- Get medical care in a timely manner.
- Get care that should be done for medical reasons.
- Be treated with respect and with regard for your dignity and privacy.
- Be sure that your medical record information will be kept private. Ask for, and get, a copy of your medical records, and be able to ask that the record be changed/corrected if needed.
- Know that we, your doctors, and your other health care providers will treat you the same as others and cannot treat you in a different way because of your age, sex, race, national origin, language needs, or degree of illness or health conditions.
- Be free from any form of restraint or seclusion used as a means of force, discipline, ease or revenge as specified in federal regulations.
- Be able to say yes or not to having any information about you given out unless we must by law.
- Be able to get all written patient information:
  - At no cost to you
  - In the prevalent non-English languages of patients in your health plan's service area
  - In other ways, to help with special needs if you have trouble reading the information for any reason.
- Be able to get help free of charge from your health plan and its providers if you do not speak English or need help in understanding information.
- Be able to get help with sign language if you are hearing impaired.
- Be told if the health care provider is a student and be able to refuse their care.

- Make advance directives (a living will) and know we will never discriminate based on the contents, or lack of.
- File a complaint about not following your advance directive with your state Department of Health.
- Know that we must follow all federal and state laws, and other laws about privacy that apply.
- Tell us your worries about Wayspring and the health care services you get.
- Tell us what you think about your rights and responsibilities and suggest changes.
- Ask us about our Quality Improvement program and tell us how you would like to see changes made.
- Contact the United States Department of Health and Human Services Office of Civil Rights, at the addresses below, and/or your State Department of Mental Health and Addiction, with any complaint of discrimination based on race, color, religion, gender, sexual orientation, age disability, national origin, military status, genetic information, ancestry, health status, need for health services, or any source concerning action by Wayspring Clinic.

Office for Civil Rights Headquarters  
 U.S. Department of Health & Human Services  
 200 Independence Avenue, SW Room 509F  
 HHH Building Washington, D.C. 20201  
 Toll Free Call Center: 1-800-368-1019  
 TTD Number: 1-800-537-7697

## Your Patient Responsibilities

You have the responsibility to:

- Tell us, your providers, and other health care providers what they need to know to treat you.
- Ask questions about any medical issues and make sure you understand what your doctor tells you.
- Understand as much as possible about your health conditions and take part in reaching goals that you and your doctor or other provider agree upon.
- Keep scheduled appointments, be on time and if you must cancel, call 24 hours in advance
- Follow the plans and instructions for care you have agreed upon with your doctors and other health care providers.
- Treat all Wayspring staff and providers with respect and courtesy.
- Always carry your health plan member ID card and present it when receiving services.
- Notify the Wayspring Clinic of a change in your phone number or address.
- Use the emergency room only in cases of an emergency or as your doctor tells you.
- Contact the Wayspring Clinic after going to an urgent care center, Emergency Department or hospital.
- Know that laws guide your health plan and the services you get.
- Know and follow the rules of your health plan.
- You can ask us to correct your health and claims records if you feel they are incorrect or incomplete. We may say “no” to your request, but we will tell you why in writing within 60 calendar days. If we cannot change your records, you may have a statement of disagreement added to your personal medical information.