

PATIENTS' BILL OF RIGHTS

As a patient of Hometown Health Centers, you have the right, consistent with law, to:

1. Understand and use these rights. If for any reason you do not understand or you need help, the Center must provide assistance, including an interpreter.
2. Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, marital status, or source of payment.
3. Receive considerate and respectful care in a clean and safe environment free of unnecessary restraints.
4. Receive prompt attention, especially in an emergency situation.
5. Know the names, positions, and functions of any Center staff involved in your care, and have the right to accept or refuse their treatment, examination or observation.
6. Receive complete information about your diagnosis, treatment, and prognosis.
7. Receive all the information that you need to give informed consent for any proposed procedure or treatment. This information shall include the possible risks and benefits of the procedure or treatment.
8. Receive all the information you need to sign advance directives. If you would like additional information, please ask for a copy of the pamphlet "A Right to Decide Care: A Patient's Guide to Advance Directives."
9. Refuse treatment and be told what effect this may have on your health.
10. Privacy while in the Center and confidentiality of all information and records regarding your care, including source of payment.
11. Participation in all decisions about your treatment and care at the Health Center.

12. Review your medical record without charge and obtain a copy of your medical record for which the Center can charge a reasonable fee. You cannot be denied a copy solely because you cannot afford to pay.
13. The right to appropriate pain assessment and management.
14. Be informed of the services available at the Health Center, and provisions for off-hour emergency coverage.
15. Approve or refuse the release or disclosure of the contents of your medical record to any health care practitioner and/or health care facility, except as required by law or third-party payment contract.
16. Receive an itemized bill and explanation of all charges for services rendered in the Center.
17. Receive competent counseling from the Center staff to help obtain financial assistance from public or private sectors to meet the expenses of services received in the Center.
18. Complain, without fear of reprisal, about the care and services you are receiving, and to have the Center respond, and if you request it, a written response within 30 days. If you are not satisfied with the Center's response, you can complain to the New York State Department of Health at 1-800-804-5447 or in writing to the address below.

New York State Department of Health
Centralized Hospital Intake Program
433 River Street Suite 303
Troy, New York 12180-2299

Hometown Health Center
1044 State Street
Schenectady, New York 12307
(518) 370-1441