NOTICE OF PATIENT RIGHTS

The providers at MinuteClinic® are committed to providing quality health care and maintaining the rights and dignity of our patients.

As a Patient, You Have the Right:

1. To freedom of choice in your selection of facility, provider or health service mode.
2. To receive an itemized copy of your bill (regardless of source of payment) and to have a copy of the bill sent to your provider.
3. To know the name and specialty (if any) of the nurse practitioner or other providers responsible for your care.
4. To information regarding your diagnosis, evaluation and treatments, including medications prescribed for you, in terms you can understand.
5. To confidentiality of records and communications to the extent provided by law.
6. To have all reasonable requests responded to promptly and adequately within the capacity of MinuteClinic.
7. To know the relationship that MinuteClinic has with any other health care facility to the extent the relationship relates to your care or treatment.
8. To obtain a copy of any MinuteClinic rules or regulations that apply to your conduct as a patient.
9. To obtain any available information regarding financial assistance or free care.
10. To review and obtain a copy of your medical record upon request. There may be a small charge per page for copying.
11. To refuse to be examined by a student or to ask that a provider not be assigned to your care.
12. To refuse to serve as a research subject or to receive care when the primary purpose is educational.
13. To privacy during medical treatment within the capacity of MinuteClinic.
14. To prompt, lifesaving treatment in an emergency within the capacity of MinuteClinic without discrimination regarding economic status or source of payment.
15. To informed consent to the extent provided by law.
16. To prompt and safe transfer to another facility if you cannot be treated at MinuteClinic.
17. To be treated with dignity and respect in accordance with your cultural, psychological, spiritual and personal values, beliefs and preferences.
18. To be informed of the procedure for submitting a complaint about MinuteClinic and/or the quality of care you have received, and to receive a response to your complaint in a timely manner.
19. To refuse treatment to the extent provided by law and to be informed of the risks of your decision to refuse treatment.
20. To access referral information for conditions that MinuteClinic does not treat.

As a Patient, You Have the Responsibility:

1. To know the benefits and exclusions of your health plan coverage.
2. To respect the rights, property and show consideration for the property and environment of all MinuteClinic health care providers and patients.
3. To provide MinuteClinic with complete and accurate information about all present and past health matters.
4. To understand and comply with the treatment plan agreed upon by you and your nurse practitioner.
5. To follow instructions concerning your treatment and to ask questions if you do not understand or need an explanation of your diagnosis or plan of care.
6. To accept responsibility for consequences following a decision to refuse treatment or instructions.
7. To pay all applicable copayments at the time of service.
8. To express your opinions or complaints in a constructive manner to the appropriate people.

For contact information in your state regarding your rights as a patient, you may ask your MinuteClinic practitioner, call 1.866.389.ASAP (2727) or visit minuteclinic.com