



Patient Rights and Responsibilities

Each patient treated at Well&You ASC and their surrogate has the right to:

- Be treated with respect, consideration, and dignity.
- Be afforded appropriate personal privacy
- Be given verbal and written notice of rights and responsibilities in a language and manner that ensures the patient, the representative or surrogate understands.
- Receive information concerning appropriate and timely diagnosis, evaluation, treatment, prognosis and preventive measures; if it is not medically advisable to provide this information to the patient, the information shall be given to the responsible person on his/her behalf.
- To participate in decisions involving their health care, except when such participation is contraindicated for medical reasons.
- Be fully informed about a treatment or procedure and the expected outcome before it is performed
- Receive information on the services, fees and payment policies of the center.
- Obtain information on the center's policy on patient's advance directives.
- Voice or file complaints or grievances regarding treatment or care that is (or fails to be) furnished.
- Change primary or specialty physicians, if other qualified physicians are available.
- Be given the name of their attending physician, the names of all other physicians directly assisting in their care, and the names and functions of other health care persons having direct contact with the patient.
- Be given, in writing if requested, a list of physicians who have financial interest or ownership in the center.
- Be free from any act of discrimination or reprisal and to be free from all forms of abuse or harassment.
- Be provided services without discrimination based upon race, religion, color, national origin, sex, age, disability, marital status or source of payment, nor shall any such care be denied because of the patient's sexual orientation.
- Receive care in a safe setting by competent and appropriately qualified personnel.

Each patient treated at the Center and their surrogate has the responsibility to:

- Provide a complete and accurate medical history including medications, over-the counter products, dietary supplements, and any allergies or sensitivities.
- Follow the agreed upon treatment plan prescribed by their provider and participate in their care
- Arrange for a responsible adult to provide home and remain with them as directed by the provider or as indicated on discharge instructions
- Fulfill financial responsibility, for all services received, as determined by the patient's insurance carrier.
- Provide the surgery center with all information regarding third-party insurance coverage.
- Behave respectfully toward all health care professionals and staff, as well as other patients and visitors.
- Keep your appointment and notify the facility if you are unable to do so.
- Read and understand all consents you sign. Please ask questions for clarification before signing consents.
- Let us know if you don't understand any part of your treatment. Ask questions and take part in your healthcare decisions.
- Let us know when you are having pain or when your pain is not being managed.
- Respect the Center's property and equipment.



Patient Rights and Responsibilities

Well&You has the right to refuse care to or dismiss a patient from care in the event they are disruptive, uncooperative, and belligerent or physically threatening to the staff or other patients. Additionally, the Center has the right to refuse care to or dismiss a patient from care in the event the designated responsible patient representative, caregiver or surrogate is incapacitated, disruptive, uncooperative, belligerent, or physically threatening to the staff or other patients.

If a patient is adjudged incompetent under applicable state laws by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed under state law to act on the patient's behalf. [416.50(e)(2)]

If a state court has not adjudged a patient incompetent, any legal representative or surrogate designated by the patient in accordance with state law may exercise the patient's rights to the extent allowed by state law. [416.50(e)(3)]

If you have questions concerning this policy, or in the event of a desire to file a complaint or grievance, please contact:

- Director of Operations of Well&You by contacting 904-895-5400 or hello@wearewellandyou.com. The Center will provide you with a response within 30 days of your complaint.
- The Florida Agency for Healthcare Administration (AHCA), and Centers for Medicare are the responsible agency for ASC complaint investigation. Complaints may be registered with the department by phone or online with AHCA. A complainant may provide his/her name, address, and phone number to the Department or remain anonymous. 1-888-419-3456
<https://apps.ahca.myflorida.com/hcfc/>
- The Office of the Medicare Ombudsman website is <http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>, or telephone 1-800-MEDICARE.
- You may file a complaint with the accreditation agency for this Center. Accreditation Association for Ambulatory Health Care, Inc. ("AAAHC") website, <http://www.aaahc.org/>