

As a patient at Complete Emergency Care, you have the right within limits of the law to:

- Be fully informed in writing, at the time of registration of these Rights.
- Be treated with respect, dignity and consideration in a safe environment.
- Be referred or transferred to alternative services as appropriate to meet those identified patient needs Complete Care is unable to meet.
- Not to be transferred or discharged unless:
 - The individual's health and safety or that of another person requires discharge.
 - The individual's medical needs require transfer.
 - The individual does not meet any criteria for continued service set forth by Complete Care, federal, state, or local statute.
 - The individual fails to pay for services, except as such transfer or discharge is prohibited by law.
- Expect emergency procedures to be implemented without unnecessary delay.
- Be assured that Complete Care personnel who provide patient care are qualified through education and experience to care out the service and treatment for which they are responsible.
- Be informed of the name of the care provider who is responsible for the patient's care and treatment and be aware of how that provider may be contacted.
- Be afforded impartial access to quality treatment and services that are available and medically necessary regardless of race, sex, sexual orientation, national origin, marital status, illness, infectious disease, disability, age, religion, or source of care.
- Be informed of your health status and participate in the development and implementation of the plan of care.
- Be informed of the rights to make decisions regarding the your medical care, including the information necessary to enable the patient to make treatment decisions that reflect his/her wishes, the right to accept or refuse medical treatment including information regarding the consequences of refusing treatment.
- Formulate advanced directives and, if transferred to a hospital, to request that the hospital staff and practitioners who provide care in the hospital comply with these directives in accordance with federal regulation.
- Every consideration of privacy concerning your medical care. Case discussion, consultation, examination, and treatment are considered confidential and shall be conducted discreetly.
- Have all records pertaining to your medical care treated as confidential except as otherwise provided by law or third-party contractual arrangements.
- Be informed that written consent is required for the release of medical records to any individual outside of Complete Care facility except in the case of transfer to another health care facility, or as required by law for third-party payment contracts, or as authorized by the patient in writing.
- The privacy of a patient's protected health information will be maintained as required by law. A patient has the right to receive the applicable notice of privacy practices information indicating Complete Care's Privacy Practices with the respect to a patient's protected health information and when such information is materially changed. To receive a copy, please ask the front desk.
- Except for emergencies, the physician must obtain the necessary informed consent prior to the state of any procedure or treatment, or both.
- An explanation of the bill for services rendered and the right to know any charges for items and services the patient may be responsible to pay and Complete Care's Policies for payment of services.
- Information on the availability of known financial resources for his health care.
- Receive information necessary to make decisions regarding the patient's care in a language or form the patient can reasonably be expected to understand, including assistance in obtaining special devices, interpreters or other aids to facilitate communication.
- Be fully informed by a physician as to the patient's health status, unless the judgement of the physician indicates this information would be contraindicated due to medical or psychological consideration or family request.
- Be free from mental, physical, sexual and verbal abuse, neglect and exploitation, or harassment.
- Voice grievances with respect to treatment or care that is (or fails to be) furnished without discrimination, or reprisal for voicing, grievances and without restraint, interference or concern.
- Be informed of Complete Care's mechanism for receiving, reviewing and resolving patient complaints and be provided the telephone number, address, and procedures for filling a grievances or complaint confidentially.

You have the right to voice your concerns without compromising your access to care. You can make a complaint by calling **Complete Care's Corporate Office at 817-421-0034** or by asking to speak to a member of the leadership team while visiting our facility. Complaints may also be filed with the Texas Department of State Health Services at the following address or phone number: Health and Human Services Commission, Patient Quality Care Unit, Health Facility Compliance, Mail Code 1979, P.O. Box 149347, Austin, TX 78714-9347, Complaint Hotline: (888) 973-0022.