

Patient Rights and Responsibilities

UW Health partners with our patients to provide remarkable healthcare. To ensure that you receive the safest, highest quality care possible, it is important that you are aware of your rights and responsibilities. For more information or to discuss your rights and responsibilities as a patient, please contact Patient Relations at patientrelations@uwhealth.org or (608) 263-8009.

PATIENT RIGHTS

Access to Care and Treatment Without Discrimination

1. Receive care and treatment without discrimination or being treated differently based on race, color, national origin, ancestry, age, sex, gender, sexual orientation, gender identity, disability, creed, religion, marital status, newborn status, military status, or source of payment
2. Receive emergency treatment even if you cannot pay
3. Receive care at a UW Health facility without being transferred to another facility, except in some emergencies, unless you are told the reason for the transfer, and another hospital has agreed to accept you as a patient and provide continuing medical care for you

Respect for Your Dignity and Privacy

1. Receive care in a safe, healing environment and be treated with respect and courtesy
2. Respect your privacy and confidentiality during your treatment, so you are not seen or overheard during your treatment by people not involved in your care
3. Have your healthcare information treated as private and confidential. Details of your condition and treatment will not be shared except with those who are allowed to receive the information. To aid in your care when you are seeing healthcare professionals in more than one organization, health information that UW Hospitals and Clinics stores electronically is also available to other healthcare providers associated with UW Health.
4. Request restrictions according to federal law (HIPAA) on certain uses and disclosures of your health information
5. Request how and where we communicate with you outside of the hospitals and clinics

Information You Can Understand

1. Receive free aids or services to help communicate effectively with us, such as qualified sign language interpreters or written information in other formats (large print, audio or accessible electronic formats). If you need these services, contact Interpreter Services at (608) 262-9000
2. Receive free language services, such as qualified interpreters or materials written in other languages, if your primary language is not English. If you need these services, contact Interpreter Services at (608) 262-9000
3. Receive complete information on your condition, treatment plan and outlook for recovery
4. Have your health status explained to you and encourage you to participate in planning your care and treatment, including managing your pain

Participate in Decisions About Your Care

1. Be involved in decisions about your healthcare and to agree to treatment before it is given, except in emergencies. When you are asked to agree to treatment, you will be told about your condition; the planned procedures or treatment; alternative treatments; the risks and side effects; what could happen if you don't get treatment for your condition; and how likely it is to be successful
2. Choose not to be treated. Your doctor will tell you what could happen if you don't get treatment. You are responsible for the results if you choose not to be treated or if you do not follow your doctor's instructions
3. Complete a Power of Attorney for Healthcare or Living Will (known as Advance Directives) if you are at least 18 years old. These legal documents tell us your wishes for future healthcare; the POA for Healthcare also allows you to appoint someone to make your healthcare decisions if you should become unable to do so. It is our policy to follow Advance Directives to the extent permitted by law
4. Refuse to participate in research and experimental treatment
5. Participate in discussion of ethical issues related to your care. Such issues might include not starting or stopping life-sustaining medical treatment and questions about research or clinical trials you might be involved in. To talk with someone from the hospital's ethics committee, call Patient Relations at (608) 263-8009
6. Request a limit on the number of medical students and residents involved in your care. If you wish to limit the involvement of resident physicians or medical students with your care, please speak with your doctor. Your request will be honored to the extent possible, if doing so will not negatively affect your care, treatment or services
7. Identify a support person to be involved in care, treatment decisions and services (to the extent authorized by the patient)
8. Be informed about the outcomes of your care, including unexpected outcomes

Care That Supports You and Your Family

1. Have staff tell a family member and your personal physician, upon admission to the hospital
2. Be told the name of the physician or other professional responsible for your care
3. Decide who may or may not visit you, upon admission to the hospital
4. Provide care that meets your emotional, spiritual and cultural needs. You may perform cultural or spiritual practices as long as they do not harm others or interfere with medical treatment



Care That Supports You and Your Family, continued

5. Access to protective services, such as guardianship, when needed
6. Receive care in a safe setting
7. Receive medical treatment without seclusion or restraints unless your medical condition requires it, or it is necessary because of aggressive or violent behavior
8. Be partners with hospital staff to assess and manage your pain

Access to Your Billing and Medical Records

1. Have access to your medical and billing records and challenge their accuracy
2. Request copies of your medical records in a reasonable time at a reasonable cost
3. Receive a copy of your bill showing charges for each service received
4. Request a correction of your medical record (HIPAA) and challenge the accuracy of your billing records
5. Request an accounting of the disclosure of your healthcare information
6. Prevent your medical record from being used for research purposes
7. Receive financial assistance information. To see if you qualify, call (877) 565-0505

PATIENT RESPONSIBILITIES

UW Health is a healing environment. Please treat healthcare providers, employees and other patients and visitors with respect. Any form of violent or aggressive behavior will not be tolerated

1. Follow UW Health's rules and regulations
2. Respect the rights of other patients, families, visitors and staff. Refrain from the use of inappropriate language or actions related to race, creed, color, national origin, ancestry, religion, gender, gender identify or expression, sexual orientation, marital status, age, disability or political affiliation
3. Provide accurate and complete information to your medical team about your health and healthcare
4. Ask for more information if you do not understand your illness or treatment
5. Cooperate with your caregivers to implement your treatment plan
6. Report any changes in your medical condition after discharge
7. Provide accurate health insurance information or contact our billing office to arrange payment for services provided
8. Keep your medical appointments or notify your clinic well in advance if you are unable to do so

If you have concerns about your patient care, you can file a complaint:

- Patient Relations, 600 Highland Ave., Madison, WI 53792-2460, patientrelations@uwhealth.org, (608) 263-8009. Complaints will be reviewed promptly and resolved within 7 to 15 business days when possible.
- You can also file a complaint with:
 - The State of Wisconsin, Department of Health & Family Services, Division of Quality Assurance, Bureau of Health Services, P.O. Box 2969, Madison, WI 53701-2969
Phone: (800) 642-6552

- The Joint Commission, Office of Quality Monitoring, One Renaissance Blvd., Oakbrook Terrace, IL 60181
Phone: (800) 994-6610 Fax: (630) 792-5636
Email: patientsafetyreport@jointcommission.org
- If you are a Medicare patient and have a quality of care complaint or think you are being discharged from the hospital too soon, you can file an appeal with Livanta LLC Phone: (888) 524-9900, TTY: (888) 985-8775
- You can file a formal service delivery discrimination complaint at:
 - Department of Health Services, Civil Rights Compliance
ATTN: Attorney Pamela McGillivray
1 West Wilson St., Room 651, P.O. Box 7850
Madison, WI 53707-7850
Phone: (608) 266-1258, Fax: (608) 267-1434, TTY: (800) 947-3529
Email: DHSCRC@dhs.wisconsin.gov
dhs.wisconsin.gov/civil-rights
 - U.S. Department of Health and Human Services, Director, Office for Civil Rights, Room 509F, HHH Bldg., 200 Independence Ave. S.W., Washington, D.C. 20201 Phone: (202) 619-0403 TTY/TDD: (202) 619-3257
 - Office for Civil Rights, U.S. Department of Health and Human Services
233 N. Michigan Ave., Ste. 240, Chicago, IL 60601
Customer Response Center (800) 368-1019
Fax (202) 619-3818, TDD (800) 537-7697
- You can file a laboratory test complaint at:
 - Centers for Medicare & Medicaid Services (CMS) Central Office, Division of Laboratory Services (CLIA), toll free (877) 267-2323 extension 63531
 - College of American Pathologists (CAP), toll free (866) 236-7212

UW Health complies with applicable federal civil laws. For complete information about your rights and responsibilities, contact Patient Relations at (608) 263-8009

Language Assistance

If you speak a language other than English, language assistance services are available to you free of charge. Call (608) 262-9000. UW Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

Atención: Si usted habla Español, tenemos disponible para usted servicios de asistencia de idioma gratuitos. Llame al (608) 262-9000. UW Health cumple con todas las leyes federales de derechos civiles aplicables y no discrimina en base a raza, color, nacionalidad u origen, edad, discapacidad o género.

CEEb TOOM: Yog hais tias koj hais lus Hmoob, kev pab cuam hom lus, dawb, muaj pab rau koj. Hu (608) 262-9000. UW Health muaj feem xyuam txog ntawm pej xeem txoj cai tsoom fww teb chaws thiab tsis cais ib haiv neeg twg, xim, keeb kwv teb chaws, hnub nyoog, mob xiam oob qhab los yog poj niam lossis yog txiv neej.