

# Patient Rights

at  
The Surgery Center  
of Huntsville



Excellence  
in Outpatient Surgery

**At** The Surgery Center of Huntsville we recognize that our patients are first individuals with specific rights and needs. By being committed to your rights, we are better able to ensure that you receive outstanding health-care and that your experience at The Surgery Center of Huntsville is comfortable as well. Your specific rights are:

**TO BE** treated with respect, dignity and consideration at all times.

**TO HAVE** your personal information treated as confidential information. The Surgery Center of Huntsville follows the Health Insurance Portability and Accountability Act of 1996, more commonly known as HIPAA, which governs the protection of privacy information and services provided. In the event the law requires us to give information about your treatment or condition, we will give you the opportunity to approve or refuse the release of any and all information.

**TO KNOW** the rules and regulations that apply to your conduct and responsibilities as a patient.

**TO KNOW** what services are available at The Surgery Center of Huntsville.

**TO KNOW** the people who are responsible for coordinating your care.

**TO BE** informed about any people, other than routine personnel, who will be observing or participating in your treatment.

**TO KNOW** the qualifications of your doctor and any other physicians who are participating in your procedure.

**TO CHANGE** providers if other qualified providers are available.

**TO PARTICIPATE** in decisions involving your healthcare, except when such participation would not be in your best interest for medical reasons.

**TO RECEIVE** from your physician or medical team complete information about your diagnosis, treatment and prognosis, to the degree that such information is known.

**TO RECEIVE** an electronic copy of your medical record in the form or format you request if the provider is capable of producing the copy in the requested format.

**TO UNDERSTAND** the procedure(s) or treatment(s) you are going to receive. You should ask questions of your physician until you are comfortable with what is going to happen because you will be required to sign an "informed consent" form upon your arrival at The Surgery Center of Huntsville.

**TO REFUSE** treatment and be told what the consequences of refusing treatment will be to the degree that such information is known.

**TO BE** fully informed about what you can and cannot do, should or should not eat or drink, and any other information pertinent to helping your body heal following your discharge from The Surgery Center of Huntsville. Any medications or follow up medical counseling must be coordinated by you through your physician(s).

**TO EXPECT** the care provided and services rendered to be consistent with national standards of care.

**TO KNOW** if any research will be done during your treatment and be given the opportunity to refuse to participate in research.

**TO EXAMINE** and understand your statement of charges from The Surgery Center of Huntsville, regardless of the source of payment.

**TO KNOW** in advance of your procedure the estimated amount of your charges.

**TO REQUEST** that a health plan not be notified of treatment that you have paid in full.

**TO UNDERSTAND** what provisions are available for after-hour and emergency care.

**TO RECEIVE** information about the hospital or other institution you could be transferred to in the event of an emergency. You have the right to approve your hospital or institution of choice prior to any transfer.

**TO OPT OUT** of communications for fundraising purposes.

**TO HAVE** confidence that any advertising or marketing related to The Surgery Center of Huntsville is in compliance with FDA requirements and is not misleading.

**TO BE** informed about policies regarding advance directives. Advance directive means a written instruction such as a *Living Will* or *Health Care Power of Attorney*, recognized under State Law (whether by statute or by Court of competent jurisdiction) and relating to the provision of health care when the individual is incapacitated. As an Ambulatory Surgical Center (ASC), The Surgery Center of Huntsville is required by CMS (Medicare/Medicaid) to provide this information to you prior to your surgery. (ASC means any distinct entity that operates exclusively for the purpose of providing surgical services to patients NOT requiring hospitalizations; and in which the expected duration of services will NOT exceed 23 hours following the admission to the facility.) The State of Alabama provides by statute for two types of Advance Directives:

**Living Will:** The Death With Dignity Act authorizes competent adults to express their wishes regarding the use of withholding of life-sustaining procedures, including artificial nutrition and hydration, in the event they are diagnosed with a terminal condition or are in a state of permanent unconsciousness and in the further event that they are incapacitated or otherwise unable to express their desires. The statute creates a form for the purpose entitled "Declaration of a Desire for a Natural Death." This document and those similar in purpose are commonly referred to as a "Living Will." We can provide you with the advance directive forms upon request. If you have prepared other forms of advance directives or put into writing your own desires concerning types of medical care, State statutes require that alternative forms of advanced directives correspond to State requirements. They must be signed by you and two witnesses.

**Health Care Power of Attorney:** The Alabama Probate Code authorizes competent adults to designate another person to make decisions on their behalf about their medical care in the event they become incapacitated. The statutory form created for this purpose is entitled "Health Care Power of Attorney." This form is required to be with you.

**TO EXPRESS** your grievances and suggestions to The Surgery Center of Huntsville according to the Center's policies and procedures. You are encouraged to ask questions about any of these rights that you do not understand. If you would like to express concerns regarding the quality of care you received at The Surgery Center of Huntsville, please contact the Director of Nursing or CEO at 256-533-4888. If you have concerns regarding your insurance or financial responsibility, please contact the Business Office Manager or Administrator at 256-533-4888. You will receive a personal response. In the event you are not satisfied with the results internally, the following facilities may be contacted:

**Alabama Department of Public Health**  
201 Monroe Street • Montgomery, AL 36104 • 800-356-9596

**Regional IV Office of Civil Rights**  
U.S. Department of Health and Human Services • Sam Nunn  
Atlanta Federal Center • Suite 16T70 • 61 Forsyth Street SW  
Atlanta, GA 30303-8909 • 800-368-1019 • 404-562-7886

**Medicare Beneficiary Ombudsman**  
[cms.hhs.gov/center/ombudsman](http://cms.hhs.gov/center/ombudsman)

**Medicare Ombudsman for Alabama**  
State Health Insurance Assistance Program • 800-243-5463

**Medicare Claim Fraud**  
800-633-4227

**Identity Theft Hotline**  
Federal Trade Commission • 877-438-4338

This information is available in Spanish upon request.  
(Solicite la versión en Español de esta información.)

This information is available in verbal format by calling 256-533-4888.