

Please Help us Help you By:

1. Keeping your appointment or notifying your usual provider's office when you are unable to keep your appointment at least one day ahead of your scheduled time.
2. Providing complete and accurate information about your identity, insurance information, and answer other reasonable questions that will assist GMC in providing appropriate care and securing payment. This includes reviewing and signing all necessary consents, financial agreements, or other documents required by the facility.
3. Making proper financial arrangements regarding your bill at the time of service and bringing an up to date insurance card, including Medicaid or Medicare card to each visit. If you are applying for the Sliding Fee Scale, bring your correct proof of income information and for up to date sliding fee scale information please visit our website at <http://www.goshenmedical.org>.
4. Supervising your children, both inside and outside the facility. Children under 12 should not be left unsupervised while visiting our facility.
5. Providing comprehensive information regarding your medical information including current medications, visits to specialists, medical history, status of health, recent test results, self-care information, and data from recent hospitalization, ER visits, and/or specialty care.
6. Conducting yourself in a courteous, friendly, and respectful manner at all times. Appropriate conduct is a mutual expectation, from us and from you. Threatening, violent, abusive, disruptive or loud behaviors are inappropriate. GMC reserves the right to ask you and your family/guest to leave when this happens. There will be no alcohol, drugs, and/or weapons permitted on the premises. Patients who arrive at the center under the influence and do not require urgent care, will be asked to leave. If you refuse, law enforcement will be contacted for assistance.
7. Understanding that, as our Patient, you can expect evidence-based care from both your personal clinician and our medical team, as well as individualized self-management of your health and health care.
8. GMC sincerely believes that together we can work as a team to provide you with the best possible care by maintaining our mutual rights and responsibilities as your medical and dental health care home.

GOSHEN MEDICAL CENTER WOULD LIKE YOU TO PLEASE VISIT OUR WEBSITE FREQUENTLY AT <http://www.goshenmedical.org>. WHILE THERE, PLEASE COMPLETE A PATIENT SATISFACTION SURVEY AFTER EACH VISIT. THIS HELPS US TO MONITOR OUR PERFORMANCE AND WORK ON MAKING IMPROVEMENTS TO THE WAY WE DELIVER HEALTH CARE. THANK YOU.

Goshen Medical Center's Role as Your Medical



*This Brochure Covers **Your** Rights and Responsibilities as our Patient, and **Our** Rights and Responsibilities as your Medical Home Provider.*

**Goshen Medical Center, Inc.
Corporate Office**

Physical Address: 412 SW Center Street, Faison NC 28341

Mailing Address: P.O. Box 187, Faison NC 28341

Telephone: (910) 267-1942

Fax: (910) 267-1237

Website: <http://www.goshenmedical.org>

RIGHTS AND RESPONSIBILITIES

Thank you for choosing Goshen Medical Center, Inc. (GMC) as your medical home provider. We know you have your choice of providers and we appreciate you placing your trust in us. As our patient, you are entitled to certain rights and privileges, which are referred to as your "Rights and Responsibilities". GMC is also responsible for upholding your rights and GMC has certain responsibilities that are defined in this brochure. If you have any questions or concerns regarding your treatment or customer experience, please call our corporate office at (910) 267-1942 and you will be connected to the best person to address your concern.

RIGHTS and RESPONSIBILITIES:

1. As our patient, you have the right to medical treatment at **any** GMC medical or dental practice regardless of race, religion, gender, national origin, marital status, age, disabilities, or **financial status**.
2. As our patient, you have the right to be treated with dignity and respect. The GMC staff will respect our patient's mental, social, spiritual, and cultural values about health, illness and injury.
3. As our patient, you have the right to know and understand your medical history, treatment options, the advantages and the disadvantages of those options in a manner that is easily understood.
4. As our patient, you have the right to work with your **usual** GMC provider, along with his/her staff together as a team, to develop a self-management plan that will help you, our patient, in making decisions about your treatment or plan of care.
5. As our patient, you have the right to know what complications may result from your treatment, this includes procedures performed during the office visit, as well as any side effects from the medications prescribed in a manner that you can understand.
6. As our patient, you have the right to request and receive your protected health information (PHI) or medical record information within three (3) business days, provided you give us proper consent to release that information to you and/or your legal guardian or representative.
7. As our patient, you have access to certain PHI electronically through the GMC patient portal. You can access this information 24/7 through a secure electronic or computer connection. Please ask your front desk assistant for information on how to log on to the patient portal and access your health information.

8. As our patient, you have the right to refuse treatment to the extent permitted by the laws of the state of North Carolina and to be informed of the consequences of your refusal to accept such treatment.
9. As our patient, you have the right to expect reasonable continuity of care. Your GMC clinical team will assist you in coordinating appointments with providers within and outside of our office and making certain that we are appropriately informed about the care you receive for other providers.
10. As our patient, you have the right to examine and receive an explanation of your bill including any amounts due to us, regardless of the source of payment. GMC has a duty of care to make certain that your account is accurate and all available resources are explained to you.
11. As our patient, you have the responsibility to provide up to date and accurate information on your insurance, financial status, and to bring that information with you, including current insurance card to every medical visit.
12. As our patient, GMC will provide you with 24/7 access to medical advice and assistance through our medical call center that will take your telephone calls when our office is closed. This includes connecting you to our medical provider on call who can assist in making sure your needs are appropriately addressed, even when our office is closed.
13. As our patient, GMC has the responsibility of providing medical services and education materials in person as well as on paper in a language you understand. This includes medical interpreters and other qualified staff that can assist you.
14. As our patient, you must be at least 18 years of age to be treated without parental permission, except as dictated by law, some treatments may be given to minors without parent's permission or if it is a life threatening emergency.
15. As our patient, there may be times when the Public Health Law will require your specific medical condition to be reported to authorities in the County Department of Public Health without your prior consent.
16. As our patient, your medical record information may be shared with other health care providers in order to provide for all of your needs.
17. As our patient, you have the right to be advised of any teaching or research to be performed by GMC that may affect your care. You have the right to refuse to participate in any such projects.