



Top Aid Healthcare, INC

51 Union St Suite 204

Worcester, MA 01608

Phone: (508)-343-8555

Fax: (508)-519-0353

PATIENT BILL OF RIGHTS

1. Be informed of his or her rights;
2. Exercise rights at any time;
3. Have his or her property and person treated with respect;
4. Be free from neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and/or misappropriation of patient property by anyone furnishing services on behalf of the organization;
5. Voice and report grievances or complaints regarding treatment or care that are (or fail to be) delivered, the lack of respect for property and/or person, or the violation of any rights to the organization, CHAP, and state or local agencies;
6. Participate in, be informed about, and consent to or refuse care in advance of and during treatment, where appropriate, with respect to:
 - (1) completion of all assessments;
 - (2) the care to be furnished, based on the comprehensive assessment;
 - (3) establishing and revising the plan of care;
 - (4) the disciplines that will furnish the care;
 - (5) the frequency of visits;
 - (6) expected outcomes of care, including patient-identified goals and anticipated risks and benefits;
 - (7) any factors that could affect treatment effectiveness; and
 - (8) any changes in the care to be furnished;
7. Receive all services in the plan of care;
8. Have a confidential patient record and access to or release of patient information and records in accordance with Health Insurance Portability and Accountability Act (HIPAA) law and regulation (45 CFR parts 160 and 164);

9. Be advised of the extent to which payment for services may be expected from Medicare, Medicaid, or any other federally funded or federal aid program known to the organization;

10. Be advised of the charges for services that may not be covered by Medicare, Medicaid, or

~~any other federally funded or federal aid program known to the organization;~~

11. Be advised of the charges the individual may have to pay before care is initiated;

12. Be advised of any changes in the information provided with respect to payment and charges, if they occur. The patient and representative (if any) are advised of these changes as soon as possible, in advance of the next home health visit, and in accordance with the patient notice requirements at 42 CFR §411.408(d)(2) and 42 CFR §411.408(f);

13. Receive proper written notice, in advance of a specific service being furnished, if the organization believes that the service may be non-covered care or in advance of the organization reducing or terminating ongoing care;

14. Be informed how to contact (including contact information and hours of operation) the state toll-free hotline and the CHAP hotline to ask questions, report grievances, or voice complaints;

15. Be advised of the names, addresses, and telephone numbers of federally funded and state-funded entities that serve the area where the patient resides, including the (SEE PAGE 3)

(1) Agency on Aging;

(2) Center for Independent Living;

(3) Protection and Advocacy Agency;

(4) Aging and Disability Resource Center; and

(5) Quality Improvement Organization;

16. Be free from any discrimination or reprisal for exercising his or her rights or for voicing grievances to the organization or an outside entity; and

17. Be informed of the right to access and how to access auxiliary aids and language services.

Patient Signature

Date

Office Representative Signature

Date

1. Central Ma Agency on Aging:

360 West Boylston St. Suite 216

West Boylston, MA 01583

Phone: 508-852-5539

2. Center for Living and Working:

484 Main St. Worcester, Ma 01606

Phone: 508-798-0350

3. Protection and Advocacy Agency:

Main Office in Boston

11 Beacon St. Suite 925

Boston, Ma 02108

Phone: 617-723-8422

1-800-872-9992

4. Elderly Services of Worcester Area, INC

67 Millbrook St. Suite 100

Worcester, Ma 01606

Phone: 508-756-1545

5. Quality Improvement Organization

-----Mailing Address: Livanta LLC area 1

BFCC-QIO

10820 Gullford Rd. Suite 202

Annapolis Junction, MD 20701-1105

Phone: 1-866-815-5440

TTY: 1-866-868-2289

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