



## **BONE AND JOINT SURGERY CENTER OF NOVI PATIENT'S BILL OF RIGHTS**

- The PATIENT has the right to be treated with consideration, respect and dignity.
- The PATIENT has the right to personal privacy.
- The PATIENT has the right to be free from all forms of abuse or harassment.
- The PATIENT has the right to all complete and current information concerning their diagnosis and treatment, and in terms that he/she can understand. If not medically advisable to give information to the patient, the information shall be made available to an appropriate person on the patient's behalf.
- The PATIENT has the right to receive from the physician enough information so that he/she may understand the services being rendered in order to sign the informed consent.
- The PATIENT has the right to be fully informed about a treatment or procedure and the expected outcome before it is performed.
- The PATIENT has the right to make an informed decision regarding their care.
- The PATIENT has the right to refuse treatment and to be informed of the consequences of his/her actions.
- The PATIENT has the right to privacy of any information or treatment concerning his/her own care.
- The PATIENT has the right to know the person or persons responsible for coordination of their care.
- The PATIENT has the right to be informed of any persons, other than routine personnel, that would be observing or participating in his/her treatment and to refuse that observation and/or participation.
- The PATIENT has the right for all medical records to be treated as confidential and to be given the opportunity to approve or refuse their release unless it would cause a negative outcome in the continuation of medical care.
- The PATIENT has the right to information concerning the facility to which he/she may have to be transferred. The facility that the patient is to be transferred to, must give approval prior to the patient transfer.
- The PATIENT has the right to know if any research will be done during their treatment and has the right to refuse it.
- The PATIENT has the right to receive care in a safe setting.
- The PATIENT has the right to expect quality care and service from the BONE AND JOINT SURGERY CENTER OF NOVI.
- The PATIENT has the right to voice grievances regarding treatment or care that is (or fails to be) furnished.
- The PATIENT has the right to be informed of the mechanism by which he/she will have continuing health care following discharge from the BONE AND JOINT SURGERY CENTER OF NOVI.
- The PATIENT has the right to examine and receive an explanation of their bill, regardless of the source of payment.
- The PATIENT has the right to know, in advance, the expected amount of his/her bill, regardless of the source of payment.
- The PATIENT has the right to know what BONE AND JOINT SURGERY CENTER OF NOVI Rules and Regulations apply to his/her conduct as a patient.
- The PATIENT has the right to exercise his or her rights without being subjected to discrimination or reprisal.



## **BONE AND JOINT SURGERY CENTER OF NOVI PATIENT RESPONSIBILITIES**

- It is the PATIENT'S responsibility to read and understand all permits and/or consents to be signed and to ask either the nurse or the physician to clarify any information not understood about care or services.
- It is the PATIENT'S responsibility to answer all medical questions truthfully, to the best of their knowledge, including complete information about symptoms, past illnesses, medications and other matters relating to their plan of care.
- It is the PATIENT'S responsibility to follow the pre-operative instructions given by the physician and/or the BONE AND JOINT SURGERY CENTER OF NOVI.
- It is the PATIENT'S responsibility to notify the BONE AND JOINT SURGERY CENTER OF NOVI on admission if the pre-operative instructions have not been followed.
- The PATIENT is responsible for his/her actions if treatment is refused or if pre-operative instructions are not followed.
- It is the PATIENT'S responsibility to provide transportation to and from the BONE AND JOINT SURGERY CENTER OF NOVI appropriate to the medications and/or anesthesia to be given, and according to pre-surgical instructions.
- It is the PATIENT'S responsibility to follow the post-operative instructions given by the physician(s) and/or nurses. This includes instructions regarding post-operative appointments.
- It is the PATIENT'S responsibility to contact the physician if any complications occur after discharge.
- It is the PATIENT'S responsibility to assure all payments for all services rendered are on a timely basis, and ultimate responsibility is the patient's, regardless of insurance coverage.
- It is the PATIENT'S responsibility to provide financial and/or insurance information regarding who will be responsible for the bill, including current address and authorized contact information.
- It is the PATIENT'S responsibility to notify the administration of the BONE AND JOINT SURGERY CENTER OF NOVI if the PATIENT thinks their right(s) have been violated or if the PATIENT has a significant complaint.
- It is the PATIENT'S responsibility, and those accompanying the PATIENT, to respect the right of other patients and the BONE AND JOINT SURGERY CENTER OF NOVI personnel, and to follow the center's policies.

**\* If the patient's condition necessitates, their REPRESENTATIVE will be informed of these rights and responsibilities.**



## **BONE AND JOINT SURGERY CENTER OF NOVI PEDIATRIC BILL OF RIGHTS**

All children have a right to cry, laugh or to be made comfortable if it helps them to feel better. They also have the right to:

- Ask to have a parent or another adult stay with them during their examination.
- Tell their caregiver when and where something hurts.
- Ask questions if they do not understand a medical procedure or what is happening to them.
- Ask for something to ease their pain.
- Listen to music, play a game or read a book to help distract them during medical procedures.
- Have an adult with them when they ask, except when the presence of another person would, or may, impact their care and cause a negative outcome.
- To have a schedule for their tests and procedures that doesn't keep them hungry or thirsty any longer than necessary.
- And always . . . to be called by their name.



## HOW TO VOICE A GRIEVANCE OR COMPLAINT

If you think that we may have violated your patient rights, or you disagree with a decision we made, you may file a written complaint with: *(Please be aware that we will take no retaliatory action against you if you file a complaint)*

Bone and Joint Surgery Center of Novi - Chief Administration Officer and/or Quality Director  
26750 Providence Parkway – Suite 100 Novi, MI 48374 248/662-1500

### 1. State of Michigan Facility Complaints

The State of Michigan investigates complaints regarding health facility safety, quality of care, and licensing violations. This is the direct online intake form used for Michigan ambulatory surgery centers.

1. **Agency Name:** Michigan Department of Licensing and Regulatory Affairs (LARA)
2. **Bureau:** Bureau of Survey and Certification (BSC)
3. **Toll-Free Complaint Hotline:** 1-800-882-6006
4. **Direct Online Complaint Portal:** [lara.state.mi.us](http://lara.state.mi.us)
5. **Mailing Address:**

Department of Licensing & Regulatory Affairs  
Bureau of Survey and Certification – Complaint Intake Section  
P.O. Box 30838  
Lansing, MI 48909

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### 2. Medicare / CMS Complaints

For health facility conditions and quality of care issues at an ambulatory surgery center, the Centers for Medicare & Medicaid Services (CMS) directs beneficiaries to file through the State Survey Agency (LARA listed above). However, general Medicare complaints or coverage rights violations can be initiated directly with Medicare.

1. **Agency Name:** Centers for Medicare & Medicaid Services (CMS)
  2. **Toll-Free Phone Line:** 1-800-MEDICARE (1-800-633-4227)
  3. **TTY Users Phone Line:** 1-877-486-2048
  4. **Direct Online Complaint Form:** <https://www.medicare.gov/my/medicare-complaint>
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### 3. Medicare Beneficiary Ombudsman (MBO)

The Medicare Ombudsman helps ensure patient rights are protected and reviews issues that have not been adequately resolved through standard Medicare complaint processes. Patients may review their programmatic rights online or ask a 1-800-MEDICARE representative to escalate their unresolved inquiry directly to the Ombudsman.

1. **Office Name:** CMS Medicare Beneficiary Ombudsman (MBO)
  2. **How to Escalate via Phone:** Call 1-800-633-4227 and explicitly ask the agent to submit your unresolved complaint to the Ombudsman.
  3. **Ombudsman General Web Resource:** <https://www.cms.gov/center/special-topic/ombudsman/medicare-beneficiary-ombudsman-home>
  4. **Ombudsman Rights and Help Portal:** <https://www.medicare.gov/basics/your-medicare-rights/get-help-with-your-rights-protections>
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### 4. AAAHC Accreditation Complaints

For concerns regarding compliance with ambulatory healthcare accreditation standards:

1. **Organization Name:** Accreditation Association for Ambulatory Health Care (AAAHC)
2. **Phone Line:** 847-853-6060
3. **Email Address:** [Complaints@aaahc.org](mailto:Complaints@aaahc.org)
4. **Direct Complaint Submission Info:** [aaahc.org](http://aaahc.org)
5. **Mailing Address:**

Accreditation Association for Ambulatory Health Care (AAAHC)  
5250 Old Orchard Rd, Ste 200  
Skokie, IL 60077