



## PATIENT RIGHTS AND RESPONSIBILITIES

Welcome to Gateway Community Health Center, Inc. As a patient of Gateway, we want to ensure everyone mutually understands the expectations of the Center and you, as the patient, understand what we will do. We want to provide the best experience for you and your family. If you have questions regarding these rights and responsibilities, please ask.

### **PAYMENT FOR SERVICES**

1. You are responsible for giving staff accurate information about your present financial status and any changes in your financial status. The staff needs this information to decide how much to charge you and / or so they can bill your insurance.
2. Gateway offers a discounted program for patients who are at or below 200% of the federal poverty level. If you would like to learn more, notify Gateway's Registration Department.
3. You have a right to receive explanations of Gateway's bill. You must pay, or arrange to pay, all agreed fees for health services. If you cannot pay right away, please let the staff know so they can provide care for you now and work out a payment plan.
4. Federal law prohibits us from denying you primary health care services, which are medically necessary, solely because you cannot pay for these health services at the time of your medical visit. If in the event you do not make an attempt to comply with your financial responsibility, we have the right to discontinue our services to you. You will still be responsible for any outstanding balances on your account.

### **RESPONSIBILITIES: As a patient, you have a responsibility:**

1. To provide Gateway with complete and current information about your health, so that we can give you proper high-quality health care. You have a right, and are encouraged, to participate in decisions about your treatment.
2. To notify Gateway staff if you have questions regarding the care you receive and/or your treatment plan.
3. To notify Gateway if there are changes in your personal information including, but not limited to, name, address, and insurance information.
4. To arrive to appointments on time, and to notify Gateway staff if you need to cancel or reschedule an appointment.
5. You are responsible for the supervision of children you bring to the Center. You are responsible for their safety and the protection of other clients and our property.
6. To act appropriately and in a respectful manner when interacting with Gateway staff and other patients. Inappropriate behavior includes, but is not limited to, harassment, threats, physical abuse, intoxication, and other disruptive behavior.
7. To participate in and follow your clinical treatment plan, to the extent appropriate, with the understanding that you have the right to refuse treatment.
8. For the consequences and outcome of refusing recommended treatment or procedures. If you refuse treatment or procedures that your Gateway provider believes is in your best interest, you may be asked to sign a Refusal to Permit Medical Treatment or Services form or Against Medical Advice form (as appropriate).
9. To comply with Gateway's policies and procedures relevant to patients.
10. To understand that patients and other visitors are prohibited from taking pictures or audio/video recordings of Gateway staff without prior written approval from Gateway's Privacy Officer.

### **RIGHTS: As a patient, you have a right:**

1. To be treated with respect regardless of your race, color, marital status, religion, sex, national origin, ancestry, gender identity, physical or mental handicap or disability, age, veteran status, or political affiliation.
2. To have access to Gateway's full scope of service and to receive services in a culturally competent manner.
3. To information and explanations in the language you normally speak and in words that you understand. You have a right to information about your health or illness, treatment plan, including the nature of your treatment; its expected benefits; its inherent risks and hazards (and the consequences of refusing treatment); the reasonable alternatives, if any (and their risks and benefits); and the expected outcome, if known. This information is called obtaining your informed consent.
4. To high quality health care and treatment that is reasonable for your condition and within our capability, with the understanding that you have a right to be transferred or referred to another facility for services that Gateway cannot provide. Note: Gateway is NOT an emergency facility and does not pay for services that you receive from another healthcare provider.
5. To receive an appropriate assessment and pain management, as necessary.
6. To refuse treatment or procedures to the extent permitted by applicable laws and regulations.



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7. To receive information regarding "Advance Directives".
8. To privacy. Gateway will use and disclose your health information as described in Gateway's Notice of Privacy Practices and as authorized by you in writing.

Gateway **maintains ZERO TOLERANCE of abuse, harassment, or violence** of any kind. a person who causes or threatens to cause abuse, harassment or violence of any kind is subject to immediate termination as a patient and/or removal from Gateway's premises.

### TERMINATION

Gateway reserves the right to terminate a patient relationship, in limited circumstances, for cause. For more information please request to receive a copy of Gateway's policy.

### MISSED APPOINTMENT AGREEMENT

Medical, Dental, Women's Health, Behavioral Health, or Specialty Care patients who fail to keep or reschedule appointments in accordance with Gateway guidelines two times in a 6-month period will have all existing appointments canceled. You will only be seen on a walk-in or same-day basis as scheduling allows. Patients seen on a walk-in or same-day basis will be seen by any available provider. Missed appointment is defined as:

- Failure to cancel or reschedule an appointment at least one business day prior to scheduled appointment time (cancellation and rescheduling must be done during clinic hours), or
- Failure to keep a scheduled appointment

### FEEDBACK REGARDING GATEWAY

We welcome your feedback. Input from patients helps Gateway improve its services and better serve the community. In addition to providing feedback directly to the applicable Gateway staff, you may communicate feedback, including any complaints and concerns, through Gateway's Compliance hotline. The Compliance hotline's phone number is (956) 625-3247. For information regarding how to direct complaints to the Texas Medical Board and/or the Texas State Board of Dental Examiners, please see Gateway's website at [gatewaychc.com](http://gatewaychc.com)