

**JTJ MEDICAL SUPPLY, INC
DBA MAIL-MEDS CLINICAL PHARMACY AND BLISS RX**

PATIENT BILL of RIGHTS and RESPONSIBILITIES

To ensure the finest care possible, as a Patient receiving our pharmacy services, you should understand your role, rights and responsibilities involved in your own Plan of Care.

Patient Rights

- To select those who provide you with pharmacy services.
- To receive the appropriate or prescribed services in a professional manner without discrimination relative to your age, sex, race, religion, ethnic origin, sexual preference or physical or mental handicap.
- To be treated with friendliness, courtesy and respect by each and every individual representing our pharmacy, who provided treatment or services for you and be free from neglect or abuse, be it physical or mental.
- To assist in the development and preparation of your Plan of Care that is designed to satisfy, as best as possible, your current needs, including management of pain.
- To be provided with adequate information from which you can give your informed consent for commencement of services, the continuation of services, the transfer of services to another health care provider, or the termination of services.
- To express concerns, grievances, or recommend modifications to our pharmacy in regard to services or care, without fear of discrimination or reprisal.
- To request and receive complete and up-to-date information relative to your condition, treatment, alternative treatments, risk of treatment or Plan of Care.
- To receive treatment and services within the scope of your plan of care, promptly and professionally, while being fully informed as to our pharmacy's policies, procedures and charges.
- To request and receive data regarding treatment, services, or costs thereof, privately and with confidentiality.
- To be given information as it relates to the uses and disclosure of your Plan of Care.
- To have your Plan of Care remain private and confidential, except as required and permitted by law.
- To receive instructions on handling a drug recall.
- To confidentiality and privacy of all information contained in the client/patient record and of Protected Health Information (PHI); PHI will only be shared with the Patient Management Program in accordance with state and federal law.
- To receive information on how to access support from consumer advocates groups.
- To receive instructions on the safety disposal of drugs that are in compliance with state and federal laws and regulations.
- To know about philosophy and characteristics of the Patient Management Program.

- To have *personal health information* shared with the Patient Management Program only in accordance with state and federal law.
- The right to request the program's staff members name, including their job title, and to speak with a supervisor of the staff member if requested.
- The right to speak to a health professional.
- To receive information about the Patient Management Program.
- To receive administrative information regarding changes in or termination of the Patient Management Program.
- To decline participation, revoke consent or disenroll at any point in time.
- Be fully informed in advance about services to be provided, including the disciplines that furnish care and the frequency of visits, as well as any modifications to the Plan of Care.
- Be informed, both orally and in writing, in advance of care being provided, of the charges, including payment for service expected from third parties and any charges for which the client/patient will be responsible.
- Receive information about the scope of services that the pharmacy will provide and specific limits on those services.
- Participate in the development and periodic revision of the Plan of Care.
- Refuse care or treatment after the consequences of refusing care or treatment are fully presented.
- Be informed of client/patient rights under state law to formulate an Advanced Directive, if applicable.
- Have one's property and person treated with respect, consideration, and recognition of client/patient dignity and individuality.
- Be able to identify visiting personnel members through proper identification.
- Be free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and misappropriation of client/patient property.
- Voice complaints about services or care, lack of respect of property or recommend changes in policy, personnel, care or service without restraint, interference, coercion, discrimination, or reprisal.
- Have complaints about treatment or care that is (or fails to be) furnished, or lack of respect of property investigated.
- Confidentiality and privacy of all information contained in the client/patient record and of Protected Health Information (PHI).
- Be advised on agency's policies and procedures regarding the disclosure of clinical records.
- Receive appropriate care without discrimination in accordance with physician orders, if applicable.
- Be informed of any financial benefits when referred to an organization.

- Be fully informed of one's responsibilities.

Patient Responsibilities

- To provide accurate and complete information regarding your past and present medical history and contact information and any changes.
- To agree to a schedule of services and report any cancellation of scheduled appointments and/or treatments.
- To participate in the development and updating of a Plan of Care.
- To communicate whether you clearly comprehend the course of treatment and Plan of Care.
- To comply with the plan of care and clinical instructions.
- To accept responsibility for your actions if refusing treatment from, or not complying with, the prescribed treatment and services.
- To respect the rights of pharmacy personnel.
- To notify your doctor and the pharmacy of any potential side effects and/or complications.
- To notify the pharmacy via telephone when your medication supply is running low so a refill maybe delivered to you promptly.
- To submit any forms that are necessary to participate in the Patient Management Program to the extent required by law.
- To give accurate medical and contact information and to notify the Patient Management Program of changes in this information.
- To notify your treating doctor of their participation in the Patient Management Program, if applicable.
- To maintain any equipment provided by pharmacy, if applicable.

Personnel honor the patients' rights to:

- Have one's property and person treated with respect, consideration, and recognition of client/patient dignity and individuality
- Be able to identify visiting personnel members through proper identification
- Choose a health care provider, including choosing an attending physician (NA in this setting)
- Receive appropriate care without discrimination in accordance with physician's orders
- Be informed of any financial benefits when referred to an organization
- Be fully informed of one's responsibilities

If you have questions, concerns or issues that require assistance, please call (800) 939-2022 option 3 for Customer Care. Complaints will be forwarded to management and you will receive a response the next business day.