



CLIENT BILL OF RIGHTS AND RESPONSIBILITIES

Dura Medic, LLC ("Company") believes that open and honest communication is a foundation of effective health care and patient satisfaction; therefore, we provide the following:

At a minimum, you have the right:

- to be fully informed of your rights and responsibilities;
- to decide who will provide your health care services;
- to know the identity of persons providing home care services to you;
- to receive prescribed services or items in a professional manner without regard to your age, race, gender, religion, national origin, linguistic preference, sexual preference or physical or mental disability;
- to be treated professionally, courteously, and respectfully by all individuals representing Company who provide services to you and to be treated with full recognition of your dignity and individuality;
- to participate in making decisions about your plan of care prior to and during the course of treatment;
- to express concerns or grievances regarding your home care service without fear of discrimination or reprisal and to have any grievances fully investigated. Medicare beneficiaries may call the National Medicare hotline telephone number: (800) 633-4227. Other clients may call Company at (877) 571-5400, or ACHC at (919)-785-1214;
- to receive services free from abuse, neglect, exploitation, or maltreatment without fear of discrimination or reprisal. You may call Company's Administrator at (877) 571-5400 or ACHC at (919)-785-1214). You may call your state's hotline number to report abuse or neglect. You may call your state's Adult Protective Services agency. You may call your local law enforcement agency.
- to obtain health care information concerning your condition (unless medically inadvisable and so documented in the medical record), planned course of treatment, alternative treatments and risks of associated treatments;
- to be informed of Company's policies and practices that relate to your plan of care;
- to be informed of charges for services and the availability of known financial resources for your services;
- to be informed of any financial benefits when referred to Company;
- to be informed of provider/care limitations;
- to refuse treatment and services to the extent permitted by law, and to be informed of the medical consequences that could result from such refusal;

- to expect that Company will comply with state and federal guidelines regarding advance directives;
- to expect all health care communications pertaining to your care will be treated as confidential;
- to have access to your medical records as defined by state and federal guidelines;
- to communicate with Company's service staff at its toll-free telephone number: (877) 571-5400;
- to communicate with Company's certified or licensed staff at its toll-free telephone number: (877) 571-5400;
- to access and use Company's forms from its website. You may access Company's website at www.duramedic.com.

Your responsibilities to Company and its employees include, but are not limited to:

- providing full information about your illness or condition to allow proper evaluation and treatment to ensure optimal care;
- demonstrating courtesy and respect to the health care team members;
- canceling or rescheduling an appointment with Company as far in advance as possible if unable to keep an appointment;
- communicating with the health care team member if your condition worsens or isn't following the expected course;
- respecting the property of Company;
- understanding the part that your own health behavior plays in your treatment;
- providing complete and accurate insurance coverage information and assisting company with the filing of your health care claims;
- paying for all co-payments and deductibles and non-covered services promptly and in accordance with any agreement you have made with the Company.