Patients’ Bill of Rights

Project HOME Healthcare Services strives to provide person-centered holistic health care. In order to promote trust, create closer Patient/Provider communication and the highest level of care, all sites within PHHS presents and visibly posts in public spaces the following Rights and Responsibilities for Patients, clients, and their families:

As a consumer of Project HOME Healthcare Services I have a right to:

- Have my health assessed and cared for.
- Receive information about medications, including its purpose, the way to take it, and the possible side effects.
- Be assigned a primary provider.
- Request that a family member or friend be with me and speak up for me.
- Be informed of why a test or treatment is needed and how it will help me.
- Be informed of my test results.
- Receive in understandable language adequate information from my provider concerning my diagnoses and its related treatment. In the event that I refuse treatment, I will be informed of the possible medical consequences.
- In certain cases, another facility may have services that PHHS does not have. In some situations, my provider or another staff member at PHHS will refer me to another facility.
- Be given reasonable and respectful personal consideration, and to expect information about my health to be treated confidentially.
- Know the name and position of the provider who is caring for me.
- Be informed of policies and procedures, fees and charges for services made by PHHS.
- Receive an appointment time that works with my schedule during the hours that PHHS is open. I should not have to wait too long for services without an explanation.
- Receive an explanation about my bill.
• Be heard if I have suggestions or complaints.
• Be able to receive care regardless of ability to pay.
• Have my dignity respected as a Patient.

We welcome all persons to receive services at PHHS regardless of race, religion (creed), disability, sex, sexual orientation, gender identity, age, national origin (ancestry), citizenship, or veteran status.

As a Patient you are responsible for:

• Providing information to my provider about past illnesses, hospitalizations, medications, including prescriptions, over-the-counter medications, vitamins, herbs, or any other drug or substance that I may be taking, and other matters related to my health.
• Informing my provider about any allergies and adverse reactions I have had to medicines.
• Informing my provider about past and present problems related to my health to the best of my ability, including but not limited to problems with mental illness and substance use.
• Cooperating with all health personnel and asking questions if I do not understand something.
• Assisting my provider by adhering to the instructions and medical orders provided.
• Respecting the property of other persons and the property of PHHS.
• Making and keeping appointments or informing PHHS as soon as possible if I cannot keep an appointment.
• Providing information necessary for bills to be paid by my medical insurance and for realizing that I have the ultimate responsibility for paying all bills. PHHS will correct errors in the bill. Payment of the bill is expected.
• Bringing my current insurance card to each visit, if I have one.
• Informing PHHS of any changes to my address, household information or financial status.

We strongly encourage Patients to apply for any and all health benefits for which they are entitled.

At any time, if you have any questions or concerns about your rights and responsibilities, please contact:

Monica McCurdy, Vice-President of Healthcare Services, at 215-320-6187 ext. 5740;
Mudit Gilotra, Director of Integrated Healthcare Services, at 215-320-6187 ext. 5742; or
Greg Landistratis, Director of Operations, at 215-320-6187 ext. 5743