

Patient Rights and Responsibilities



We want to encourage you, as a patient at Luminis Health, to speak openly with your health care team, take part in your treatment choices, and promote your own safety by being well informed and involved in your care. Because we want you to be a partner in your care, we want you to know your rights as well as your responsibilities during your stay at our hospital. We invite you and your family to be active members of your care team.

You have the right to:

1. Receive considerate, respectful, and compassionate care.
2. Receive safe care without neglect and abuse. Abuse includes verbal, mental, physical or sexual abuse.
3. An exam and treatment for emergency medical conditions and labor.
4. Be free from restraints and seclusion unless needed for safety.
5. Know the names and jobs of the people taking care of you if staff safety is not a concern.
6. Have respect shown for your personal values, beliefs, and wishes.
7. Be called by your proper name and pronoun of choice in an environment that maintains your dignity.
8. Be treated without discrimination based on race, color, national origin, ethnicity, age, gender, sexual orientation, gender identity or expression, physical or mental disability, religion, language, or your ability to pay.
9. Have a family member or person of your choice and your personal doctor notified of your admission to the hospital.
10. Receive a list of protective and advocacy services when needed.
11. Ask for a cost estimate of your care if it does not slow down your care.
12. Receive information in a way that you understand for **free**. This may include:
 - Sign language and someone who speaks and understands your language
 - Other formats like large print, braille, audio recordings, and computer files
 - Vision, speech, hearing, and other temporary aids as needed
13. Receive information from your doctor about your diagnosis, prognosis, test results, and outcomes of care.
14. Access your medical records according to the Health Insurance Portability and Accountability Act (HIPAA).
15. Be involved in decisions about your care including your discharge plan. You will be told of your discharge in a timely manner. Before your discharge, you will receive information about follow-up care.
16. Be screened, assessed, and treated for pain.
17. Refuse care. We are not responsible for any medical issues that occur if you refuse care.

18. Let someone stay with you (see our visitation policy).
You may choose who may visit you. You may also change your mind about who may visit.
19. Choose someone to make health care decisions for you if you cannot.
20. Make or change an advance directive. We can give you information on advance directives. We can also help you complete an advance directive if you do not have one.
21. Give written permission before receiving non-emergency care. We will tell you the benefits and risks of the care. We will advise you of options, along with benefits and risks if any.
22. Agree or refuse to take part in medical research. Agreeing or refusing will not affect your care.
23. Allow or refuse any images of you for reasons other than your care.
24. Expect privacy and confidentiality in care discussions and treatments. You have the right to a copy of your medical records and to request changes to those records. You have the right to request who has seen your personal health information. Contact Medical Records for more information.
25. Receive a copy of the HIPAA Notice of Privacy Practices.
26. Discuss ethical issues with the Ethics Service. The operator or staff can call the Ethics Service for you.
27. Receive spiritual care services or access to your own clergy by calling the operator or asking staff to assist you.

28. File a complaint and have the complaint reviewed.
Filing a complaint will not affect your care. Talk to your doctor, nurse, or department manager if you have a concern. You may also contact the Luminis Health Patient Relations team at **443-481-6890** or **patientrelations@luminishealth.org**.

If your concern is not resolved to your liking, you may also contact:

Maryland Department of Health

Office of Health Care Quality
7120 Samuel Morse Drive, Second Floor
Columbia, MD 21046

410-402-8015 or **877-402-8218**

Website: <https://health.maryland.gov/Pages/Home.aspx>

The Joint Commission

The preferred method for submitting a complaint to the Joint Commission is online: <https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-event/>

Mail: Office of Quality and Patient Safety
The Joint Commission
One Renaissance Boulevard
Oakbrook Terrace, Illinois 60181

The care you receive depends partially on you. Therefore, in addition to the Patient's Rights, you have certain responsibilities. These responsibilities are presented to you in the spirit of mutual trust and respect.

You are expected to:

1. Give complete and accurate information, including your full name, address, telephone number, date of birth, Social Security number, insurance carrier and employer when it is required.
2. Provide the hospital or your doctor with a copy of your advance directive if you have one.
3. Provide complete and accurate information about your health and medical history. This includes your current condition, past illnesses, hospital stays, medicines, vitamins, herbal products, and any other matters of your health, including perceived safety risks.
4. Ask questions when you do not understand information or instructions. If you believe you cannot follow your treatment plan, you are responsible for telling your doctor. You are responsible for outcomes if you do not follow the care/treatment plan.
5. Actively participate in your pain management plan and let your doctors and nurses know how well it's working.
6. Leave valuables at home. Bring only necessary items for your hospital stay. You are responsible for your own belongings.
7. Treat all hospital staff, other patients, and visitors with courtesy and respect; follow all hospital rules and safety regulations; and be mindful of noise levels, privacy, and number of visitors. Threats will not be tolerated.
8. Provide complete and accurate information about your health insurance coverage and pay your bills on time.
9. Keep appointments, be on time, and call if you cannot keep your appointments.
10. Not take pictures or record staff in any way without their permission.

Most importantly, it's your responsibility to inform us if you believe any of your rights have been or may be violated. You may do this at any time by calling the Luminis Health Patient Relations team at **443-481-6890** or **patientrelations@luminishealth.org**.

Nondiscrimination Notice

Luminis Health complies with applicable Federal civil rights laws and does not discriminate on the basis of age, race, color, creed, ethnicity, religion, national origin, marital status, sex, sexual orientation, gender identity or expression (LGBTQ), physical or mental disability, veteran or military status, ability to pay or any other basis prohibited by federal, state, or local law.

Luminis Health:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Luminis Health Patient Relations team at 443-481-6890.

Any member of your care team may also assist with obtaining appropriate services.

If you believe that Luminis Health has failed to provide these services or discriminated in another way on the basis of age, race, color, creed, ethnicity, religion, national origin, marital status, sex, sexual orientation, gender identity or expression (LGBTQ), disability, veteran or military status, or any other basis prohibited by federal, state, or local law, you can file a grievance with:

- **Luminis Health Patient Relations**

LHAAMC: 2001 Medical Parkway, Annapolis, MD 21401

LHDCMC: 8118 Good Luck Road, Lanham MD 20706

Phone: 443-481-6890

Email: PatientRelations@luminishealth.org

You can file a grievance in person or by mail, or email. If you need help filing a grievance, the Patient Relations team staff is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

- U.S. Department of Health and Human Services
200 Independence Ave., SW Room 509F,
HHH Building Washington, DC 20201
Phone: 800-368-1019 TDD: 800-537-7697

Complaint forms are available at
[HHS.gov/OCR/Office/File/Index.html](https://www.hhs.gov/OCR/Office/File/Index.html)

Amharic

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚክተለው ቁጥር ይደውሉ Luminis Health Patient Relations 443-481-6890.

Arabi

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم

Bassa

Dè dɛ nià kɛ dyédé gbo: ɔ jũ ké m̄ [Bàsòò-wùdù-po-nyò] jũ ní, nií, à wuɖu kà kò dò po-poò béin m̄ gbo kpáa. Dá Luminis Health Patient Relations 443-481-6890.

Chinese

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 Luminis Health Patient Relations 443-481-6890.

Farsi

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما در دسترس است. تماس بگیرید. Luminis Health Patient Relations 443-481-6890.

French

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le LHAAMC Patient Relations 1-443-481-6890.

Gujarati

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો Luminis Health Patient Relations 443-481-6890.

Haitian-Creole

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele Luminis Health Patient Relations 443-481-6890.

Ibo

Ige nti: O buru na asu Ibo asusu, enyemaka diri gi site na. Luminis Health Patient Relations 443-481-6890.

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. Luminis Health Patient Relations 443-481-6890

Portuguese

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para Luminis Health Patient Relations 443-481-6890.

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните Luminis Health Patient Relations 443-481-6890.

Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al Luminis Health Patient Relations 443-481-6890.

Swahili

KUMBUKA: Ikiwa unazungumza Kiswahili, unaweza kupata, huduma za lugha, bila malipo. Piga simu Luminis Health Patient Relations 443-481-6890.

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa Luminis Health Patient Relations 443-481-6890.

Urdu

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں کریں - Luminis Health Patient Relations 443-481-6890

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Go i số Luminis Health Patient Relations 443-481-6890.

Yoruba

AKIYESI: Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi Luminis Health Patient Relations 443-481-6890.

What is an Advance Directive?

Make your wishes known in advance.

Your Advance Directive is your health care plan only when you are unable to speak for yourself. It is important for everyone to have this plan, no matter your age or diagnosis. Sometimes in the event of serious illness or unexpected crisis, you may no longer be able to speak or make medical decisions for yourself.

This legal form can consist of a living will, healthcare proxy, and/or a durable power of attorney that allows you to give direction to medical personnel, family and friends concerning your future care when you cannot speak for yourself. An Advance Directive form does not require an attorney to complete.

It is the policy of Luminis Health to respect and uphold our patients' wishes. We recommend that everyone over the age of 18 have an Advance Directive. If you would like more information or need help with an Advance Directive, please contact:

Luminis Health Patient Relations

LHAAMC: 2001 Medical Parkway, Annapolis, MD 21401

LHDCMC: 8118 Good Luck Road, Lanham MD 20706

Phone: 443-481-6890

Email: PatientRelations@luminishealth.org