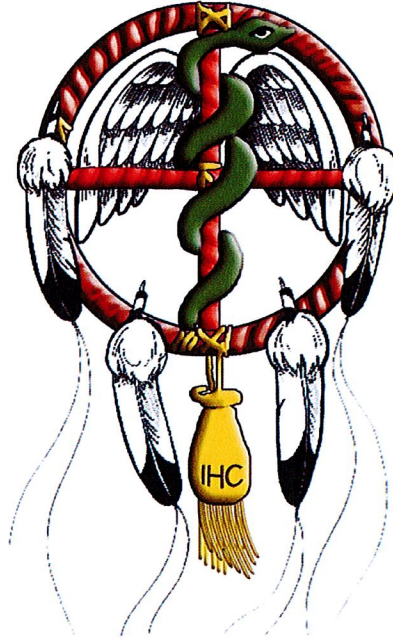
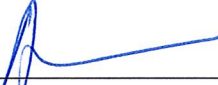


INDIAN HEALTH CENTER OF SANTA CLARA VALLEY



Member Bill of Rights


1/24/2018



Anupama Balakrishnan, MD
Chief Medical Officer



Date



Sonya M. Tetnowski
Chief Executive Officer



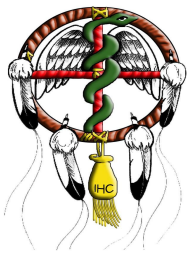
Date



Pablo Viramontes
President, IHC Board of Directors



Date



INDIAN HEALTH CENTER OF SANTA CLARA VALLEY

Counseling · Community Wellness & Outreach · Dental · Medical · WIC/Nutrition

www.IndianHealthCenter.org

Member Bill of Rights

1. You have a right to receive considerate and respectful care regardless of sex, race, national origin, religion, disability, sexual orientation, gender identity or any other basis protected by federal or state laws.
2. You have the right to receive information from your Medical Provider about your illness, your course of treatment and your prospects for understand. You have the right to know the name of the Medical Provider who has responsibility for coordinating your care, the names of other doctors who will see you, and their professional relationship.
3. You have the right to receive as much information about any proposed treatment or procedure as you may need to give your consent or to refuse this course of treatment. Except in emergencies, this information should include a description of the procedure or treatment, medically significant risks involved, alternate courses of treatment or no treatment. You also have the right to know the name of the person who will carry out the procedure or treatment.
4. You have the right to participate actively in decisions regarding your medical care. This includes the right to refuse treatment, and to be informed of the medical consequences of your action.
5. You have the right to privacy in your medical care and treatment program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. Those not directly involved in your care must have your permission to be present.
6. You have the right to confidential treatment of all communications and records pertaining to your care. You must provide to us in written permission before your medical records can be available to anyone not directly concerned with your care.
7. You have the right to expect a response from the IHC, upon a non urgent request, within standard and customary practices and expectations (three business days).
8. You have the right to obtain information about any relationship of the IHC to other health care and educational institution as they specify relate to your care.
9. You have the right to refuse and are under no obligation to participate in any research project affecting your care or treatment.
10. You have the right to expect reasonable continuity of care and to know in advance what appointment times and Medical Providers are available and where.
11. You have the right to examine your bill and receive an explanation of charges, whether these bills are being paid by you, your insurance company, or others.
12. You have the right to know what IHC rules and regulations apply to your conduct as a member..
13. You have the right to request access to your records; nominal fees may apply for copies.
14. If you have a complaint, you have the right to express your concerns.
15. You have the right to change your medical provider at any time.

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If you have a complaint, please ask to speak with the Department Supervisor for information on the complaint process or you can call the California Department of Public Health at (408) 277-1784 or the Accreditation Association for Ambulatory Health care at (847) 853-6060