

# Patients' Bill of Rights

## *A Handbook for Patients of Fairview Pharmacy Services, LLC*

It is the intent of Fairview Pharmacy Services, LLC (FPS) and the purpose of this statement to promote the interests and well-being of the patients of Fairview Pharmacy Services. No FPS facility may require a patient to waive these rights as a condition of pharmacy service. It is the intent of this section that every patient's civil and religious liberties, including the right to independent personal decisions and knowledge of available choices, shall not be infringed. The FPS facility shall encourage and assist in the fullest possible exercise of these rights.

Definitions: For the purposes of this statement, "patient" means any person who is seeking pharmacy service at any pharmacy within FPS.

### 1. Information About Rights

Patients have legal rights for their protection during their service from FPS. These rights are described in this section. These rights will be made available to all pharmacy patients on the Fairview Pharmacy Services webpage: [fairviewrx.org](http://fairviewrx.org). Reasonable accommodations will be made for those with communication impairments and those who speak

a language other than English. Explanation of the written statement of rights will be offered to patients, their guardians or their chosen representatives upon reasonable request to the pharmacy manager.

### 2. Courteous Treatment

Patients have the right to be treated with courtesy and respect for their individuality by employees of or persons providing pharmacy service.

### 3. Appropriate Health Care

Patients have the right to appropriate care based on individual needs. This right is limited where the service is not reimbursable by public or private resources. Patients have the right to choose freely among available pharmacies and to change pharmacies after services have begun. This right may be limited by the terms of health insurance, medical assistance, or other health programs.

### 4. Pharmacy Identity

Patients may request at any time the name, business address, and telephone number of their pharmacy.

**FIIRO GAAR AH:** Hadii aad ku hadasho Soomaali, waaxda luqadaha, qaybta kaalmada adeegyada, waxay idiin hayaan adeeg kharash la'aan ah. So wac 612-273-3780.

**ATENCIÓN:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 612-273-3780.

We comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex.

**5. Pharmacy Staff**

Patients have the right to identify the staff member of the pharmacy and their job title. Patients also have the right to speak with a supervisor of the staff member.

**6. Relationship with Other Services**

Patients who receive services from an outside provider are entitled, upon request, to be told the identity of the provider. Information will include the name of the outside provider, the address and a description of the service that may be rendered.

**7. Information about Medication Therapy**

The pharmacy will give patients complete and current information concerning their medication therapy. This information will be in terms and language the patients can reasonably be expected to understand.

**8. Information about Therapy Management Program**

Patients taking part in the Fairview Specialty Services Pharmacy (FSSP) Therapy Management Program have the right to know and understand details about the program. They have the right to get information about the program, including changes to the program or the end of the program.

**9. Participation in Planning Treatment Notification of Family Members**

Patients have the right to participate in the planning of their health care. This right includes the opportunity to discuss treatment and alternatives with individual caregivers, the opportunity to request and participate in formal care conferences and the right to include a family member or other chosen representative or both. If the patient cannot be present, a family member or other representative chosen by the patient may attend such conferences.

**10. Right to Refuse Care**

Competent patients have the right to refuse or end pharmacy treatment at any time. In cases where a patient is incapable of understanding the circumstances but has not been adjudicated incompetent, or when legal requirements limit the right to refuse treatment, the conditions and circumstances will be fully documented in the

patient's pharmacy record.

**11. Experimental Research**

Written, informed consent must be obtained prior to a patient's participation in experimental research. Patients have the right to refuse participation. Both consent and refusal will be documented in the individual care record.

**12. Freedom from Maltreatment**

Patients shall be free from maltreatment as defined in the Vulnerable Adults Protection Act. "Maltreatment" means the intentional and non-therapeutic infliction of physical pain or injury, or any persistent course of conduct intended to produce mental or emotional distress.

**13. Treatment Privacy**

Patients have the right to respectfulness and privacy as it relates to their care.

**14. Confidentiality of Records**

Patients shall be assured confidential treatment of their pharmacy records, and may approve or refuse their release to any individual outside the pharmacy. Copies of records and written information from the records will be offered in accordance with Minnesota statute 144.292: Patient Rights. This right does not apply to complaint investigations and inspections by the Department of Health, where required by third-party payment contracts or where otherwise provided by law.

**15. Disclosure of Service and Charges**

Patients will be informed, prior to or at the time of pharmacy service, of services that are included in any third-party payer reimbursement. Patients have the right to know what the charges are for services, no matter who will be paying the bill. Patients also have the right to know, in advance, any limits to the services available and the reason for a termination of services.

**16. Responsive Service**

Patients have the right to a prompt and reasonable response to their questions and requests.

### 17. Personal Privacy

Patients have the right to every consideration of their privacy, individuality and cultural identity as related to their social, religious and psychological well-being.

### 18. Grievances

Patients will be encouraged and assisted to understand and exercise their rights as patients and citizens. Patients may tell pharmacy staff and others of their choice about complaints or suspected error, and suggest changes in policies. This right exists free from restraint, interference, coercion, discrimination or reprisal, including threat of discharge. Notice of the complaint procedure of the pharmacy is available on the Fairview Pharmacy Services website: [fairviewrx.org](http://fairviewrx.org).

### 19. Protection & Advocacy Services

Patients have the right of reasonable access at reasonable times to any available rights protection services and advocacy services so that the patient may receive assistance in understanding, exercising and protecting the rights described in this section and in other law. This right will include the opportunity for private communication between the patient and a representative of the rights protection service or advocacy service.

## Your Responsibilities as a Patient

We want to make sure that you have the best possible experience while a patient of FPS. You can help by doing the following:

- **Provide accurate and complete health and contact information, as best you can. FSSP patients need to tell the Therapy Management Program of any changes in this information.**
- **Be honest and direct.**
- **Ask questions about anything you don't understand.**
- **Follow your treatment plan and accept the consequences if you don't.**
- **Know your medicines.**
- **Know your healthcare team.**
- **Be considerate of other patients and pharmacy staff.**
- **Submit any forms that are necessary to enroll in pharmacy programs.**
- **Provide all requested insurance and financial information.**
- **Sign the required consents and releases for insurance billing.**
- **Pay promptly for services or supplies delivered.**
- **FSSP patients must tell their doctor that they are taking part in the Therapy Management Program.**

FPS is committed to the policy that all persons shall have access to its services, programs, facilities and employment without regard to race, color, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status or sexual orientation. Contact your pharmacy or Fairview On Call, 800-824-1953, for information about access to material in another format.

**If you have questions about your rights or responsibilities, contact your Fairview pharmacy or the FPS office:**

**Fairview Pharmacy Services**

711 Kasota Avenue SE, Minneapolis, MN 55414  
612-672-5200

**If you have questions about your rights or care, contact:**

**Minnesota Board of Pharmacy**

2829 University Avenue South East, #530  
Minneapolis, MN 55414-3246  
651-201-2825

**Office of Health Facility Complaints**

P.O. Box 64970, St. Paul, MN 55101-0970  
651-201-4201 or 800-369-7994

**For concerns about your Medicare rights, including quality of care or premature discharge, contact:**

**Office of Ombudsman for Older Minnesotans**

P.O. Box 64971, St. Paul, MN 55164-0971  
651-431-2555 or 800-657-3591

**Medicare Quality Improvement Organization (QIO)**

KEPRO

5201 W. Kennedy Blvd, Suite 900, Tampa, FL 33609  
1-855-408-8557 or TTY 1-855-843-4776

[www.kepro.com](http://www.kepro.com)