Your Rights as a CUHCC patient

As a CUHCC patient, you have the right to:

- Courteous and respectful treatment.
- An interpreter.
- Receive and understand information about your care.
- Receive information about the clinic, such as, cost of services or providers available.
- Referrals for services not available at CUHCC, such as, to health care specialists or emergency services.
- Participate in the planning of your health care with your provider and to be informed about your diagnosis and treatment plan.
- Choose to include family members, friends, or a chosen representative to participate in your health care.
- Give Informed Consent\(^1\) for treatment of yourself or your minor child, meaning you understand and agree to treatment offered.
- Refuse procedures or treatments, but you may be treated without your consent in emergency situations or if you are under court order Civil Commitment\(^2\). Also, if the provider determines you are a threat to yourself or other, CUHCC reserves the right to contact Law Officials, and they may place you under a 72 hour hold.
- Confidentiality of all health and financial records in accordance with the Health Insurance Portability and Accountability Act (HIPAA).
- A copy of your health record.

\(^1\) Informed Consent means verbally agreeing to treatment based on a full explanation of your disease or condition, the recommended treatments, as well as alternative treatments.

\(^2\) Civil Commitment as ordered under Minnesota Statute Chapter 253B, can involve hospitalization or orders to follow certain treatment plans to treat persons with mental illness, or those who have other impairments that are unable and/or unwilling to seek treatment voluntarily, so as to protect patient or others from harm.

(continued on back)
Patient rights, continued

- Voice your complaints and comments in writing, or by speaking to the Patient Services Manager or any supervisor or by contacting: University of Minnesota Ureport [www.Ureport.umn.edu](http://www.Ureport.umn.edu). In addition, if your complaint is about the care you receive in the Mental Health clinic, you may also contact the Minnesota Department of Human Services by calling the Information Desk and asking for the Licensing Division at 651-431-2000 (TTY/TDD service: 800-627-3529).
- Ask to be treated by a different member of the staff, unless you are restricted by your insurance.
- Freedom from abuse and maltreatment.
- Healthcare providers that are licensed and credentialed to provide the services you receive.
- In accordance with Rule 29, Mental Health Clients have certain rights under Minnesota Law: MN Statute 144.651; MN Data Privacy Act; MN Statute 626.557; and MN Statute 626.556.

Your Responsibilities as a CUHCC patient

As a CUHCC patient, you have the responsibility to:

- Give correct personal and financial information and to report changes in information at each visit.
- Communicate accurate information about your symptoms and past health history.
- Let your provider know that you understand your treatment plan and what is expected of you.
- Ask questions when you do not understand something related to your care.
- Communicate your questions, comments, and concerns.
- Come to your appointments on time or cancel appointments if you are unable to attend.
- Be respectful to the clinic’s diverse staff, patients, and visitors by:
  - Avoiding profanity, threatening or intimidating language;
  - Not threatening to physically harm staff, visitors or other patients; and
  - Not damaging or taking clinic or staff property.
- Supervise your children (or children you have brought with you) while in the clinic.
- Contact your pharmacy if you are out of medication (at least 3 business days in advance).
- Bring any paperwork or forms that need to be signed or filled out by your provider in a timely manner.

Those who do not follow Patient’s Rights & Responsibility Policy may be asked to leave and are subject to dismissal from the clinic.