

Patient Rights

The Institute complies with NJAC 8:43A Manual of Standards for Licensure of Rehabilitation Hospitals, 8:43H-17.1 and CMMS 42 C.F.R. 482.13 Conditions of Participation policies and procedures regarding patient rights which states that:

- a. The facility shall establish and implement written policies and procedures regarding the rights of patients. These policies and procedures shall be available to patients, staff and the public and shall be conspicuously posted in the facility.
- b. The staff of the facility shall be trained to implement policies and procedures regarding patient rights.
- c. The facility shall comply with all applicable State and Federal statutes and rules concerning patient rights, including N.J.S.A. 52:27G-7.1. The State Office of the Ombudsman for the Institutionalized Elderly shall be notified of any suspected patient abuse or exploitation pursuant to N.J.S.A. 52:27G-7.1.

Each patient admitted in a rehabilitation hospital in New Jersey shall be entitled to the following rights pursuant to 42 C.F.R. 482.13 and N.J.A.C. 8:43H-17 et seq., none of which shall be abridged or violated by the rehabilitation hospital or any of its staff:

1. To treatment and services without discrimination based on race, age, religion, national origin, sex, sexual preferences, handicap, diagnosis, ability to pay, or source of payment;
2. The patient has the right to have a family member or representative of his or her choice and his or her own physician notified promptly of his or her admission to the hospital;
3. The patient, or when appropriate, the patient's representative (as allowed under state law), will be informed of the patient's rights, in advance of furnishing or discontinuing patient care whenever possible.
4. To be given, prior to the initiation of care, a written copy of the patient rights set forth in this subchapter and any additional policies and procedures established by the facility involving patient rights and responsibilities. If the patient is unable to respond, the notice shall be given to a family member or an individual who is a legal representative of the patient;
5. To be informed in writing of the following:
 - i. Services available from the rehabilitation hospital;
 - ii. The names and professional status of personnel providing and/or responsible for care; and
 - iii. Information regarding the filing of complaints with the New Jersey Department of Health and Senior Services, including the telephone number for the 24-hour Complaint Hotline at 1-800-792-9770 and the address for written complaints:

New Jersey Department of Health and Senior Services
Inspection, Compliance and Complaints Program
PO Box 360, Room 601
Trenton, New Jersey 08625-0360
 - iv. Joint Commission standards deal with organization quality and safety-of-care issues and the safety of the environment in which care is provided. Anyone believing that they have pertinent and valid information about such matters can write to:

Division of Accreditation Operations or Fax information to 630.792.5636
Office of Quality Monitoring E-mail to complaint@jcaho.org
The Joint Commission
One Renaissance Boulevard
Oakbrook Terrace, IL 60181
 - v. The Center for Medicare and Medicaid Services utilizes a local Quality Improvement Organization to address issues relating to patient complaints about quality of care or premature discharge. Anyone with concerns or complaints regarding the quality of care or premature discharge of a Medicare or Medicaid patient can contact:

Livanta • 6830 West Oquendo Road – Suite 202 • Las Vegas, NV 89118 • Phone: 866.815.5440 • Fax: 855.236.2423

The New Jersey Office of the Ombudsman for the Institutionalized Elderly is part of a national resident-focused advocacy program that seeks to protect the health, safety, welfare, and civil and human rights of older individuals in institutions. Anyone with concerns or complaints regarding the quality of care of a patient/resident in an institution may contact:

The NJ Office of the LTC Ombudsman • P.O. Box 852 • Trenton, NJ 08625-0852
Phone (Toll Free Intake Line): 877.582.6995 • Email: ombudsman@ltco.nj.gov • Fax: 609.943.3479 • www.nj.gov/ltco
6. To receive, in terms that the patient understands, an explanation of his or her plan of care, its expected results, and reasonable alternatives. If this information would be detrimental to the patient's health, or if the patient is not able to understand the information, the explanation shall be provided to a family member or an individual who is a legal representative of the patient and so documented in the patient's medical record;
7. To receive, as soon as possible, the services of a translator or interpreter to facilitate communication between the patient and health care personnel;
8. To request treatment and to receive the care and health services that have been ordered;

9. To participate in the planning of his or her rehabilitation care and treatment;
10. To refuse services, including medication and treatment, provided by the facility and to be informed of available rehabilitation hospital treatment options, including the option of no treatment, and of the possible benefits and risks of each option;
11. To refuse to participate in experimental research. If he or she chooses to participate, his or her written informed consent shall be obtained;
12. To receive full information regarding financial arrangements, including, but not limited to:
 - i. Fees and charges, including any fees and charges for services not covered by sources of third party payment;
 - ii. Copies of written records of financial arrangements;
 - iii. Notification of any additional charges, expenses, or other financial liabilities in excess of the predetermined fee; and
 - iv. A description of agreements with third-party payors and/or other payors and referral systems for patients' financial assistance.
13. To express grievances regarding care and services to the designated contacts on rehabilitation hospital's staff and governing authority without fear of reprisal, and to receive an answer to those grievances with a reasonable period of time;
14. To be free from mental and physical abuse and from exploitation;
15. To be free from restraints, unless they are authorized by a physician for a limited period of time to protect the patient or others from injury and implemented by trained staff;
16. To be assured of confidential treatment of his or her medical/health record, including the opportunity to approve or refuse in writing its release to any individual outside the rehabilitation hospital, except as required by law or third party payment contract;
17. To be treated with courtesy, consideration, respect, and recognition of dignity, individuality, and right to privacy, including, but not limited to, auditory and visual privacy and confidentiality concerning patient treatment and disclosures;
18. To be assured of respect for the patient's personal property;
19. To retain and exercise to the fullest extent possible all the constitutional, civil, and legal rights to which he or she is entitled by law, including religious liberties, the right to independent personal decisions, and the right to provide instructions and directions for health care in the event of future decision making incapacity in accordance with applicable federal regulations and the New Jersey Advance Directives for Health Care Act, N.J.S.A. 26:2H-53 et seq., and any rules which may be promulgated pursuant thereto;
20. To be informed by the attending physician and other providers of health care services about any continuing health care requirements after the patient's discharge from the hospital. The patient shall also have the right to receive assistance from the physician and appropriate hospital staff in arranging for required follow-up care after discharge;
21. To receive sufficient time before discharge to make arrangements for health care needs after hospitalization;
22. To be informed by the hospital about any discharge appeal process to which the patient is entitled by law;
23. To be transferred to another facility only for one of the following reasons, with the reason recorded in the patient's medical record.
 - i. The transferring hospital is unable to provide the type or level of medical care appropriate for the patient needs. The hospital shall make an immediate effort to notify the patient's primary care physician and the next of kin, and document that the notifications were received; or
 - ii. The transfer is requested by the patient, or by the patient's next of kin or guardian when the patient is mentally incapacitated or incompetent;
24. To receive from a physician an explanation for the transfer to another facility, information about alternatives to the transfer, verification of acceptance from the receiving facility, and assurance that the movement associated with the transfer will not subject the patient to substantial, unnecessary risk of deterioration of his or her medical condition. This explanation of the transfer shall be given in advance to the patient, and/or to his or her next of kin or guardian except in a life-threatening situation where immediate transfer is necessary;
25. To have prompt access to the information contained in his or her medical record, unless a physician prohibits such access as detrimental to the patient's health, and explains the reason in the medical record. In that instance, the patient's next of kin or guardians shall have a right to see the record. This right continues after the patient is discharged from the hospital for as long as the hospital has a

- copy of the record; and
26. To formulate advanced directives and to have those directives followed by the hospital and hospital staff.
 27. To obtain a copy of the patient's medical record, at a reasonable fee, within 30 days of a written request to the hospital. If access by the patient is medically contraindicated (as documented by a physician in the patient's medical record), the medical record shall be made available to a legally authorized representative of the patient or the patient's physician.

The Administrator shall also provide all patients and/or their families with the name, addresses, and telephone numbers of the following offices where information concerning Medicare coverage may be obtained:

Legal Assistance for Medicare Patients	or	Legal Assistance for Medicare Patients
C/O The Community Health Law Project		C/O The Community Health Law Project
530 Cooper Street		7 Glenwood Avenue
Camden, NJ 08102		East Orange, NJ 07010
Phone: 609.964.6073		Phone: 973.672.6073

These telephone numbers shall be conspicuously posted in the facility at every public telephone and on all bulletin boards used for posting public notices.

RH-PR-100L (Rev. 06/18)