## Tobii Dynavox - Patient Bill of Rights and Responsibilities

(Keep for your records)

## **Bill of Rights**

- Be fully informed in advance about service/care to be provided, including the disciplines that furnish care and the frequency of visits as well as any modifications to the service/care plan.
- Participate in the development and periodic revision of the plan of service/care.
- Informed consent and refusal of service/care or treatment after the consequences of refusing service/care or treatment are fully presented.
- Be informed, both orally and in writing, in advance of service/care being provided, of the charges, including payment for service/care expected from third parties and any charges for which the client/ patient will be responsible.
- Have one's property and person treated with respect, consideration and recognition of client/patient dignity and individuality.
- Be able to identify visiting staff members through proper identification.
- Voice grievances/complaints regarding treatment or care, lack of respect of property or recommended changes in policy, staff, or service/care without restraint, interference, coercion, discrimination, or reprisal.

Grievances or complaints may be sent in writing to:

Complaint Department Tobii Dynavox 2100 Wharton Street, Suite 400 Pittsburgh PA 15203

or

Office of Quality Monitoring The Joint Commission One Renaissance Boulevard Oakbrook Terrace, Illinois 60181 (800) 994-6610

- Have grievances/complaints regarding treatment orcare that is (or fails to be) furnished, or lack of respect of property investigated.
- Choose a health care provider.
- Confidentiality and privacy of all information contained in the client/patient record and of Protected Health Information.
- Be advised on agency's policies and procedures regarding the disclosure of clinical records.
- Receive appropriate service/care without discrimination in accordance with physician orders.
- Be informed of any financial benefits when referred to an organization.
- Be fully informed of one's responsibilities, listed below.
- Be informed of provider service/care limitations.

## Responsibilities

- Prior to receipt of equipment provider must be informed of any changes to medical insurance coverage.
- Upon delivery, all equipment must be inspected and any problems or issues with equipment reported to company within the 30 day return period. No returns or exchanges will be accepted beyond the 30 day return period.
- There will be no returns of custom ordered equipment such as non-stocked wheelchair mounting parts. You are responsible for providing us with correct information about your source of payment and ability to pay your bill.
- Become knowledgeable about his or her health plan coverage and health plan options (when available) including all covered benefits, limitations and exclusions, rules regarding use of network providers, coverage and referral rules, appropriate processes to secure additional information, and the process to appeal coverage decisions.
- The client/patient is responsible for warranty information and expiration dates. Reminders may be provided as a courtesy only.

## tobiidynavox