

Bill of Rights and Responsibilities

The purpose of this Bill of Rights and Responsibilities is to help enable and empower members to act on their own behalf and in partnership with their providers to obtain the best possible care and treatment.

YOU HAVE THE RIGHT TO:

- Apply for or decline any services for which you are eligible
- Receive services and treatment in a professional and courteous manner
- File a grievance or complaint if you are denied a service that you believe you are eligible to receive or if you believe that you have not received appropriate service and care
- Participate in the development and implementation of your plan of care
- Make informed decisions regarding your care
- Know who is responsible for coordinating your care
- Receive considerate and respectful care without discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation and gender identity or expression, as well as source of payment for care
- Expect your care to be given with regard to your safety and in a safe setting
- Expect care to be given in an environment free from all forms of abuse or harassment
- Receive appropriate assessment and management of pain
- Ask for and receive complete and understandable information about your condition and care
- Request and/or refuse treatment
- Have access to treatment facilities that are available and medically indicated
- Receive respect for your cultural and spiritual beliefs
- Formulate advance directives and expect that medical staff will honor these directives
- Have a family member or representative of your choice present during your appointment (unless the family member or representative's presence interferes with others' rights, safety or is medically contraindicated)
- Have a right to personal privacy
- Receive an explanation of your bill
- Request and receive information contained in your medical record within a reasonable time frame
- Expect that confidentiality of information in your medical record will be maintained
- Voice concerns to agency staff without fear of reprisal or discrimination
- Request assistance for concerns, or file a formal grievance with the Patient Advocate and receive a written response
- Utilize the agency's grievance process and/or file a complaint with the DPH Complaint Unit and/or Ryan White Office:

DPH Complaint Unit

2 Peachtree Street NW
Atlanta, Georgia 30303
Local Phone: (404) 657-5726
Toll Free Phone: (800) 878-6442

Ryan White Office

137 Peachtree Street SW
Atlanta, Georgia 30303
Local Phone: (404) 612-8285
Email: rwhiteprogram@fultoncountyga.gov

YOU HAVE THE RESPONSIBILITY TO:

- Develop and implement a Service or Care Plan with your care coordinator
- Submit eligibility documentation to your care coordinator as required; *Eligibility documentation and frequency varies based on program requirements*
- Notify staff if you need to cancel or reschedule an appointment

- Determine for yourself the safety and suitability of referrals; *AID Atlanta is not a certified housing inspection agency and is therefore not liable for the unsuitability of housing facilities that are not under our direct purview*
- Maintain your medical care and attend appointments with your primary care physician at a minimum of once annually (6 months for case management)
- Provide updated contact information (including emergency contacts)
- Provide complete and accurate health, medical, and insurance information, including an advance directive, if available
- Ask questions when in doubt
- Communicate changes in your health and/or condition to your care coordinators
- Follow your caregivers' instructions or discuss with your caregivers any obstacles you may have in complying with their prescribed treatment plan
- Accept responsibility for refusing treatment or not following your prescribed treatment plan
- Be aware that your right to be involved in your plan of care does not include receiving medically unnecessary treatment
- Meet financial obligations associated with the health care services received
- Respect and follow agency rules, including those that prohibit offensive, threatening, and /or abusive language or behavior
- Contact the VP of Quality and Compliance directly, or contact the Comment Line anonymously, if our staff have been unable to resolve your question(s) or concern(s):

Patient & Family Advocate
 VP of Quality and Compliance
 Office of Compliance
 Phone: (404) 870-7780

Anonymous Comment Line
 Phone: (404) 872-0600

ADDITIONAL INFORMATION

Agency Grievance Procedures:

- ***Clearly and respectfully tell the person that you are seeing that you are not satisfied and why.*** It is your role to clearly communicate concerns directly to the care coordinator providing services. You and the provider should talk through the issue and try to resolve the complaint. If the complaint is unresolved at the provider level, the staff person refers the complaint to the supervisor for follow up.
- ***Contact the supervisor of the person that you saw to express your concerns.*** In the case that you would like to escalate the complaint, you may opt to speak with the supervising Group Manager (GM). The GM will make a reasonable effort to resolve the problem or complaint. Any and all parties may request that you, the GM and the staff person meet to resolve the complaint. At a minimum, the GM will contact you for details regarding the complaint and make an effort to achieve resolution. The resolution is documented in your record, and a copy of the resolution is provided to you.
- ***Contact the unit leadership.*** If you are dissatisfied with the response of the GM, the grievance should be presented to the Chief Program Officer (CPO) or VP of the unit or department. The CPO or VP will document your concerns and employ corrective action as appropriate.
- ***Contact the VP of Quality/Compliance to explore ways to resolve the complaint.*** If the complaint remains unresolved by the service provider and the GM, you may speak with the VP of Quality/Compliance. The VP of Quality/Compliance facilitates investigative interviews with key parties, reviews relevant documentation, and works with all those involved to achieve a resolution. The VP of Quality/Compliance informs the unit leadership of the status of the grievance and provides a written account of the grievance.
- ***Request to present your case to the Joint Review Panel.*** If the complaint is still unresolved at this time, a referral is made to the Joint Review Panel. You may present your case and express the desired outcomes. The committee will hear the case and make a final decision regarding appropriate action or resolution.

AID Atlanta reserves the right to ban any individual or member from receiving program or other services in the event that that individual is a threat to the safety of the premises, the staff and other members or volunteers at AID Atlanta. If a member is banned from the agency, re-activation of that member's case will be determined only on a case-by-case basis by agency management. Factors such as the severity of the member's behavior, proof of the member's willingness to address inappropriate behavior, other agency character references/letters of support, level of security risk to all staff, and other factors will be considered if a "banned" member requests formal reconsideration of his/her member status. All requests for reconsideration of a member's "banned" status must be made in writing by that member to the Executive Director of the agency at Chief Executive Officer, AID Atlanta, Inc., 1605 Peachtree Street NE, Atlanta, GA 30309. AID Atlanta will provide the member with a written and/or verbal disposition of the decision regarding his/her request for reconsideration within 45 business days. If a member's reconsideration request is disapproved by management, the member will not be eligible for additional requests for reconsideration until one year from the date of the written disposition.

AID Atlanta employs a member-centered approach that focuses on the needs, interests, goals, autonomy, and self-determination of the member.