Patient Rights and Responsibilities

PeaceHealth Whatcom Hospice - Revised & Approved 9/2025

All PeaceHealth Whatcom Hospice Patients and Their Representative have the right to:

- 1. Be informed of their rights in a language and manner the individual understands. Written notice must be understandable to persons who have limited English proficiency and accessible to individuals with disabilities.
- 2. Exercise their right.
- 3. Have their property and person treated with courtesy, respect, and privacy.
- 4. Be free from verbal, mental, sexual, and physical abuse, including injuries of unknown source, neglect, exploitation, discrimination, mistreatment and misappropriation of property.
- 5. Make complaints or grievances regarding treatment or care that is (or fails to be) furnished, and the lack of respect for property and/or person by anyone who is furnishing services on behalf of PeaceHealth.
- 6. Be free from any discrimination or reprisal for exercising their rights or for voicing grievances to PeaceHealth or an outside entity.
- 7. Privacy and confidentiality of personal information and health care related records. The patient's medical history is released only as required by law or authorized by the patient or the patient's legal representative.
- 8. Be advised of the names, addresses, and telephone numbers of the following Federally funded and State funded entities that serve the area where the patient resides:

Agency on Aging

Whatcom Council on Aging 315 Halleck Street, Bellingham, WA 98225 (360) 733-4030 whatcomcoa.org

• Center for Independent Living

Center for Independence 7801 Bridgeport Way W #200 Lakewood, WA 98499 Phone (253) 582-1253 Toll-free Phone 1-888-482-4839 Fax (253) 584-4374

www.cfi-wa.org

Email: info@cfi-wa.org

Protection and Advocacy Agency

Disability Rights Washington 315 5th Ave S, Ste 850

Seattle, WA 98104

Voice: (800) 562-2702 or (206) 324-1521; Language interpreters are available upon request. Please use 711 for Washington Relay Service (TTY). Collect calls from correctional facilities are accepted.

E-Mail: info@dr-wa.org

• Aging and Disability Resource Center

Washington State Department of Social and Health Servies (DSHS)

Bellingham Community Services Office

4101 Meridian St.

Bellingham, WA 98226

Primary Phone: (877) 501-2233

TTY: (800) 833-6384 Fax: (888) 338-7410

WashingtonConnection.org

• Quality Improvement Organization

Acentra Health Beneficiary Helpline: 1-888-305-6759

- 9. Be informed of the right to access auxiliary aids and language services, and how to access these services.
- 10. Receive effective treatment and quality services identified in the plan of care.
- 11. Receive services without discrimination based on race, color, religion, national origin (including limited English proficiency and primary language), sex (including sex characteristics, including intersex traits, pregnancy or related conditions, sexual orientation gender identity, or sex stereotypes), age, disability (including mental illness and substance use disorders) or any combination thereof with regard to admission, access to treatment or employment.
- 12. Receive all services outlined in the plan of care.
- 13. Be cared for by appropriately trained or credentialed personnel, contractors and volunteers properly trained to perform assigned tasks with coordination of services.
- 14. Ongoing participation and involvement in the development of the plan of care.
- 15. Accept or refuse care, treatment or services.
- 16. Make health care decisions.
- 17. Execute an advance directive and/or power of attorney for health care.
- 18. Be informed of PeaceHealth's policies and procedures regarding:
 - The circumstances that may cause PeaceHealth to discharge a patient
 - The circumstances that may cause PeaceHealth to transfer the patient to another agency
 - Circumstances necessitating a change in the level of care or ongoing care requirements
 - Other available services and options, if needed.

- 19. Receive information about PeaceHealth's policies on advance directives, including a description of applicable state law.
- 20. Receive effective pain management and symptom control identified in the plan of care.
- 21. Be free from the unlawful use of restraint or seclusion.
- 22. Choose their hospice attending physician, if they choose to do so.
- 23. Receive information about the services covered under the hospice benefit.
- 24. Receive information about the scope of services that PeaceHealth will provide and specific limitations on those services.
- 25. Have access to the state's listing of licensed hospice agencies and to select any agency to provide care, subject to the individual's reimbursement mechanism or other relevant contractual obligations.
- 26. Receive a listing of the total services offered by PeaceHealth and those being provided to the patient.
- 27. Be provided with the name of the individual responsible for supervising the patient's care and the manner in which that individual may be contacted.
- 28.Be informed of what PeaceHealth charges for services, to what extent payment may be expected from health insurance, public programs, or other sources, and what charges the patient may be responsible for paying.
- 29. Receive a fully itemized billing statement upon request, including the date of each service and the charge. Agencies providing services through a managed care plan are not required to provide itemized billing statements.
- 30. Be informed about advanced directives and POLST and PeaceHealth's scope of responsibility.
- 31. Be informed of PeaceHealth's policies and procedures for providing back-up care when services cannot be provided as scheduled.
- 32. Be informed of the state's complaint hotline number to report complaints about the PeaceHealth or credentialed health care professionals.
 - 1-800-633-6828
- 33. Be informed of the DSHS end harm hotline number to report suspected abuse of children or vulnerable adults.
 - 1-866-ENDHARM (1-866-363-4276) or TTY at 1-800-624-8186

