



Welcome to Carteret Health Care

Welcome to Carteret Health Care! We are honored that you have chosen us for your care. Our dedicated team of healthcare professionals is committed to providing you with the highest quality of treatment and support during your stay.

We understand that being in a hospital can be a challenging experience, and we want to ensure that you feel comfortable, informed, and cared for. Our goal is to partner with you on your journey to health, and we encourage you to ask questions and share your concerns with our staff at any time.

In this packet, you will find essential information about our services, your rights as a patient, and resources available to help make your experience as pleasant as possible. Please remember, we are here for you and are dedicated to your well-being. For any special concerns or issues which you would like to be addressed by our staff, please speak with your nurse, physician, or the nursing unit director. You may also call our Care Call Line at 252-499-6091. A representative of the hospital will respond by the next day.

At Carteret Health Care, you will be cared for by a highly trained team of competent and compassionate physicians, nurses and staff who are experts in their respective fields. These individuals look forward to delivering care that is safe and of the highest quality. Please never hesitate to ask them any questions you may have or to make requests that will help ensure that your stay is as pleasant and positive as we can make it.

Thank you for trusting us with your care. We wish you a smooth recovery and a positive experience here at Carteret Health Care.

Sincerely,

Your Carteret Health Care Family



Our Mission

Promoting wellness and service to our community through exceptional quality and compassionate care.

Vision

To be the leader in health and wellness.

Values

- C**ommunity
- O**utreach
- A**ccountability
- S**afety
- T**rust
- A**ttentiveness
- L**oyalty

My Health Portal



The My Health Portal is an online tool where you can view your Carteret Health Care electronic health record ensuring that you have access to the most accurate, up-to-date information possible.

You can:

- Access your health information online, versus over the phone or in person.
- Request appointments.

To enroll, you will need your medical record number. This information can be found on the wristband issued at the time of registration and/or on the discharge instructions provided from the hospital or emergency department. If neither of these are available, you will need to contact Health Information Management and present a photo ID.



Scan this code for
quick access to the
My Health Patient Portal

Visit our website
CarteretHealth.org



- **CLICK ON** Patient Resources My Health Portal → **CLICK ON** Patient Enrollment link.
- Complete the Enrollment Questionnaire (Name, DOB, email, etc.).
- Access your email and click on your one-time portal login link.
- Create a username, password, and security questions and click submit.
- Access your account immediately after creating username and password.

If you have additional questions, please call 252-499-6677 or by email myhealth@carterethealth.org

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TELEPHONE & HOSPITAL DIRECTORY

How to make phone calls:

- For local calls, dial 9 and 7-digit number
- For long distance calls, dial 9,0, area code + seven digit number. You will not be able to bill calls to your hospital room.
- Dial "0" for the operator.
- To adjust the handset volume, press the up or down volume button when the handset is in use and press the Save key to save changes.

General Information: (252) 499-6000

To reach the switchboard or to find the number for departments within the hospital

CONDITION H (HELP): (252) 499-4911

Call 4911 from a hospital phone.

If you notice serious medical changes in a patient's condition and you are concerned there is a medical emergency that needs immediate attention, please discuss with your nurse and care team first. If you are still concerned, call Condition H for an Emergency Response Team.

CARE CALL LINE (Concerns or praise): (252) 499-6091

To contact the hospital regarding praise, problems, questions, or to offer suggestions, call the CHC Care Call Line 24 hours a day, 7 days a week.

From Outside the Hospital

To reach a patient dial (252) 499-6000 and enter the five digit room #.

Patient Privacy Issues: (252) 499-6101

Patient Privacy issues may be reported by calling the Privacy Officer.

Gift Gallery: (252) 499-6048

Lost & Found: (252) 499-6004

Medical Records/Health Information Management: (252) 499-6528

The Release of Information desk is open M-F 8:30 a.m. – 5:00 p.m.

Patient Portal: (252) 499-6677

Patient Accounts: (252) 499-6506

Security: (252) 499-6004

Social Worker: (252) 499-6235

Spiritual Care, Chaplain: (252) 499-8402

To request a visit from one of our chaplains.

ADMISSION

Your Admission

When you arrive for admission, it is important that you bring the following information:

- Insurance Cards
- Medicare/Medicaid Cards
- A list of your current medications
- Advance Directives (Living Will, healthcare Power of Attorney)
- Discharge arrangements (Determine who will pick you up from the hospital, and where you will go after you leave the hospital)
- Any information from your physician.
- Personal items (pajamas, slippers, robes, etc.). You are strongly urged to leave valuables at home or send them home with relatives. If this is not possible, they may be placed in the hospital safe until discharge. Denture cups may be provided upon request. Please remember to take care of your glasses and dentures.

Hospitalist

A hospitalist is a physician who specializes in caring for patients who have been admitted to the hospital. Generally, hospitalists are internal medicine or family medicine physicians. These physicians will partner with you, your family, and your primary care physician to provide excellent care while you are in the hospital.

Health Care Team

Your health care team consists of a doctor who will monitor you closely and write the orders that determine what medicines, tests, therapies and procedures you receive. Your doctor may call in other doctors or specialists to consult on your case.

The people you will see most often are the nurses on your floor. They work together to carry out your treatment while constantly assessing your progress and reporting to the physician. The nursing staff consists of Registered Nurses (RN) who oversee Licensed Practical Nurses (LPN), and Certified Nursing Assistants (CNA). You will also see other highly skilled medical professionals who perform the procedures and tests you need.

Medical Records/Health Information Management Department

The Health Information Management Department is open to the public Monday through Friday, except for holidays. An Authorization for Release of Personal Health Information Form is available online, as well as from the department. Please be sure to bring a picture ID when you come to complete a request and or pick up the copy of your medical record. There is a fee, per page, for copied records as set by the State of North Carolina. Records may take 72 hours or longer to be copied and available for pick up, depending on the amount of documentation requested. The Health Information Management Department can be reached at 252-499-6528.

In-Patient and Observation

Observation is a special outpatient service at a hospital that allows your doctor to watch your condition for changes and gives your doctor time to gather additional information about your condition. Regulatory agencies set forth criteria that a patient's clinical condition determines their admission status, inpatient or outpatient observation.

It is important to know that Medicare pays for Observation stays as an outpatient service. Part B Medicare covers Outpatient hospital services including, but not limited to, Emergency Room, Outpatient Surgery, Cardiopulmonary services, Laboratory services, Radiology services and Observation. You may be financially liable for copays and deductibles.

During your hospital visit, you may receive services from other third party healthcare providers who bill separately for their services. Carteret Health Care may provide your insurance information to these providers. Some of these providers may include your physician, doctor, emergency surgeon or consultant, radiologist, anesthesiologist and pathologist.

Regardless of your admission status, your Health Care Team and supporting services personnel will deliver exceptional, safe and compassionate care to you.

PATIENT SAFETY, COMFORT & CONCERNS

SAFETY

Medication Management

Our pharmacy is staffed 24 hours a day by a team of pharmacists and nationally certified technicians who are experts on medications, how they work in the body, and how to use each one safely and effectively. Pharmacists in our hospital work closely with our physicians, serving as an information resource on new drugs, drug interactions, and proper medication use. Pharmacy staff members are always available to answer questions and assist physicians in any way. Our pharmacists and technicians also work with the nursing staff on a daily basis to ensure safe medication administration. Our pharmacy staff encourage you to take an active role in your care by keeping a list of all drugs you take, (even herbals, over-the-counter, vitamins, topical ointments), sharing this list with your physicians.

Speak Up

You have rights and a role regarding your treatment and care. These questions and answers will help you find out about your rights and role as a patient.

What is your role in your health care?

- Be active in your health care.
- Ask questions.
- Pay attention to the instructions given to you by your caregivers. Follow the instructions.
- You should share as much information as possible about your health with your caregivers. For example, give them an up-to-date list of your medicines and remind them about your allergies.

Care Partner

A Care Partner is someone chosen by the patient to help them during and **after** their hospital stay. The Care Partner also helps the team better understand the patient's needs and preferences and assists with the transition home or to post-hospital care. Care Partners can be family members, friends, neighbors or paid assistants. Whomever you choose, you should be comfortable discussing your healthcare with that person. If you have any questions about Care Partner, please contact the Care Call Line at 252-499-6091.

COMFORT

Food Services

For Patients:

Your physician prescribes your diet and modified diets may be part of your treatment. Selective menus are available for all diets, except liquid diets. You will be provided an opportunity to select your own menu within the guidelines of your diet. Patients may be NPO, (nothing by mouth) for a test or procedure. When the test is completed and it is approved by your physician, the staff can order a late tray for you. There is a limited variety of snacks available on each floor that may be distributed by staff upon request of the patient.

Registered dietitians are available for individualized medical nutrition therapy for patients. Please let your Health Care Team know if you would like to meet with your dietitian. For all other questions or concerns about your meals/diet, call 499-6118.

For Visitors:

The Cafeteria is located on the first floor of the hospital. Visitors may purchase drinks and snacks anytime during the day. Meals are served during the following hours:

Breakfast: 6:00 a.m. – 9:30 a.m.

Lunch: 11:00 a.m. – 1:30 p.m.

Dinner: 4:15 p.m. – 6:30 p.m.

A coffee kiosk, The Java Stop, is also available on the first floor Monday - Friday, 7AM-2PM.

Electrical Equipment

Electronic devices from home must be inspected. Please advise your Health Care Team of any electronics in your possession.

Communication with Your Team

You will notice a Communication of Care Board on the wall of your room, where our staff will keep you notified of the date and the names of your charge nurse, assigned nurse and nursing assistant for each shift. The Communication of Care Board in your room will also have a "Goal for the Day" posted. These goals are aimed at improving your condition. We ask for your input on these goals.

Meeting your needs is important to us. Use the buttons on your bedside rail to call the nursing station if you need us. There is always someone available to answer your call. We will do our best to assist you in a timely manner while providing you and all of our patients the highest quality of care. Our nurses carry in-house cell phones which make it easier for the doctors, the lab, and other departments of the hospital to reach your nurse. Additionally, the phones notify your Health Care Team of any changes detected by your heart monitor.

Spiritual Care/Ethical Issues/Advanced Directives

Chaplains visit the patient areas regularly to determine the spiritual and emotional needs of patients. The ministry of the chaplain is intended to complement the ministry of the patient's pastor. Visits from your pastor are always welcomed. A Chapel is available on the first floor in the main lobby area.

Sometimes a hospitalization can bring up an ethical issue or concern. Carteret Health Care has an Ethics Committee available for consults to work through such issues. To request an ethics consult, please call 252-499-6402. The Chaplain also provides assistance with information regarding advance directives such as Living Wills and Health Care Power of Attorney documents.

Pet Therapy Program

You may have a bedside visit with one of our certified therapy dogs during your stay with us. Please ask your Health Care Team for more information and we will be glad to visit you. All therapy dogs and handlers are extensively trained and certified in the Pet Therapy Program.

Smoking Cessation

Carteret Health Care provides smoking cessation services to patients during and after their admission. A host of cessation options are available upon admission if you have used tobacco in the past 12 months. If you want to quit using tobacco, you may contact your Health Care Team regarding assistance.

Gift Gallery

The hospital gift shop is staffed by volunteers and offers a wide variety of items for patients and visitors such as personal care, chargers, and flowers.

CONCERNS

Lost and Found

Personal belongings that are left by patients are kept by the Public Safety Department for three months. You can reach the Public Safety Department by calling (252) 499-6004.

HIPAA (Health Insurance Portability and Accountability Act of 1996)

Carteret Health Care is committed to giving the best care while respecting your privacy. We believe in the privacy of your medical record and comply with all rules that address privacy. HIPAA is a set of rules that the Federal Government has issued to assure your individual privacy rights. HIPAA stands for Health Insurance Portability and Accountability Act of 1996. By complying with HIPAA standards, Carteret Health Care meets their terms for the privacy and security of your medical record.

HIPAA provides you several specific rights. You may:

- request limitations (in writing) on the use of your medical record.
- request that Carteret Health Care contact you at a different address.
- ask for a copy of your medical record.
- also request a change in your medical record.

We will do our best to meet your requests pending no limitations are placed on us by the law or by your doctor. Please see our Notice of Privacy Practices for more information on how we protect and use your information. If you do not have a copy, please let your Health Care Team know. We will be happy to provide you with one.

Care Call Line & Patient Concerns

If you have questions, praise, or concerns about your care and treatment, we encourage you to share these with your Health Care Team. If after speaking with your nurse you feel as though your concerns were not addressed, please ask to speak to the director of the department in which you are staying.

- To contact the hospital regarding praise, problems, questions or to offer suggestions, please call Carteret Health Care's Care Call Line, (252) 499-6091 or email carecall@carterethealth.org
- Patient privacy issues may be reported by calling the Privacy Officer at (252) 499-6101.
- For Patient Account concerns or questions, contact the Billing Department directly at (252) 499-6506.

If your questions or concerns have not been resolved by any of the above ways, you are encouraged to contact NC DHSR or The Joint Commission's Office of Quality Monitoring at Division of Accreditation Operations, Office of Quality Monitoring, The Joint Commission, One Renaissance Blvd., Oakbrook Terrace IL 60181, Phone: 1-800-994-6610, Fax:(630) 792-5636, email complaint@jointcommission.org.

You can contact NC DHSR for complaints through their website: <http://www.ncdhhs.gov/dhsr/ciu/filecomplaint.html> or by phone: Complaint Hotline: 1-800-624-3004, (within N.C.) or 919-855-4500. Complaint Hotline hours: 8:30 a.m. – 4:00 p.m. weekdays, except holidays. You can also fax your information to 919-715-7724 or mail complaints to: Complaint Intake Unit, 2711 Mail Service Center, Raleigh, NC 27699-2711

PATIENT RIGHTS & RESPONSIBILITIES

Your Rights as a Patient at Carteret Health Care

In adopting the Patient's Bill of Rights and Responsibilities, the Board of Directors of Carteret Health Care declares the "observance of the rights and responsibilities will contribute to patient care and yield greater satisfaction for our patients, physicians and the hospital organization." The rights and responsibilities "are supported by the hospital on behalf of its patients, as an integral part of the healing process."

A patient has the right to:

1. Obtain considerate and respectful care as a patient in a safe setting regardless of age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression and/or the source of payment for that care.
2. Obtain from your physician complete current information concerning your diagnosis treatments, and prognosis in terms you can reasonably be expected to understand, and to know by name the physician coordinating your case as well as the names of other physicians participating in your care.
3. Receive from your physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include, but not necessarily be limited to, the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to know the names of the persons responsible for the procedures and/or treatment.
4. Get information about your care in your preferred language. We have a language line available. You also have a right to get information in a manner that meets your need regardless of vision, speech, hearing or mental disabilities.
5. Expect information about pain and pain relief, a concerned staff committed to pain management, health professionals who respond quickly to reports of pain and assurance that reports of pain will be believed.
6. Actively participate in decisions regarding your care including the right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of your action.
7. Full consideration of your privacy including the right to grant permission to those not directly involved in your case to be present for case discussion, consultation, examination, and treatment and to receive every consideration of your own privacy concerning your own medical case program. You can grant these same rights to any person you have given legal responsibility to make decisions on your behalf.
8. Expect that all communications and records pertaining to your case should be treated as confidential. Written permission is required to provide medical records to anyone not involved in your care.
9. Be transferred to another facility only after you have received complete information and explanation concerning the needs for, and alternatives to such transfer.
10. Obtain information as to any relationship of your hospital with other healthcare and educational institutions insofar as your care is concerned and to obtain information as to the existence of any relationship among individuals who are treating him/her.

11. Be advised if the hospital proposes to engage in, or perform, human experimentation affecting your care or treatment and to refuse to participate in such activities.
12. Responsible continuity of care and to know in advance what appointment times and physicians are available and where.
13. Receive your hospital bill and have it explained to you along with information or inquiries about paying your bill, filing insurance forms and financial assistance regardless of the source of payment.
14. Know what hospital rules and regulations apply to your conduct as a patient.
15. Have your cultural, psychosocial, spiritual and personal values, beliefs and preferences respected. You have the right to Ethical or Spiritual services if requested.
16. Formulate advance directives and to have the healthcare staff honor your wishes, within the limits of the law.
17. Present complaints or suggestions through the appropriate mechanism and to expect a response from the hospital. Presentation of a complaint will never compromise a patient's access to care.
18. Have a family member or individual of your choice with you for emotional support during your stay unless the visitor compromises your or other's rights, safety or health. You also have the right to refuse visitation.
19. Be informed of continuing healthcare needs/requirements following discharge from the hospital.

PRIVACY

We understand that information about you and your health is personal. We are committed to protecting your health information. We will create a record of the care and services you receive at Carteret Health Care, its subsidiaries and other related entities. We use and share this record to provide you with quality care and to comply with certain legal requirements. This record will be available to all health care professionals who need access as described in this Notice, many of whom will be involved in your treatment at any of our facilities or practices. This Notice will apply to all of the records of your care that we maintain.

This Notice will tell you about the ways we may use and share your health information. It also describes your rights and certain obligations we have regarding how we use and share your health information.

We are required by law to:

- † Maintain the privacy of your health information as outlined in this Notice
- † Provide you Notice of our legal duties and privacy practices with respect to your health information.
- † Follow the terms of the Notice that are currently in effect.

Who Will Follow This Notice?

- † Any health care professional authorized to enter information into your Carteret Health Care medical record, including doctors on the medical staff and other providers and personnel while at one of our health care facilities or practices.
- † All employees, staff, volunteers, and other personnel.

In addition, our facilities may share health information with each other for treatment, payment or healthcare operations as described in this Notice.

How Is Your Information Used?

For Treatment: We may use and share your health information to provide, coordinate, or manage your health care and related services, both among our own providers, and with others involved in your care. For example, a doctor treating you for a broken leg may need to know if you have diabetes because it affects the healing process. S/he may tell the dietitian so you can have appropriate meals. S/he may tell a case manager so you can get proper resources at discharge. Additionally, different Carteret Health Care departments may share your health information in order to coordinate the different things you need, such as prescriptions, lab work and x-rays.

For Payment: Generally, we may use and share your health information with others to bill and collect payment for the treatment and services we provide to you. Before you receive scheduled services, we may contact your health plan to ask for approval of payment, or we might contact Medicare or Medicaid to inquire as to whether you qualify for coverage. Also, we may share portions of your health information with billing departments, insurance companies, health plans and their agents, and consumer reporting agencies. For example, if you broke your leg, we may need to share information about your condition, the supplies used (such as plaster for your cast or crutches), and the services you received, (such as x-rays or surgery) with your health plan so they will pay.

For Health Care Operations: We may use and share health information to conduct our business activities and health care operations that assist us in improving the quality and cost of the care we provide to you and other patients. For example, we may look at patient records to review our treatment and services and to evaluate the performance of our staff. Also, we may use patient health information to decide what new services we should offer, what services are not needed, and whether certain new treatments are effective. We may share information for education, licensing, legal and other purposes.

Appointment Reminders: We may use and disclose medical information to contact you as a reminder that you have an appointment for treatment or medical care.

Treatment Alternatives: We may use and disclose medical information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

Health-Related Benefits and Services: We may use and share health information to tell you about health related benefits or services that may be of interest to you, or to tell you about new facilities that we are opening.

Business Associates: We sometimes hire other companies to help us perform our services or operate our entities. We may share your health information with them so that they can perform the job we have asked them to do. We require them to protect your health information and keep it confidential. For example, we may hire a transcription service to transcribe parts of your medical record, or collection agencies to collect payment.

Uses Of Health Information From Which You May Opt Out

Fundraising Activities: We may use your health information to contact you in an effort to raise money for Carteret Health Care and its operations. We may share health information with a related foundation which may contact you regarding raising money for a treatment or service related cause. You have a right to opt out of fundraising communications.

Hospital Directory (Census Listing): Unless you opt out, we may include your name, location in the hospital, and your general condition, (e.g., good, fair, serious, etc.) in the hospital directory while you are a patient. The directory information may be released to people who ask for you by name. Unless you opt out, we can also share this information, as well as your religious affiliation, with clergy affiliated with your faith, regardless of whether they ask for you by name. To opt out of being included in the directory, notify the staff member registering you or providing your care.

Mental Health: If you received treatment at a mental health facility, your information can be shared with other providers outside of the mental health facility for purposes of treatment, payment, and health care operations. For example, if you are having surgery at a hospital, your surgeon can review your mental health treatment information to make sure the plan of care is right for you. You have the right to opt out of the mental health facility information being available by requesting the Opt Out Form from your mental health provider and submitting it. Please allow five (5) business days for the opt out to take effect. You can opt back in by giving similar notice. Note that there are some situations in which we can share your mental health information even if you opt out, such as in an emergency.

Individuals Involved in Your Care or Payment for Your Care: We may release medical information about you to a friend or family member who is involved in your medical care, (for example: spouse, parent, guardian, children, etc.) while you are in the hospital or in the care of one of the entities of Carteret Health Care. In addition, we may disclose medical information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status and location.

Research: Under certain circumstances, we may use and disclose medical information about you for research purposes. For example, a research project may involve comparing the health and recovery of all patients who receive one medication to those who receive another, for the same condition. All research projects, however, are subject to a special approval process. This process evaluates a proposed research project and its use of medical information, trying to balance the research needs with patients' need for privacy of their medical information. Before we use or disclose medical information for research, the project will have been approved through this research approval process, but we may, however, disclose medical information about you to people preparing to conduct a research project, for example, to help them look for patients with specific medical needs, so long as the medical information they review does not leave the hospital. We will almost always ask for your specific permission if the researcher will have access to your name, address or other information that reveals who you are, or will be involved in your care at the hospital.

Health Information Exchanges

We may provide your health care information to a health information exchange (HIE) in which we participate. A HIE is a health information database where other health care providers caring for you can access your medical information from wherever they are if they are members of the HIE. These providers may include your doctors, nursing facilities, home health agencies or other providers who care for you outside of our hospitals or our practices. For example, you may be traveling and have an accident in another area of the state. If the doctor treating you is a member of the HIE in which we participate, s/he can access the information about you that other providers have contributed. Accessing this additional information can help your doctor provide you with well informed care quickly because s/he will have learned about your medical history or allergies or prescriptions from the HIE. If you do not want your medical information to be contributed to the HIE and shared with these member health care providers, you can opt out by completing the Opt Out Form. It will take five business days for the opt out to go into effect. Note that if you opt out, your providers may not have the most recent information about you which may affect your care.

Special Situations

In some situations, we may use or share your health information without your permission or allowing you an opportunity to object. Examples of these situations include:

When Required by Law

For Organ, Eye or Tissue Donation Purposes

For Public Health Activities (such as to prevent or control disease, injury, or disability; to report reactions to medicine or problems with medical products, etc.)

For Health Oversight Activities

For a Legal Proceeding

To Law Enforcement

To Avoid a Serious Threat to Health or Safety

To Coroners, Medical Examiners and Funeral Directors

For Disaster Relief

For Research

For Specialized Government Functions

For Workers' Compensation

State And Federal Laws

Sometimes, state or federal laws require us to protect or share your health information in keeping with or in addition to the ways stated in this Notice. For example, State Law protects your health information under the doctor-patient privilege. There are also situations when we are required or permitted to share your information under the law, such as to report gunshot wounds or child abuse. The following are just a few examples of some common situations where state or federal laws require us to protect or share your information:

Treatment for Drug and Alcohol Use: If you receive treatment for drug or alcohol use in a federally funded rehabilitation center, federal laws prevent us from releasing that information, except in certain situations. For example, if there is an emergency or if you threaten to hurt someone, we can share the information as necessary.

Unemancipated Minors: In North Carolina, if you are under the age of 18, are not married and have not been legally emancipated, you can consent to treatment for pregnancy, drug and/or alcohol abuse, venereal disease, or emotional disturbances without an adult. This information will remain confidential, unless your doctor determines your parents or guardian need to know this information because there is a serious threat to your life or health. Note that minors are still required to get parental or court consent for an abortion.

Inspections and Surveys: One or more of our facilities and services are subject to inspection by state and federal agencies and accreditation representatives who may review patient health information, which we are required to provide. For example, the State may ask to review records as part of their review of our hospitals license or review of a complaint, (you may have certain rights to object to review of your record). Additionally, a licensing board may review records when evaluating a providers' qualifications or investigating a matter.

Other Uses Of Health Information

Before we use or share your health information in a manner not covered by this Notice or required or permitted by applicable laws, we will ask for your written permission. We may also remove all identifiers from your information to make it anonymous, and use or share it for other purposes.

Your Rights Regarding Your Health Information

You have the following rights regarding the health information we maintain about you:

1. Access To A Copy Of Your Health Records

You can ask to see and get a copy of your health record and other health information. You may not be able to get all of your information in a few special cases. For example, if your doctor decides something in your file might endanger you or someone else, your request for access may be denied.

† In most cases, copies of your health record will be given to you within 30 days, but this time frame can be extended for another 30 days, if needed.

† You may have to pay for the cost of copying and mailing if you request copies and mailing.

To request a copy of your health record, you must complete an Authorization for Disclosure of Health Information and submit it to Medical Records.

2. Revoke An Authorization

If you have provided us permission to use or share your health information, you may revoke that permission at any time by writing a letter to Medical Records. If you revoke your permission, we will no longer use or share your health information for the reasons covered by your written authorization. You understand that we are unable to take back any information we have already shared before you notified us of your revocation.

3. Request Changes To Your Health Information

You can ask to change or add information to your health record that you think is wrong or incomplete. A request to change your health information is also known as a “request for amendment.” The provider has the right to decide whether to grant the request for amendment. For example, if you and your provider agree that your file has the wrong result for a test, the provider will change it. However, if your provider believes the test result is correct, then your request for a change may be denied, but your disagreement will be noted in your file.

† To request an amendment you must complete a Request to Amend Medical Records and submit it to Director of Medical Records. You must describe the amendment and provide a reason why it should be made.

† We will usually respond to your request for amendment within 60 days, but it may take an extra 30 days in some cases. If we need an extension, we will provide you with the reason.

4. Obtain A List Of When And Why Your Health Information Was Shared

You have the right to request an “accounting of disclosures.” This is a list of the people with whom your health information has been shared, (it does not include those involved in treatment, payment, or for health care operations, or as authorized by you). To get this list, you must complete a Request for accounting of Disclosures and submit it to Medical Records. You must include the time frame for the request.

† In most cases, we will get you the accounting of disclosures within 60 days, but it may take an extra 30 days in some cases. If we need an extension, we will provide you with the reason.

5. Request Restrictions On Sharing Of Your Information

You have the right to request a restriction or limitation on the health information we use or share about you for treatment, payment or health care operations. You also have the right to request that we limit the health information we share about you to someone who is involved in your care, such as a family member or friend. For example, you could ask that we not share with your siblings information about a surgery you had. To request a restriction, you must submit the Request to Restrict Uses and Disclosures of Protected Health Information Form and submit it to the Medical Records Director. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit the use, or sharing of information or both; and (3) to whom you want the limits to apply, (for example, sharing with your spouse). We are not required to agree to your request. If in agreement, your restrictions may not be followed in some situations, such as emergencies or when required by law.

Note that if you ask us not to share health information with your health plan for items or services for which you paid in full, out of pocket, we will not share the information with the plan unless required by law.

6. Request That We Change How We Contact You

You can make reasonable requests to be contacted at different places or in different ways. For example, you can have the nurse call you on your cell phone instead of your home number, or ask that your lab results be sent to your office instead of to your home. If sending information to you at home might put you in danger, your health provider must talk, call, or write to you where you ask and in the way you ask, if the request is reasonable. You are not required to tell us the reason for your request. We will accommodate all reasonable requests, but your request must specify how or where you wish to be contacted. We may also ask how you will handle payments.

7. Right To A Paper Copy Of This Notice

You have the right to a paper copy of this Notice upon request. You may also obtain a copy of this Notice at any time from our website, <http://www.CarteretHealth.org>, or from the facility where you obtained treatment.

8. Right To Be Notified Of A Breach

You have the right to be notified if your health information is acquired, used, or shared in a manner not permitted under law which compromises the security or privacy of your health information.

Changes To This Notice

We reserve the right to change this Notice. We reserve the right to make the revised Notice effective for health information we already have about you, as well as any health information we create or receive in the future. The Notice will contain the effective date on the first page. We will post a copy of the current Notice of Privacy Practices at each treatment facility and on our website, www.CarteretHealth.org.

Complaints

If you believe your information was used or shared in a way that is not allowed under the privacy law or if you believe your rights were denied you can file a complaint with Carteret Health Care and with the Secretary of the Department of Health and Human Services.

To file a complaint with us you may call the Integrity Line at (252) 499-6101. To get information on how to file a complaint with the Secretary of the Department of Health and Human Services, please contact the Chief Privacy Officer at (252) 499-6705. You will not be penalized for filing a complaint.

FINANCIAL GUIDELINES

Helpful Information About Your Hospital Bill

We are glad you have chosen Carteret Health Care for your health care needs. Hospital billing can sometimes be confusing. We hope this information will answer some of your questions regarding the financial aspects of your care. Our trained professional staff is available to assist you with your financial needs and concerns.

Medicare Benefits

“Medical Necessity” is a Medicare term that may not be familiar to you. Medical necessity is a legal doctrine that determines if a health care service or supply is reasonable, necessary, and appropriate based on clinical standards of care. It’s a key factor in determining eligibility for health insurance and Medicaid coverage. Here’s why: Medicare does not pay for all of your health care costs. They pay only for “covered” items and services when their rules are met. The fact that Medicare may not pay for a particular item, or service, DOES NOT mean that you should not receive it. There may be very good reasons why your physician recommended it. Carteret Health Care encourages you to discuss “Medical Necessity” or “Statutory Exclusion” concerns you may have with your physician in order to develop your best course of medical treatment.

If your physician orders a procedure or service that Medicare will not cover, you will be asked to sign an Advance Beneficiary Notice (ABN.) The ABN informs you in advance of your treatment that Medicare is not likely to pay for the procedure. By signing the ABN, you are indicating that you understand and agree to be fully responsible for payment.

Notice Of Exclusions From Medicare Benefits (NEMB)

Medicare will not pay for any items and services that are not covered benefits. When you receive an item or service that is not a covered Medicare benefit, you will be billed for these items and responsible to pay for them. These items are also typically not covered by a secondary or other insurance plan. If you have questions regarding this Medicare policy, please refer to your “Medicare & You” book or contact the Medicare beneficiary hotline at 1-800-633-4227.

Medicaid

Carteret Health Care will submit claims to Medicaid provided you supply the required information and/or verification of coverage is obtained through the Department of Social Services. You may be responsible for a portion of your charges if Medicaid makes that determination.

If you do not have medical insurance or feel you may qualify for Medicaid, Carteret Health Care has a representative on site to assist you in determining if you are eligible for Medicaid or programs from other state or federal resources. Please feel free to contact our hospital representative at (252) 499-6570.

Health Insurance Billing

As a courtesy to our patients, Carteret Health Care will file a health claim to most insurance companies when you give all of the required information and benefits are assigned to Carteret Health Care. You will need to present your insurance card(s) at the time of service. The information on the card(s) is important for correct identification of your insurance carrier and in receiving the proper payment for services rendered by the hospital.

Patients with Commercial or Managed Care insurance coverage are responsible for paying co-payments, deductibles, co-insurance, and fees for non-covered services. Insurance plans vary significantly. Each patient is responsible to know and understand his or her benefit package. You may contact your insurance company or employer if you have questions about your specific health insurance plan and to verify if Carteret Health Care is a participating provider.

Workers' Compensation

If services you are requesting are the result of a work-related injury, Carteret Health Care will bill your employer or your employer's liability carrier if we receive verification from your employer that it is work related. Otherwise, you will be responsible for the bill. We will also ask for your health insurance information in the event that Workers' Compensation denies the claim or does not cover all the charges.

Liability

If services you are requesting are the result of a non-work-related injury, (an accident, i.e. automobile), Carteret Health Care:

- Is required to bill your liability insurance carrier if you have Medicare and/or Medicaid.
- Will bill your commercial insurance company.

Liability insurance pays the patient directly in most cases and will give no guarantee of coverage for services being rendered. Liability settlements will typically pay your insurance carrier back for any payment they made as a part of their settlement.

Patients that choose not to file their commercial insurance or patients with no insurance coverage will be responsible for the bill at the time services are rendered.

Patient Financial Responsibility

Patients who do not carry insurance coverage, who are unable to provide Carteret Health Care with adequate billing information, or who wish to file their own insurance claims must either pay Carteret Health Care in full at the time of service or make satisfactory payment arrangements with our billing office staff.

Noted below are some common health insurance terms that may require additional explanation.

- **Deductible:** Most health insurance companies require you to pay a portion of your health care costs at the beginning of your plan year. If you have not met that amount you will be required to pay that portion at the time services are rendered/billed.
- **Coinsurance/Co-payment:** Your health insurance plan has most likely agreed to share the cost of paying for procedures up to a certain dollar limit. Monies owed outside this agreed upon amount falls to you as a one-time payment per visit, or a percentage of the total bill, or both. An example would be your health insurance plan would cover eighty percent of charges while the patient is responsible for twenty percent. Most insurance plans have a maximum amount of money per year you may have to pay. This is called the Out-of-Pocket amount. Once you have exceeded this amount, your insurance plan typically pays at a higher rate.
- **Maximum Lifetime Benefit:** This is the maximum your health insurance policy will pay you for benefits throughout your lifetime.

All requests for payment are estimated amounts due. Any additional remaining balance will be billed to you and is due upon receipt of the statement. If you are unable to pay the balance in full you should contact our Patient Accounts Department at 252-499-6506 to make satisfactory payment arrangements.

If your account becomes past due, Carteret Health Care will take appropriate action to recover the amount due. Accounts are considered past due if your payment has not been received within 30 days of the date of the statement or if satisfactory payment arrangements have not been made. If you are uninsured, please contact one of our Patient Account Representatives at 252-499-6506. Delayed insurance payments do not relieve you of your obligation to pay the balance when due; the responsibility still rests with you.

Financial Assistance Program

Carteret Health Care has a program to assist patients who may not be able to meet their financial obligations and are not eligible for other types of assistance. You will be asked to provide tax documents, Social Security/Disability Award Letters along with other supporting documentation outline in the Financial Assistance Application. After the application is completed it will be reviewed for eligibility. Based on your income and the Federal Income Guidelines you may be eligible for a reduction or in some cases have your entire bill adjusted. You may contact our Financial Assistance Program Coordinator at 252-499-6517 for further information about this program.

Services Not Billed By Carteret Health Care

During your hospital stay, you may receive services from physicians and/or other healthcare providers who will bill separately for their services. Carteret Health Care may provide your insurance information to these providers. Some of these providers may include:

- Your physician/surgeon or consultant
- US Acute Care Solutions at (855) 687-0618
- Eastern Radiology at (252)754-5624
- Southeast Anesthesiologists (919) 873-9533 or Carteret Anesthesia Associates at 1-800-222-1335
- Carteret Pathology at 1-800-846-7978

GOING HOME

After your discharge, you may receive a survey. This survey focuses on the care you received at Carteret Health Care. Please take the time to complete this questionnaire. Your responses let us know how we are performing and we use your feedback to help us improve our services and maintain our high standards for quality care. We also use the information to reward and recognize high performing staff.

COMMUNITY

Carteret Health Care Foundation

Carteret Health Care is a local not-for-profit hospital with county oversight and receives no financial support from county taxpayer funds. At a time when many hospitals across America are struggling to survive, the financial health of CHC remains strong due to a legacy of vigilant fiscal management.

To preserve the tradition of healthcare excellence, Carteret Health Care relies on the contributions of those who recognize the importance of a local healthcare facility to the overall well-being of their community. Specialty programs like the Cancer Center, Palliative Care, the Imaging Center, and Hospice & Home Health services are sustained today through the private contributions of our Carteret County patrons.

A tribute gift is an especially meaningful way to honor a family member, beloved friend, or caregiver while also supporting the CHC mission. All donations made to the Hospital Foundation are deductible to the full extent allowable by law. Your gift is a reflection of your generosity and concern for others and our commitment is to use it wisely and according to your preferences. For more information on how to make a donation or how to include CHC in your Last Will and Testament, contact the Foundation Office at (252) 499-6646, or www.CarteretFoundation.com.

Volunteers

Each day volunteers help deliver the high quality, compassionate care that patients and their families deserve. Some volunteers work directly with patients, while others do administrative work, such as filing, typing, data input, answering phones and assembling packets of information for our patients. Some of our volunteers assist in the hospital gift shop, are Pet Therapy Volunteers, and drive the golf cart parking lot courtesy shuttle. We work hard to match your interests with a volunteer position that is right for you. Anyone interested in learning more about volunteer opportunities is encouraged to call the Volunteer Office at (252) 499-6046, or email, volunteer@carterethealth.org.

Want to Say Thank You to Your CHC Nurse?

Share your story!

DAISY Award Nomination



The DAISY (Diseases Attacking the Immune System) Award is an international recognition program that honors and celebrates the skillful, compassionate care nurses provide every day. The DAISY Foundation was established by the family of J. Patrick Barnes after he died from complications of the auto-immune disease ITP in 1999. During his hospitalization, they deeply appreciated the care and compassion shown to Patrick and his entire family. When he died, they felt compelled to say “thank you” to nurses in a very public way. Please say thank you by sharing your story of how a nurse made a difference you will never forget!

[CLICK HERE to nominate a Nurse!](#)

If you have any questions, please contact: DaisyAward@carterethealth.org or 252-499-8466

BEE Award Nomination



The Carteret Health Care B.E.E. Award recognizes staff for “Being Extraordinary Everyday.” Like the Daisy Award for nursing staff, you can nominate any staff members except nursing staff, for the BEE Award. Nominate a special colleague who you see as a role model at Carteret Health Care for their heart of compassion. Share examples of how they have gone above and beyond for their selflessness in giving compassionate care to a patient, a patient’s family or even a fellow colleague.

[CLICK HERE to nominate someone today.](#)