## **Banner Specialty Pharmacy Patient Rights** and Responsibilities

## You have these rights and responsibilities taking part in our specialty patient management program:

- You have the right to receive information about the patient management program.
- You have the right to know about the purpose and structure of our specialty patient management
  program, including any changes. If a patient management program closes, you have a right to receive
  information about the closure.
- You have the right to receive information about Banner's responsibilities under HIPAA. This is your right
  to have your private health information shared with the program only as needed, and in line with state
  and federal laws
- You have the right to know the patient management program's staff members by name and job title, such as your Clinical Pharmacist, and your Pharmacy Patient Advocate.
- You have the right to speak with a staff member's supervisor or other healthcare staff when you
  request it.
- · You have the right to stop taking part, or opt out, of the patient management program at any time.
- · You have the right to know in advance about services we provide.
- · You have the right to know in advance about your financial responsibility.
- You have the right to have you and your property treated with respect, consideration, and recognition
  of your dignity and individuality.
- You have the right to be free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and misappropriation of patient property.
- You have the right to be able to voice grievances/complaints about treatment or care or lack of
  respect of property, or recommend changes in policy, personnel, or care/service without restraint,
  interference, coercion, discrimination, or reprisal.
- · You have the right to choose a health care provider.
- You have the right to receive appropriate care/service, without discrimination, per your physician orders.
- · You have the right to learn about any financial benefits when referred to the pharmacy.
- You have the right to know about the services that we provide as well as any modifications to the plan
  of care.
- · You have the right to be able to identify personnel through proper identification.
- You have a responsibility to turn in any forms that we need from you to take part in the program, as required under law.
- You have a responsibility to give truthful health information and up-to-date contact information.
- · You have a responsibility to tell our staff of any changes to your contact information.
- You have a responsibility to tell your doctor that you are taking part in the specialty patient management program.

## **Process for Complaints and Grievances**

It is our goal to research any complaint and respond with a resolution to you or your doctor within 5 business days.

If the original staff member handling the complaint is not able to resolve it, they may escalate as appropriate.

The best way to relay the resolution is by calling us, unless you request resolution in writing.

If we cannot resolve the issue, or if you prefer not to contact us, you may also contact the Arizona State Board of Pharmacy for complaints at their phone number: 602.771.2727 Monday-Friday from 8:00 am-5:00 PM MST. Or contact your State Board of Pharmacy, which you can find at https://nabp.pharmacy/about/boards-of-pharmacy/

You may also call the Accreditation Commission for Health Care at: 855.937.2242

Welcome to Banner Family Pharmacy – Specialty. It is our pleasure to serve you.