#### DISCLOSURE INFORMATION

Welcome! You have been scheduled to have your upcoming procedure at the **New Jersey Surgery Center.** We consider it a privilege to be selected as the surgical facility for your surgical care.

The following disclosure is consistent with regulatory requirements and is made at or prior to the time that the referral is made:

In accordance with Federal Regulations (42 C.F.R. 416.50(a)(ii)) and the Public Law and applicable rules of the State of New Jersey, Board of Medical Examiners (C. 26:2H-12; N.J.A.C. 13:35-6.17) a physician, podiatrist and all other licensees of the Board of Medical Examiners must inform patients of any significant financial interest in a health care service.

The New Jersey Surgery Center is owned in part by your physician. Accordingly, please take notice that the physician who will be performing your procedure has a financial interest in the health care service for which you are being referred. A list of physician partners is posted at the New Jersey Surgery Center and available upon request at (609) 581-6200 or at the New Jersey Surgery Center's website, <a href="www.newjerserysurgerycenter.com">www.newjerserysurgerycenter.com</a> located under "Our Surgeons".

You may, of course, seek treatment at a health care service provider of your own choice. A listing of alternative health care service providers can be found in the classified section of your telephone directory under the appropriate heading.

Please take notice if your insurance company is represented in the list to follow. If not, then the New Jersey Surgery Center is not a participating provider with your insurance carrier. As such, part or all of your upcoming procedure will be considered "out-of-network". You will be personally responsible for the co-payment, co-insurance, deductible, or other charges associated with such "out-of-network" services that are not covered by your insurance carrier. Also, please note the list provided is intended for out-of-network disclosure purposes only and is not a representation of insurance plan coverage. The New Jersey

Surgery Center is available at (609) 581-6200 to discuss questions about your insurance plan coverage and related financial responsibility.

The New Jersey Surgery Center is accredited by the Accreditation Association for Ambulatory Health Care (AAAHC) and participates with the following insurance carriers:

- Horizon Healthcare (also referred to BCBS or Blue Cross Blue Shield)
  - HMO, POS, PPO and Medicare Blue Products
- Medicare
- Consumer Health Network (CHN)
- First MCO
- Horizon Casualty
- New Jersey Manufacturers

Case by case approvals can also be sought and may or may not be approved.

You have the right to enter into an advance directive. An advance directive means a written statement of your instructions and directions for health care in the event of your future decision making incapacity. An advance directive may include a proxy directive or an instruction directive, or both. (N.J.A.C. 8:43A-1.3). As such, be advised that it is the policy of the New Jersey Surgery Center not to follow any Pre-Determined Advanced Directives. All necessary action will be taken to preserve life in an emergency situation, and to provide patient rights. Additional information regarding Advanced Directives, including the complete provision and the State Advanced Directive Forms can be obtained by contacting the New Jersey Surgery Center at (609) 581-6200 or at the New Jersey Surgery Center's website, <a href="https://www.newjerserysurgerycenter.com">www.newjerserysurgerycenter.com</a> located under "Patient Registration".

You have the right to make informed decisions regarding your care including the right to make decisions concerning the right to accept, refuse, or choose from alternatives of medical and/or surgical treatment.

The purpose of this disclosure is to inform you or your legal representative, that: (1) you are receiving this notice prior to the date of the procedure; (2) you have been informed of the financial interests of the physicians at the New Jersey Surgery Center; (3) you voluntarily desire to have your procedure performed at the New Jersey Surgery Center; (4) you have been informed that part or all of your procedure will be considered "out-of-network", if applicable; (5) you have been informed about your rights regarding an advance directive; and (6) you have the right to make informed decisions regarding your care.

The physicians, nurses, and the entire staff at New Jersey Surgery Center are committed to your care. Should you have a compliant or grievance related to the New Jersey Surgery Center please contact the Administrator at (609) 581-6200. If resolution is not to your satisfaction, you may contact:

Division of Health Facilities Evaluation and Licensing New Jersey State of Department of Health PO Box 36, Trenton, NJ 08625-0367 (609) 792-9770

State of New Jersey Office of the Ombudsman for the Institutionalized Elderly PO Box 808, Trenton, NJ 08625-0808 (609) 624-4262

Presentation of a complaint will not compromise your care under any circumstances.

#### New Jersey Surgery Center Patient's Bill of Rights and Responsibilities

Available at the New Jersey Surgery Center website: www.newjerseysurgerycenter.com

Each patient receiving service at the New Jersey Surgery Center shall have the following rights and responsibilities:

- 1. Each patient has the right to be informed of these rights, as evidenced by the patient's written acknowledgement, or by documentation by staff in the medical record, that the patient was offered a written copy of these rights and given a written or verbal explanation of these rights, in terms the patient could understand. The facility shall have a means to notify patients of any rules and regulations it has adopted governing patient conduct in the facility;
- 2. Each patient has the right to be informed of services available in the facility, of the names and professional status of the personnel providing and/or responsible for the patient's care, and of fees and related charges, including the payment, fee, deposit, and refund policy of the facility and any charges for services not covered by sources of third-party payment or not covered by the facility's basic rate;

- Each patient has the right to be informed if the facility has authorized other health care and educational institutions to participate in the patient's treatment. The patient also shall have a right to know the identity and function of these institutions, and to refuse to allow their participation in the patient's treatment;
- 4. Each patient has the right to receive from the patient's physician(s) or clinical practitioner(s), in terms that the patient understands, an explanation of his or her complete medical/health condition or diagnosis, recommended treatment, treatment options, including the option of no treatment, risk(s) of treatment, and expected result(s). If this information would be detrimental to the patient's health, or if the patient is not capable of understanding the information, the explanation shall be provided to the patient's next of kin or guardian. This release of information to the next of kin or guardian, along with the reason for not informing the patient directly, shall be documented in the patient's medical record;
- Each patient has the right to participate in the planning of the patient's care and treatment, and to refuse medication and treatment. Such refusal shall be documented in the patient's medical record;
- 6. Each patient has the right to be included in experimental research only when the patient gives informed, written consent to such participation, or when a guardian gives such consent for an incompetent patient in accordance with law, rule and regulation. The patient may refuse to participate in experimental research, including the investigation of new drugs and medical devices;
- 7. Each patient has the right to voice grievances or recommend changes in policies and services to facility personnel, the governing authority, and/or outside representatives of the patient's choice either individually or as a group, and free from restraint, interference, coercion, discrimination, or reprisal;
- Each patient has the right to be free from mental and physical abuse, free from exploitation, and free from use of restraints unless they are authorized by a physician for a limited period of time to protect the patient or Patient Rights or others from injury. Drugs and other medications shall not be used for discipline of patients or for convenience of facility personnel;
- 9. Each patient has the right to confidential treatment of information about the patient. Information in the patient's medical record shall not be released to anyone outside the facility without the patient's approval, unless another health care facility to which the patient was transferred requires the information, or unless the release of the information is required and permitted by law, a third-party payment contract, or a peer review, or unless the information is needed by the New Jersey State Department of Health for statutorily authorized purposes. The facility may release data about the patient for studies containing aggregated statistics when the patient's identity is masked;
- 10. Each patient has the right to be treated with courtesy, consideration, respect, and recognition of the patient's dignity, individuality, and right to privacy, including, but not limited to, auditory and visual privacy. The patient's privacy shall also be respected when facility personnel are discussing the patient;
- 11. Each patient has the right to not be required to perform work for the facility unless the work is part of the patient's treatment and is performed voluntarily by the patient. Such work shall be in accordance with local, State and Federal laws and rules:
- 12. Each patient has the right to exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, or any attendance at religious services, shall be imposed upon any patient; and
- 13. Each patient has the right to not be discriminated against because of age, race, religion, sex, nationality, or ability to pay, or deprived of any constitutional, civil, and/or legal rights solely because of receiving services from the facility.
- **14.** It is the responsibility of the Center to know and understand the patient's bill of rights and responsibilities.

- 15. Patient will receive a signed copy of the "Patients Bills of Rights and Responsibilities" and the original document will be maintained in Medical Records.
- 16. Since effective treatment depends in part on patient's history, the center expects the patient or the patient's family to provide information about past illnesses, hospitalizations, medications, and other pertinent matters.
- 17. The Center expects the patient will ask questions about directions or procedures they don't understand.
- **18.** The Center expects the patient to be considerate of other patients and staff in regard to noise, smoking, and number of visitors in the patient areas. The patient is also expected to respect the property of the Center and of other persons.
- 19. To help the patient's physicians and the Center staff care for the patient, the patients are expected to follow instructions and medical orders and report unexpected changes in their condition to their physician and Center staff.
- **20.** The patient assumes financial responsibility for all services either through their insurance or by paying at the time of service.
- 21. The patients are expected to follow all safety regulations that they are told or read about.
- **22.** If the patient fails to follow their healthcare provider's instructions, or if the patient refuses care, they are responsible for their own actions.
- 23. Except for emergencies, the practitioner shall obtain the necessary informed, written consent prior to the start of specified non-emergency procedures or treatments only after a physician has explained in terms that the patient understands specific details about the recommended procedure or treatment, the risks involved, the possible duration of incapacitation, and any reasonable medical alternatives for care and treatment. (N.J.A.C. 8:43G-4.1(a)7.) Informed consent is required by the State of New Jersey. (N.J.A.C. 8:43A-13.3(a)16.)
- 24. A patient or, if the patient is unable to give informed consent, a responsible person, has the right to be advised when a practitioner is considering the patient as a part of a medical care research program or donor program, and the patient, or responsible person, shall give informed consent prior to actual participation in the program. A patient, or responsible person, may refuse to continue in a program to which he has previously given consent.
- 25. The patient who does not speak English shall have access, where possible, to an interpreter.
- 26. The patient can choose to change primary or specialty physicians or dentists if other qualified physicians or dentists are available.

# New Jersey Surgery Center, L.L.C.

### **PATIENT**

## **DISCLOSURE**

#### INFORMATION

