



# Welcome to HSS

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ADMISSIONS GUIDE



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## Welcome to HSS

Dear patient,

At HSS, our purpose is simple: to help our patients get back to what they need and love to do better than anyplace else in the world. Every day, we strive to fulfill that mission by providing thoughtful, compassionate care and an unmatched patient experience.

Whether you are having surgery to address a longtime condition or for a recent problem or injury, your care team will ensure you have all the information and support you need to feel confident and comfortable. That applies throughout your journey, from presurgical testing to rehabilitation and recovery.

We want to encourage you to be an active partner in your care. If there is anything we can do to improve your experience or make you feel more secure, please let your care team know. Every member of the HSS family is dedicated to our patients' well-being and giving you the best outcome possible. We are here to support you for as long as you need us.

We also strive to create a welcoming, respectful environment for all our patients, their visitors and anyone else who comes through our doors. We welcome your feedback on opportunities for us to improve in this area.

The information in this guide is comprehensive and designed to answer many common questions our patients have. We hope it will be useful to you. You can always reach out to your care team with any questions that arise.

Thank you for choosing HSS for your care.

A handwritten signature in black ink, appearing to read "B Kelly". The signature is fluid and cursive, written in a professional style.

**Bryan T. Kelly, MD, MBA**

President and Surgeon-in-Chief

# Your Care







# Your Surgery

Our goal is to make your surgical day and your time at HSS as comfortable as possible.

## WHAT TO BRING WITH YOU

In order to keep your belongings safe, we ask that you please pack lightly and do not bring any valuables. Your belongings will be put into a storage bag provided by HSS, and then secured and stored for you while you are in the operating room.

We will not be able to store any suitcases, luggage or backpacks for you. HSS will not be responsible for any lost or misplaced personal belongings that were not secured by staff.

Plan to wear loose, comfortable clothes that are easy to put on and supportive shoes. You will be provided with a hospital gown throughout your stay.

Bring a list of any medications you are taking, including how often you take them and how much you take. **Please do not bring the medications themselves unless the HSS pharmacy asks you to do so.**

### Please also bring:

- the legal ID you used when scheduling your surgery
- health insurance card
- prescription card (if separate from insurance card)
- medical information your care team asks you to bring, such as lab reports and immunization details
- dentures or eyeglasses
- essential medical equipment, including braces (please do not bring sleep apnea masks or devices, only the settings for your machine)
- your Health Care Proxy form and other advance directive documents, if you have them

### Optional items to bring include:

- a cell phone and charger
- something to read

### Please do not bring or wear:

- valuables
- cash
- jewelry, including wedding rings and body piercings
- food



## MyHSS

HSS is always seeking ways to improve our patients' experience. With the MyHSS app, you can manage your care and access important information and resources at HSS, all in one place. MyHSS is designed to give you quicker, easier access to the information you need.

To use MyHSS on a desktop, visit <http://myhss.hss.edu>. To use MyHSS on a mobile phone or tablet, download the MyHSS app from the Apple App Store or Google Play on an Android device.

With MyHSS, you are able to:

- **Access your HSS medical record**, billing record and test results
- **Schedule appointments** with specialists you have seen before or new specialists, in person or virtually
- **Schedule physical therapy** appointments, either in person or virtually
- **Schedule urgent care visits**, either in person or virtually
- **View details** of past and upcoming appointments
- **Access HSS produced content** and resources directly from the app
- **Get directions** to doctors' offices, parking, and other local amenities at the main HSS location in Manhattan
- **Complete pre-check forms** and other appointment-related questionnaires

If you need help downloading or logging in to MyHSS, or if you have other technical questions, call the MyHSS Help Desk at 844.269.4509

**MyHSS is not for medical emergencies. If you need care urgently, please call 911.**

## ARRIVAL AND CHECK-IN

### Timing and Visitors

On the day of your surgery, we ask that you please arrive either 2 or 3 hours before your surgery is scheduled to begin, depending on the type of surgery and which floor you'll be on. Your healthcare team or surgical coordinators will give precise instructions.

HSS visitor policies are subject to change and additional limitations may be introduced at any time. There may even be circumstances in which HSS, acting in the best interest of our patients and staff, prohibits all visitors in one or more areas. We will do our best to inform you in advance of any visitor policy changes.

Children under 18 are not allowed to visit.

For the latest visitor policy, ask your care team or call our Patient and Family Resource Line at 212.774.7547.

### Arriving at HSS

Whether your surgery is at our main location or one of our ambulatory surgery locations, you will check in with Patient Access Services. Here, you will receive your ID bracelet. You'll also fill out any information our team needs for your care. You'll then head to one of our family atriums or other patient waiting areas, where you can relax and wait for your surgery.



All patients and visitors need to complete a health screening before entering the Hospital. Patients and visitors may complete this screening online before arrival, otherwise we have screeners located in our main lobby who are available to screen on the day of your surgery. These policies are also subject to change at any time.

The patient liaison team will then greet you and direct you to where you need to go next.

### Family Atriums

On the 1st, 4th and 9th floors of our main Hospital are our family atriums. They are comfortable areas with ample seating, as well as free coffee, tea, water and Wi-Fi.



When you arrive at the atrium, our staff will show you our communication status board. This provides real-time updates on your progress throughout the surgery. You'll be given a patient ID number, which is how your family member or support person can identify you on the screen. They'll also get updates via text message.

Our patient liaisons are always here to help you with any questions or concerns. We want you and your guests to feel comfortable and cared for while you're at HSS.

## BEFORE YOUR SURGERY

If you remain at HSS overnight to recover, your surgery is considered inpatient surgery. Your surgeon will tell you before your surgery if you will be an inpatient and how long you can expect to be in the Hospital.

If you are going home the same day, it is considered outpatient surgery. We'll do everything we can to make your surgical day run as smoothly as possible. As our nursing staff and other members of the team prepare you for your surgery, here's what to expect:

### ID Checks

Throughout the day, we will ask you to verify information about yourself many times. This includes your first and last name, birth date and other details. We do this for your safety.

### Visits with Your Surgeon and Anesthesiologist

Your surgeon will come to see you before your surgery to see how you're feeling and answer any questions you have. They will also confirm what type of surgery you are having and where, after which they will mark the area on your body.

You'll also meet your anesthesiologist, who will tell you about the medicines that will be used to put you to sleep or ensure you are pain free during your surgery. Feel free to ask any questions.

### Health Checks

When it's time to prep for your surgery, your nurse and other staff will check your skin from head to toe. They will also check on your health status and clean the area of your body where you're having surgery. They may draw blood and perform other tests. They will also make sure your personal belongings are safe. You'll get them back once you reach your room or are sent home.



### Consultations with Other Staff or Vendors

If you are having outpatient surgery, our rehabilitation staff may also visit you before your surgery. They will give you information about what to expect after your surgery and what functional activities you need to be able to do before you can be sent home.

You may also see a representative from one of the trusted vendors HSS works with to provide medical equipment to our patients. If your surgeon requires you to wear a brace or an immobilizer after surgery, the representative will fit it for you and show you how to take it on and off.

## RECOVERING IN THE HOSPITAL (INPATIENT)

As an inpatient, your nursing staff will check on you as needed to help you get to the bathroom or adjust your pain medications. They will also check in on you periodically to be sure you're safe and see if you need anything.



### Preventing Falls

It's very important that you don't get out of bed on your own. You can be seriously injured if you fall. Patient beds are equipped with alarms that will sound if you try to get up on your own. Press your call button and nursing staff will help you.

Nursing staff will also help you to the bathroom and may remain with you in the bathroom until you are ready to return to bed. Again, this is for your safety.

### Rehabilitation

Our rehabilitation specialists, who include physical and occupational therapists, will evaluate your function and help you to get moving. They will also help you understand any precautions you may have as well as any exercises prescribed by your surgeon.

We also offer a one-on-one physical therapy session prior to joint replacement surgery as part of your pre-surgical testing day. This visit is also offered virtually.

You'll need to meet certain functional milestones before you can go home. These milestones depend on the type of surgery you have and on your overall health. We want to ensure you are safe while getting in and out of bed and getting up to walk, and that you are able to go up and down stairs if needed. Some patients achieve these milestones in one visit, while others require additional visits. We will make sure you receive the assistance you need individually to achieve these goals.

If needed, we have specialized therapy services available to our patients to address any issues with difficulty swallowing.

## Nutrition Care and Meal Services

The Department of Food & Nutrition Services coordinates all aspects of patients' nutritional care. We strive to offer a variety of menus to meet the preferences and needs of our patients. Menu options include vegetarian, heart-healthy, sodium-restricted, diabetic-friendly, gluten-free, Kosher and Halal diets. Nutritional supplements are available when needed.

Our team of dietetic technicians, dietary assistants and nutritionists are available to assist patients with any nutritional concerns. When you are admitted to HSS, dietetic technicians will identify specific needs or dietary requests or limitations you have. Dietary assistants will visit you daily to take your meal orders, and food service aides will deliver your meal trays.

Nutritionists can provide comprehensive care and education to assist in your recovery. They can also refer you to outpatient nutrition counseling as needed after you return home.

## RECOVERING AT HOME (OUTPATIENT)

### Rehabilitation

HSS rehabilitation specialists will help you return to what you need and love to do after surgery. Their services are offered in a few different ways.



If you require in-home services after your discharge, your case manager or social worker will make these arrangements. As an alternative, to stay within the care of our HSS physical therapists, we offer our HSS@Home post-operative virtual physical therapy program. These visits typically last for one to two weeks until you transition to outpatient therapy. If this is recommended for you, our team will assist you with setting up the needed technology. In order to participate you need a MyHSS account and a smart device (iPhone, tablet) with a camera and a microphone. For more information, please call 212.606.1032.





## Outpatient Physical Therapy

When you are ready, your surgeon will refer you for outpatient physical therapy. Your physical therapist will conduct an initial evaluation, discuss your goals for therapy and develop a treatment plan to help you achieve those goals. They will determine the course of your therapy, including the number of weeks you may need therapy and how often. You will receive a home exercise program to follow in order to achieve and maintain maximum recovery.

HSS offers in-person outpatient physical therapy at our rehabilitation locations in Manhattan, at HSS regional locations, and through community-based rehabilitation practices in our HSS Rehabilitation Network. Virtual care appointments with HSS therapists are also available.

## MEDICATIONS AND PAIN MANAGEMENT

### Managing Your Pain

After surgery, you should expect to have some pain and discomfort. Everyone experiences pain differently. You may feel it as a pulling, burning or sharp sensation in the surgical area. This will lessen over time.

During your recovery, your care team will ask you to rate your pain on a scale from 0 to 10. Some discomfort following a surgical procedure is normal. The goal is to keep it at a low enough level that you can participate in physical therapy, carry out basic activities and rest comfortably.



There are several ways to manage any pain you feel without using medications. First, regularly change your position when sitting or lying down to avoid stiffness (and help your new joint to move, if you have had a joint replacement surgery).

If possible, try elevating the area where you had the surgery. Using ice packs can also help reduce inflammation in the wound.

Deep breathing, meditation or other relaxation techniques can also help.

### Pain Medications

You may be told to take one or more pain medications in addition to any pain medicines prescribed to you.

Be sure to take these as directed.

### Opioid Medications

After surgery, you may be prescribed opioids for pain. Opioids are powerful drugs that need to be taken carefully. Because even short-term opioid use carries some risk for addiction or dependence, they should be used only when your pain can't be managed in other ways. Our goal is to help you use these medications responsibly and sparingly so that you are comfortable and safe.

Your pharmacist will give you specific instructions on how many pills it is safe to take per day, if needed. You should never take more than the prescribed amount.

Opioids can cause side effects. These include (among others):

- constipation
- dizziness
- nausea
- vomiting

**Let your surgeon know if you experience any side effects, if they continue as you reduce the amount of opioids you take, or if your pain does not feel manageable.**



While you are taking opioids, there are several things to keep in mind:

- Do not drive.
- Do not drink alcohol or take sleep medications.
- If you normally take benzodiazepines, such as Xanax or Valium, tell your pharmacist and your care team.
- Never share opioid medications with anyone.
- Securely store opioid medications out of sight and out of reach of pets and children, preferably in a locked cabinet or on a high shelf.

Once your pain is manageable, it is important to stop taking opioids. You may be able to stop all at once, or you may need to taper off the medication. Tapering involves gradually decreasing the number of tablets you are taking over time. For more information about tapering off medications safely, visit [www.hss.edu/opioidtapering](http://www.hss.edu/opioidtapering).

You should dispose of any unused opioids. Speak to your pharmacist about how to do this safely.

Before you are discharged, HSS will provide you with an opioid disposal product to render your leftover opioids unusable. This product is a quick and easy way to safely dispose of your medication.

Alternatively, you can bring unused opioids to a takeback facility or medicine drop box. HSS has a drop box on our main campus at 525 East 71st Street in New York City. You can search for other public disposal locations on the DEA website at: <https://apps.deadiversion.usdoj.gov/pubdispsearch>.

**Do not throw tablets into the regular garbage or flush them down the toilet or into a water supply.**

For more on how to safely store opioids and how to dispose of unused opioids, visit [www.hss.edu/opioids-and-your-recovery.asp](http://www.hss.edu/opioids-and-your-recovery.asp).

## LANGUAGE ASSISTANCE SERVICES

HSS offers medical interpreter services to all Limited English Proficiency (LEP) patients. Language Services also supports and provides accommodations to patients with hearing and vision loss and is also available to help with financial aid forms. Copies of important medical forms are available in a number of different languages on our website, HSS.edu.

All patients are asked for their language of preference at registration. If you would like to change your preference or have other questions, contact Language Services at 212.606.1760.

Assistive devices for vision- and hearing-impaired patients or caregivers are also available on request by calling Language Services.

Language services include:

- face-to-face interpretation
- interpretation over the phone
- video conferencing via MARTII and InDemand Stratus
- interpretation for virtual visits
- aids for the hearing impaired
- TT, TDD or TTY devices

To contact Language Services, call 212.606.1760 from Monday through Friday between 7:30 am and 5:30 pm. During off-hours, on weekends or at any other time email us at [LanguageServices@hss.edu](mailto:LanguageServices@hss.edu).

The HSS Service Excellence team helps patients with other special requests, such as accommodations for service animals or transportation needs.

**For any non-medical questions you or your family members have, contact the HSS Patient and Family Resource Line at 212.774.7547.**



## VISITOR INFORMATION

### Visitor Policy

***Please be aware that our visitor policies are subject to change or suspension at any time. We will do our best to inform you of changes.***

Without exception, visitors who do not pass the health screening, including a temperature check, a travel history and symptom screening, will not be permitted to enter the Hospital.

Visitors are not permitted for patients receiving aerosolized procedures, including nebulizer treatments, high-flow oxygen and Bipap, or for patients who test positive for COVID-19.

Accommodations (including extended visiting hours) may be made for:

- palliative care
- end of life
- patients with legal guardians and patients with medical conditions or physical or emotional needs requiring modifications to our standard policies

Modifications to standard policies will be determined on an individual basis by the Service Excellence, Security, Pediatric and/or Nursing Leadership teams.

For the latest visitor policy, ask your care team or call our Patient and Family Resource Line at 212.774.7547.



### Types of Visitors

We believe that visitors can play a vital role in the healing process and enhance the well-being of our patients. You may choose who will and will not be permitted to visit you while you are at HSS. You may also tell our staff about any restrictions you would like to place on your visitors, such as not visiting after a certain hour. You may choose someone else to make visitation decisions on your behalf.

HSS welcomes visitors without regard to age, race, color, ethnicity, national origin, religion, culture, language, sex, sexual orientation, gender identity or expression, physical or mental disability, or socioeconomic status. In order to promote a serene and healing environment for our patients, we ask that all visitors observe the guidelines in the Visitor Code of Conduct below.

**24-hour Patient Information:** 212.606.1377

**Patient & Family Resource Line:** 212.774.7547

**Patient & Family Atrium Phone Numbers:**

1st Floor: 646.797.8301

4th Floor: 212.774.2201

9th Floor: 212.774.2179

### Visiting Hours

For our pediatric patients, HSS permits 24-hour visitation by one parent, legal guardian or other appropriate adult companion. Upon request, sleeping accommodations are provided for one parent or adult companion to remain overnight with the patient.

You can ask your healthcare professional or a representative on each surgical floor for details.

## Visitor Code of Conduct

When visiting our patient care units, we ask that your visitors follow the visitor code of conduct for the safety and well-being of our patients.

1. Limit the number of visitors for each patient in accordance with Hospital policy.
2. Plan on spending just a short time visiting. Although the visit is almost always welcome, it can be very tiring for the patient.
3. Carry on a cheerful conversation in a soft voice.
4. Please turn off your mobile phone while visiting.
5. If the patient you are visiting is sharing a room, please be mindful of the other patient's privacy and need for quiet.
6. Do not visit if you feel unwell, particularly if you have cold or flu-like symptoms, or if you have had a stomach upset in the last 48 hours.
7. For the patient's safety, please do not assist patients out of bed or in walking to the bathroom. Contact a nearby clinical staff member and they will be available to attend to the patient's needs.

HSS may change these policies based on clinical or other reasons at any time. We thank you for helping us to maintain a healing environment.



## Quiet Hours

We ask all patients and visitors to observe quiet time from 10:00 pm to 5:00 am.

## MEET YOUR CARE TEAM

### Anesthesiologist

An anesthesiologist is a medical doctor who will give you the medication that will prevent pain or put you to sleep during your surgery. Your anesthesiologist will meet with you before your surgery to explain the plan and will also be present in the operating room throughout your procedure.

### Case Manager / Clinical Social Worker

Case managers and clinical social workers may speak with you about your discharge options, discuss any worries or concerns you may have related to your discharge plan and make any necessary referrals for care after you are sent home. They can also contact your insurance company on your behalf about benefits and authorizations. Clinical social workers can also provide supportive counseling while you are in the Hospital.

### Environmental Services



Environmental services professionals clean patient rooms and other areas of the Hospital. They provide a vital service to keep you safe.

### Fellow

A fellow is a doctor who has completed medical school, an internship and a residency and is getting more-specialized training. They work with your surgeon and the rest of your care team to help manage your care.

### Food Services

If you are staying at HSS after your surgery as an inpatient, our food service staff will take your meal orders and deliver your meals.

### Medical Student

Medical students are studying to become doctors. Your surgeon may bring medical students to a check-up or another appointment so they can learn more about caring for patients.

### Nurse Practitioner

A nurse practitioner is a registered nurse who has advanced education and training. They can perform examinations, order tests and treatments, prescribe medications and perform some procedures.

### Patient Care Assistant

Patient care assistants help registered nurses care for patients. They usually help with tasks like getting patients into or out of bed, bathing, using the bathroom or eating.



### Patient Experience Advocates

Patient experience advocates assist you and your family with any questions concerning hospital regulations and routines. This team also functions as a central grievance body, through which you, your family or support person, can voice concerns or complaints about care and services.

### Patient Liaisons

Patient liaisons can help with your non-medical needs, including assisting your visitors, arranging transportation or addressing any concerns you have about your care.

### Physical Therapist

A physical therapist is a movement specialist who helps people recover from injury, pain or surgery. They will help get you moving after your surgery, show you exercises and help you understand how to do them on your own. You may see a physical therapist for several weeks or months after your surgery, depending on the type of surgery you have.

### Physician Assistant

A physician assistant is licensed to perform medical services assigned to them by a supervising attending physician. You may interact with your surgeon's physician assistant before you meet with your surgeon. They can also provide medical advice and answer questions if your surgeon is not available.

### Registered Nurse

A registered nurse is licensed to practice nursing. They provide much of your care, monitoring your health status and pain levels after surgery, arranging sessions with rehabilitation and other specialists, and giving you information you need after your surgery.

### Resident

A resident is a doctor who has graduated from medical school and is continuing their specialized training.

### Surgeon

Every surgeon at HSS is an expert in the type of surgery they perform, from joint replacements to complex spinal surgery. Your surgeon is available to answer your questions and address your concerns.



# Your Safety





## Your Safety

HSS is committed to ensuring your well-being and safety.

One of the ways in which we do this is by making you an active partner in your care. You, your friends and family and your healthcare team all play a vital role in providing you with the best care and the best outcomes.

The HSS Rapid Response Team (RRT) is a special team of clinicians who can help the primary care team if a patient starts to feel unwell. Staff, patients, and family and friends may activate the RRT by dialing extension “8911” on any house phone. The purpose of calling the RRT is to get help before a patient’s health status becomes a medical emergency.

### SPEAK UP

Together with The Joint Commission, we urge patients to be more involved in their care through a program called Speak Up. Speak Up offers simple advice on how you can make your care a positive experience. Research shows that patients who take part in decisions about their healthcare are more likely to have better outcomes.

#### Speak Up means:

- Ask questions if you have concerns or do not understand something about your care.
- Let us know if English is not your primary language. We will gladly get you an interpreter.
- Say something if you think you are about to receive the wrong medication or if you think the healthcare professional has confused you with another patient.
- Ask your healthcare team members if they have washed their hands prior to caring for you.
- Share your medical history with your healthcare team and tell them of any allergies.
- Ask a trusted family member or friend to be your advocate.

Good communication with your healthcare team benefits everyone. Letting us know your issues and concerns helps us provide you with better care and also keeps you involved as an active partner. Feel free to ask your nurse and other members of the healthcare team about any of your concerns.

## ANESTHESIA

HSS anesthesiologists give you the medications that will put you to sleep or numb an area of your body during your surgery. After your surgery, an anesthesiologist with critical care expertise will care for you in the recovery room. Your surgeon may also consult our Perioperative Pain Service (POPS) to help treat your postsurgical pain.

### Types of Anesthesia Used at HSS

You and your anesthesiologist will discuss what type of anesthesia is best for you before your procedure. Our goal is to keep you safe and comfortable.

#### *Regional Anesthesia*

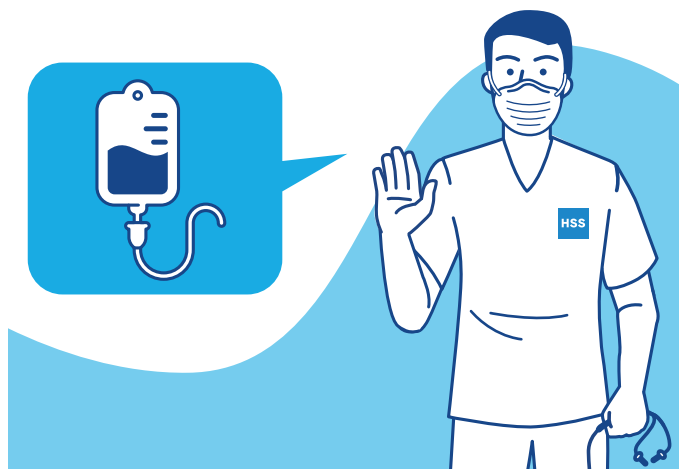
Most of the joint-related surgeries at HSS are performed using regional anesthesia. Spinal, epidural and nerve block are all types of regional anesthesia. Regional anesthesia numbs the nerves around the part of the body being operated on. This means you won't be able to feel anything in that area for a period of time. Patients who have regional anesthesia generally have better pain control and are less likely to report feelings of nausea or vomiting following surgery.

#### *Intravenous Sedation*

Most patients who have regional anesthesia also choose to receive IV sedation. This allows them to sleep during the operation. In some cases, you may be able to stay awake during your surgery if you choose to. This should be discussed with your anesthesiologist.

#### *General Anesthesia*

While regional anesthesia is the most common technique at HSS, general anesthesia is better in some cases. At HSS, it is most often used in spine surgery. General anesthesia numbs the entire body and makes patients unaware of everything happening in the operating room. Patients who have general anesthesia will wake up after the surgery is complete. A machine may be used to help the patient breathe.



### Side Effects

HSS anesthesiologists do their best to reduce the risk of nausea and vomiting after surgery. They routinely give anti-nausea medications as part of your care.

If you have a history of nausea and vomiting after surgery, tell your anesthesiologist before your surgery. They will make necessary adjustments to the plan to ensure the best approach to prevent or minimize these side effects.

### Pain Control

Controlling patients' pain is a top priority at HSS. We use a variety of proven methods to keep you comfortable and safe. If you are scheduled for an inpatient procedure and will use patient-controlled analgesia (PCA) after surgery, our Acute Pain Service will monitor your pain. If you are a high-risk pain patient, our Chronic Pain Service will monitor you. We want to ensure that your pain is manageable so that you can participate in physical therapy in the days and weeks after surgery. If you are scheduled for an outpatient procedure, your anesthesiologist will make sure that your pain is manageable before you are sent home.

## ID CHECKS

### Patient Identification

You will be given a hospital identification (ID) band when you arrive at HSS.

This ID bracelet has your name, date of birth and medical record number on it. These details help us to identify you and ensure that we are giving you the proper care and treatment. Your healthcare team will check your ID band and ask for your name and date of birth throughout your stay. Please know that this is for your safety. If your ID band falls off or is not easy to read, please ask us for another one.



### Your Legal ID & Date of Birth

For your safety, our policy is to use your name and date of birth only as it appears on the legal ID you give at the time of your registration.

Approved legal IDs, in preferred order, include:

- driver's license
- passport
- birth certificate

If you do not have the ID types that are listed above, please let us know at registration. Each time you register or check in, our team will check your legal ID by asking you to spell your first and last names and confirm your date of birth. Your doctor will also confirm your identity. Don't worry if your name appears differently on your insurance card. Our staff is trained to make the necessary adjustments in our computer system so that the insurance card name is used for billing purposes.

You may have a "preferred name" that is different from your legal name. We will note your preferred name in your medical record and the staff caring for you will make every effort to use your preferred name. However, we will need to use your legal name (the name on your ID) when confirming your identity for medical purposes.

## Surgical Site Identification

Before your surgery, your surgeon will ask you to confirm the area where you are due to have surgery by pointing to it. They will then mark the site using a special marker. Another safety measure that happens right before your procedure is a "time out." During a time out, the healthcare team will confirm your identity, surgical site, correct procedure and surgery consent form.

## INFECTIONS

HSS is committed to patient safety and quality patient care. We are proud to have achieved one of the lowest infection rates in New York State. As always, if you have any concerns about your health, you should contact your physician. Please feel free to contact the HSS Infection Control Department at 212.606.1235 if you have any additional questions or concerns regarding infection prevention at HSS.

By being an active partner in your care, you can help prevent infection and the spread of germs. Follow these five tips from the Centers for Disease Control and Prevention and the Joint Commission to keep yourself and others safe.

### 1. Clean your hands.

- Use soap and warm water. Rub your hands really well for at least 15 seconds. Rub your palms, fingernails, in between your fingers, and the backs of your hands.
- You can also clean your hands with alcohol-based hand sanitizers. Rub the sanitizer all over your hands, especially under your nails and between your fingers, until your hands are dry.
- Clean your hands before touching or eating food. Clean them after you use the bathroom, take out the trash, change a diaper, visit someone who is ill, or play with a pet.

### 2. Make sure healthcare providers clean their hands.

Doctors, nurses, dentists and other healthcare providers come into contact with lots of bacteria and viruses. So, before they treat you, ask them if they've cleaned their hands. Don't be afraid to ask them if they should wear gloves.



### 3. Cover your mouth and nose.

Many diseases are spread through sneezes and coughs. When you sneeze or cough, the germs can travel six feet or more! Cover your mouth and nose to prevent the spread of infection to others. Keep tissues handy at home, at work and in your pocket. Be sure to throw away used tissues and clean your hands after coughing or sneezing. If you don't have a tissue, cover your mouth and nose with the bend of your elbow or hands. If you use your hands, clean them right away.

### 4. If you are sick, tell your healthcare provider and avoid close contact with others.

If you are sick, stay away from other people or stay home. Don't shake hands or touch others. When you go for medical treatment, call ahead and ask if there's anything you can do to avoid infecting people in the waiting room.

### 5. Get shots to avoid disease and fight the spread of infection.

Make sure that your vaccinations are current – even for adults. Check with your doctor about shots you may need. Vaccinations are available to prevent these diseases:

- COVID-19
- chicken pox
- mumps
- measles
- diphtheria
- tetanus
- hepatitis
- shingles
- meningitis
- flu (also known as influenza)
- whooping cough (also known as pertussis)
- German measles (also known as rubella)
- pneumonia (*Streptococcus pneumoniae*)
- human papillomavirus (HPV)

## Surgical Site Infections

A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Most patients who have surgery do not develop an infection. However, infections develop in about 1 to 3 out of every 100 patients who have surgery. Some of the common symptoms of a surgical site infection are:

- redness and pain around the area where you had surgery
- drainage of cloudy fluid from your surgical wound
- fever

Many surgical site infections can be treated with antibiotics. The antibiotic given to you depends on the bacteria (germs) causing the infection. Sometimes patients with surgical site infections also need another surgery to treat the infection.

At HSS, every member of your care team will take steps to reduce your risk of surgical site infection. This includes:

- Cleaning their hands and arms up to their elbows with an antiseptic agent just before the surgery.
- Cleaning their hands with soap and water or an alcohol-based hand rub before and after caring for each patient.
- Possibly removing some of your hair immediately before your surgery using electric clippers if the hair is in the same area where the procedure will occur. They should not shave you with a razor.
- Wearing special hair covers, masks, gowns, and gloves during surgery to keep the surgery area clean.
- Giving you antibiotics before your surgery starts. In most cases, you should get antibiotics within 60 minutes before the surgery starts and the antibiotics should be stopped within 24 hours after surgery.
- Cleaning the skin at the site of your surgery with a special soap that kills germs.



There are also steps you can take to prevent surgical site infection.

### Before your surgery:

- Tell your doctor about other medical problems you may have. Health problems such as allergies, diabetes, and obesity could affect your surgery and your treatment.
- Quit smoking. Patients who smoke get more infections. Talk to your doctor about how you can quit before your surgery.
- Do not shave near where you will have surgery. Shaving with a razor can irritate your skin and make it easier to develop an infection.

### At the time of your surgery:

- Ask if you will get antibiotics before surgery.

### After your surgery:

- Make sure that your healthcare providers clean their hands before examining you, either with soap and water or an alcohol-based hand rub. If you do not see your providers clean their hands, please ask them to do so.
- Family and friends who visit you should not touch the surgical wound or dressings.
- Family and friends should clean their hands with soap and water or an alcohol-based hand rub before and after visiting you. If you do not see them clean their hands, ask them to clean their hands.
- Before you go home, your doctor or nurse should explain everything you need to know about taking care of your wound. Make sure you understand how to care for your wound before you leave the Hospital.
- Always clean your hands before and after caring for your wound.
- Make sure you know who to contact if you have questions or problems after you get home.
- If you have any symptoms of an infection, such as redness and pain at the surgery site, drainage, or fever, call your doctor immediately. If you have additional questions, please ask your doctor or nurse.



### HIV Testing

In accordance with New York State law, HSS may be required to offer you the opportunity to be tested for HIV. If you are offered HIV testing, HSS will provide you with additional information about this testing.

## FALLS

Many aspects of surgery can make you unsteady on your feet. These include medications you may be taking for pain and the fact that you're not moving around as much, as well as the surgery itself. **While in the Hospital, it is very important that you do not try to get out of bed or stand on your own.**



**While in the Hospital, it is very important that you do not try to get out of bed or stand on your own.**

### To avoid falls:

- **Always press the call bell for help before getting out of bed.** Your room has many things like foot stools and tray tables that may need to be moved for you to walk safely.
- Always check to see what tubing is connected to you before getting out of bed – for example, IV, pain pump, catheter or airflow foot pumps.
- Use your cane, crutches or walker as directed by your physical therapist.
- Follow your hip or back precautions, if you have them.
- Use the handrails in the bathroom as needed.
- Wear your eyeglasses or contact lenses to clearly see your surroundings and to help you with balance.
- Wear nonslip footwear.
- Do not take your own medications while you are in the Hospital. Your doctor or nurse will give you your medications at HSS.
- Ask your surgeon or healthcare team if you have been given a nerve block. (These are most often given to patients having a total knee replacement.) It can take a long time to wear off and may affect your ability to stand or walk safely.
- Be sure to tell us if you feel dizzy or drowsy for any reason.

## MEDICATIONS

Unless the HSS pharmacy tells you otherwise, **do not bring your medications with you to HSS.** However, it is important to bring a list of the medications you are currently taking. This includes:

- prescriptions
- over-the-counter pain killers like Tylenol or ibuprofen
- vitamins
- herbal supplements
- antacids
- allergy medications

Also be sure to have your contact information for your primary care doctor or the doctor who will be following your care once you leave HSS, including their name, telephone number and fax number.

### Before you leave the Hospital:

- Always ask about any medication that is given to you and know why you are taking it.
- Carefully review the medications you are to take once you leave the Hospital. Be sure you have the prescriptions and that you understand the discharge and follow-up instructions.
- Please throw away any old medication lists and update your records with any retail pharmacies or providers.



You may be sent home on medications such as Coumadin or Lovenox. These are anticoagulants. They are meant to prevent blood clots. Your nurses will provide careful teaching to you and your family and caregivers regarding dose, time, diet and follow-up instructions. All of these instructions are very important for your safety.

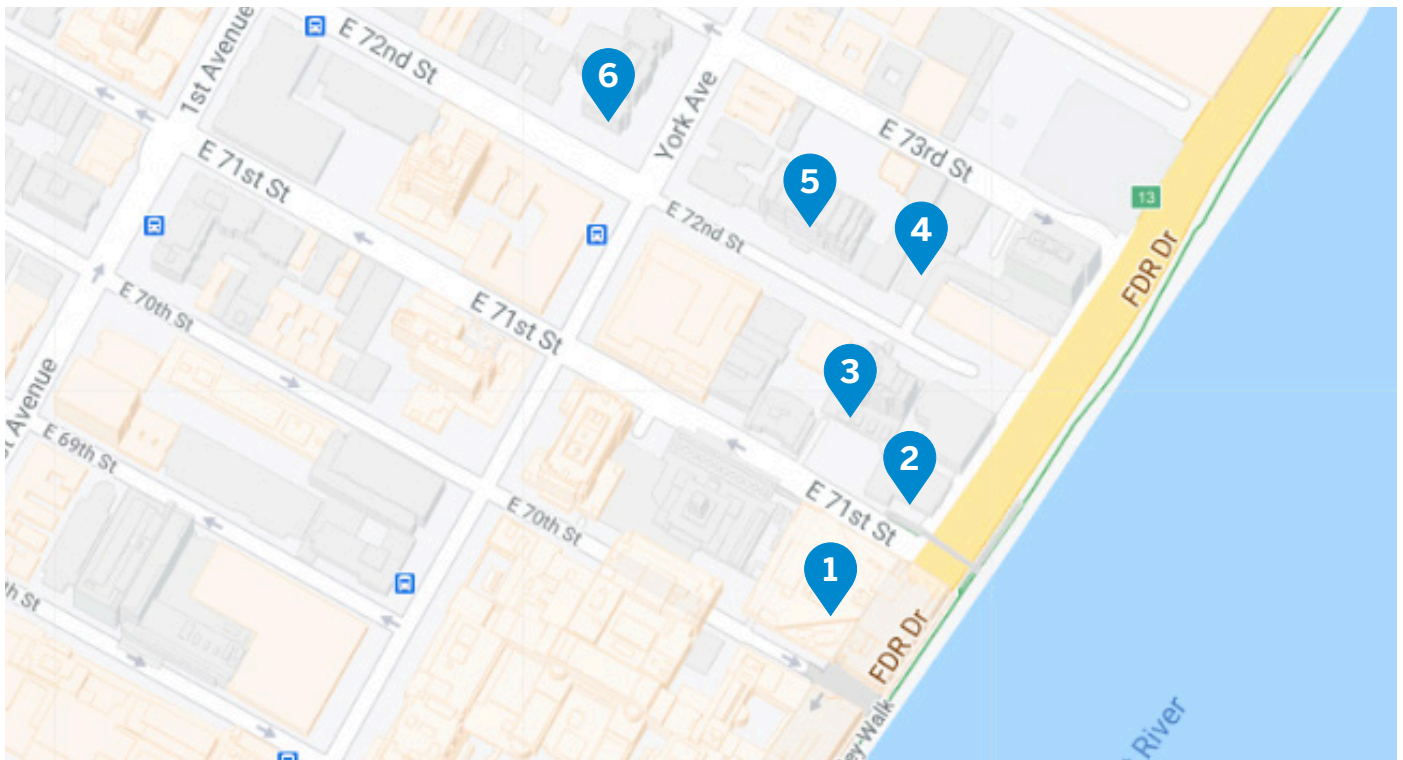


# Around HSS





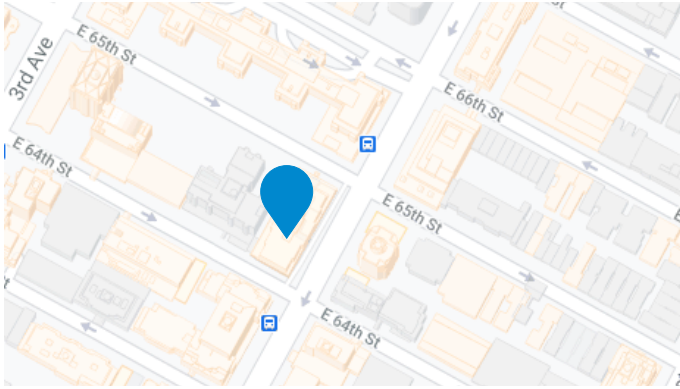
Your surgery will take place at our main location in Manhattan or at one of our ambulatory surgery centers in New York, Connecticut or Florida. Before and after your surgery, you may be able to do physical therapy and other types of appointments at our regional sites, if they are closer to your home.



## NEW YORK CITY

### Manhattan

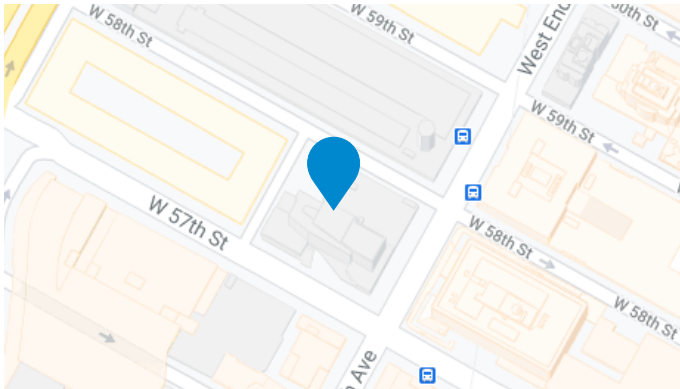
- |  |   |   |
|--|---|---|
| <b>1</b> Hospital for Special Surgery<br>Main Campus<br>535 East 70th Street<br>New York, NY 10021<br>212.606.1000 | <b>3</b> Belaire Building<br>525 East 71st Street<br>New York, NY 10021                 | <b>5</b> River Terrace<br>519 East 72nd Street<br>New York, NY 10021          |
| <b>2</b> The Pavilion<br>541 East 71st Street<br>New York, NY 10021  | <b>4</b> East River Professional Building<br>523 East 72nd Street<br>New York, NY 10021 | <b>6</b> Ambulatory Care Center<br>475 East 72nd Street<br>New York, NY 10021 |



**HSS ASC of Manhattan & HSS Ortho Injury Care**  
 1233 Second Avenue at 65th Street  
 New York, NY 10065  
 212.548.2900



**HSS Midtown**  
 770 Lexington Avenue  
 New York, NY 10065  
 646.618.7777

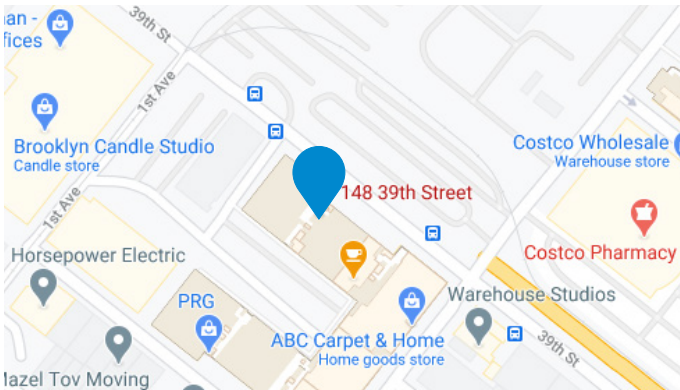


**Sports Medicine Institute West Side**  
**HSS West Side ASC**  
 610 West 58th Street  
 New York, NY 10019  
 646.495.3300



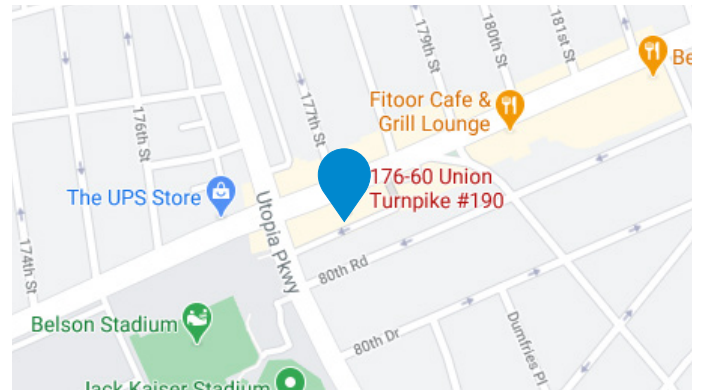
**HSS Hudson Yards**  
 31 Hudson Yards  
 New York, NY 10001  
 646.422.5950

**Brooklyn**



**HSS Brooklyn**  
 148 39th Street  
 Brooklyn, NY 11232  
 646.422.5900

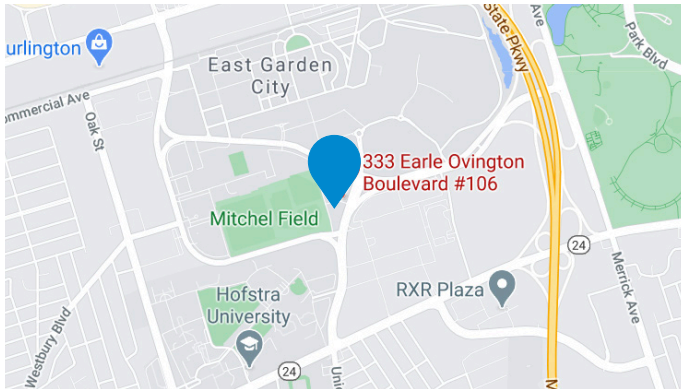
**Queens**



**HSS Queens**  
 176-60 Union Turnpike, Suite 190  
 Fresh Meadows, NY 11366  
 718.591.7090

## REGIONAL LOCATIONS

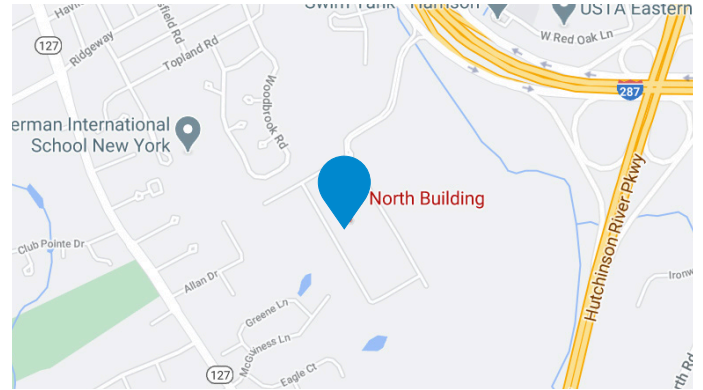
### Long Island



#### HSS Long Island

333 Earle Ovington Blvd., Suite 106  
Uniondale, NY 11553  
516.222.8881

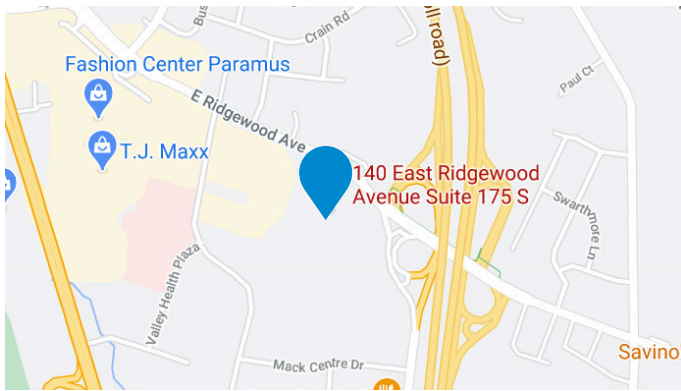
### Westchester



#### HSS Westchester

1133 Westchester Avenue  
White Plains, NY 10605  
914.821.9100

### New Jersey

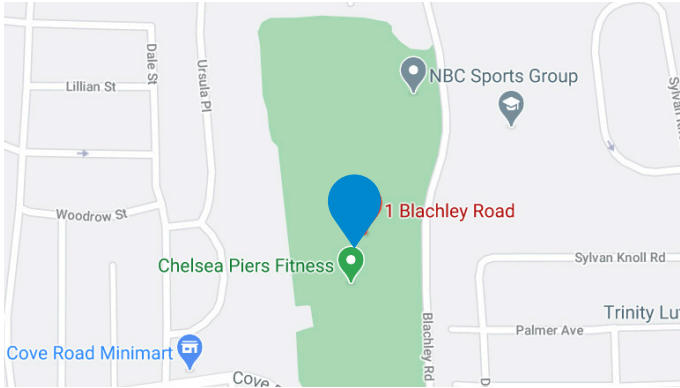


#### HSS Paramus

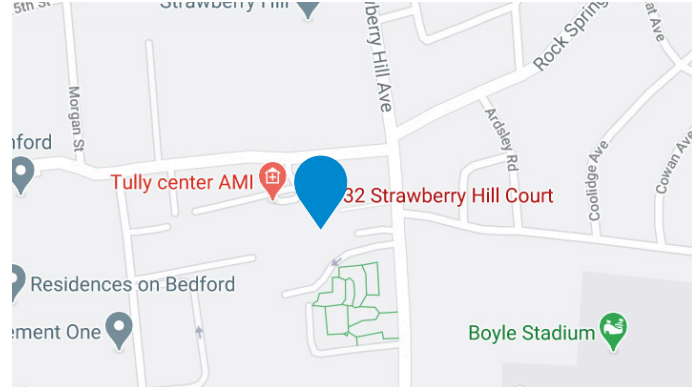
140 East Ridgewood Avenue, Suite 175 S.  
Paramus, NJ 07652  
201.599.8000



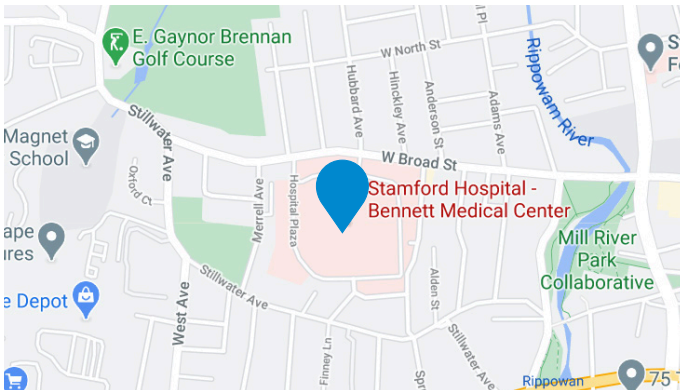
**Connecticut**



**HSS Stamford**  
 1 Blachley Road  
 Stamford, CT 06902  
 203.705.2400



**HSS Orthopedics at Stamford Health**  
 Tully Health Center  
 32 Strawberry Hill Ct.  
 Stamford, CT 06902  
 877.589.8545

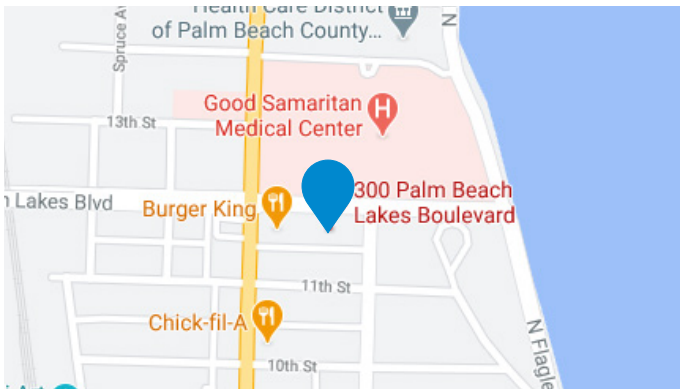


**HSS Orthopedics at Stamford Health**  
 Stamford Hospital  
 One Hospital Plaza  
 Stamford, CT 06904  
 877.589.8545

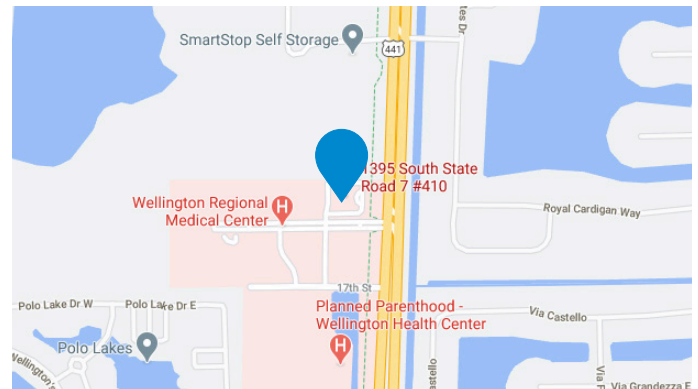


**HSS Hamden**  
 2080 Whitney Avenue, Suite 280  
 Hamden, CT 06518

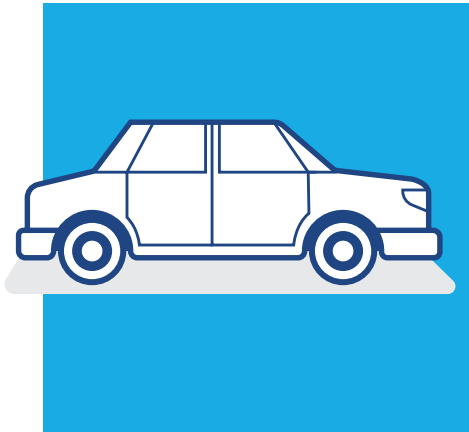
**Florida**



**HSS Florida**  
 300 Palm Beach Lakes Blvd.  
 West Palm Beach, FL 33401  
 561.657.4600



**HSS Florida - Wellington**  
 1395 South State Road 7, Suite 410  
 Wellington, FL 33414  
 561.657.4800



## PARKING

Patients traveling by car to the HSS Main Campus in Manhattan can be let off in the driveway right outside the main lobby. Since street parking in Manhattan is extremely limited, you may need to park in a commercial garage. Information on several local parking garages can be found at [www.hss.edu/neighborhood-directory.asp](http://www.hss.edu/neighborhood-directory.asp).

### Belaire Building Garage

525 East 71st Street  
 New York, NY 10021  
 Tel: 212.606.1000 ext: 3097

HSS locations outside of New York City offer free on-site parking.

## NEIGHBORHOOD DIRECTORY

HSS offers a free Discount Card for patients and visitors. It provides a discount at participating local restaurants. Cards are available in all of the guest areas on the 1st, 4th and 9th floors, as well as the 75th Street Special Procedures Unit. Please see the HSS Neighborhood Directory at [www.hss.edu/neighborhood-directory.asp](http://www.hss.edu/neighborhood-directory.asp) for special rates offered to patients and visitors at local hotels.

**Map Legend:**

- ▲ Entrance
- ♿ Accessible Entrance
- 🚌 Bus
- P Parking
- 🍽️ Food at HSS

**Building List:**

- Main Hospital**  
535 East 70<sup>th</sup> St.
- The Pavilion**  
541 East 71<sup>st</sup> St.
- HSS Research Institute**  
515 East 71<sup>nd</sup> St.
- Belaire**  
525 East 71<sup>st</sup> St.
- East River Professional Bldg**  
523 East 72<sup>nd</sup> St.
- River Terrace**  
519 East 72<sup>nd</sup> St.
- Ambulatory Care Center**  
475 East 72<sup>nd</sup> St.
- Dana Center**  
510 East 73<sup>rd</sup> St.
- BioDynamic Technologies**  
431 East 73<sup>rd</sup> St.
- Special Procedures Unit**  
429 East 75<sup>th</sup> St.
- Spine Therapy Center**  
405 East 75<sup>th</sup> St.
- NewYork-Presbyterian Hospital**  
525 East 68<sup>th</sup> St.
- Integrative Care Center**  
(not pictured)  
635 Madison Ave.
- HSS ASC of Manhattan**  
(not pictured)  
1233 Second Ave.  
(65<sup>th</sup> St.) - 2<sup>nd</sup> floor
- HSS Ortho Injury Care**  
(not pictured)  
1233 Second Ave.  
(65<sup>th</sup> St.) - 1<sup>st</sup> floor
- HSS Sports Medicine Institute West Side**  
(not pictured)  
610 West 58<sup>th</sup> St.
- HSS West Side ASC**  
(not pictured)  
610 West 58<sup>th</sup> St. - 2<sup>nd</sup> floor

## HOSPITAL AMENITIES

Our main campus in Manhattan offers comfortable spaces and amenities including family areas, free Wi-Fi, language and communication support, religious services and much more.



### Family Atriums (Main Hospital)

Our family atrium spaces for patients and visitors are located on each of our surgical and procedure floors. Each area is staffed by patient liaisons. They will greet you and are available throughout the day to answer your questions. We aim to make your visit as comfortable as possible.

When you arrive, please check in at our reception desk.

For your comfort and convenience, our atriums offer:

- cell phone charging stations
- free coffee and tea (ask patient liaisons for more details)
- free Wi-Fi (HSSGuest)
- newspapers and magazines
- vending machines
- iPads available for guest use on 1st, 4th, 9th floors

### Belaire Guest Facility

For patients and visitors who need to stay overnight, our Belaire Guest Facilities offer comfortable lodging. They are conveniently located directly across from HSS on East 71st Street between the FDR and York Avenue. Belaire units can be reserved for use before and after your surgery. If needed, wheelchairs are readily available. Please call 212.606.1989 to inquire about availability and pricing and to make a reservation.

The Belaire Guest Facility offers special features and conveniences:

- fully equipped kitchenettes
- daily housekeeping service
- underground parking
- television and telephone service
- within 25 miles of three major airports

## Chapel

Whether you and your family are Jewish, Catholic, Protestant, Hindu, Muslim, Buddhist or have another or no religious affiliation, the Spiritual Care Department is available to give support and comfort.

We hope to bring comfort and help to find meaning for patients, their loved ones and caregivers who are coping with the spiritual distress that accompanies illness and loss. We offer words of reflection, multifaith prayers and personal experiences about grieving.

The chapel at the main campus is open to all. It is available 24/7 and can be used for prayer and meditation. Bibles (in English and Spanish), prayer books and care notes are available. The chapel is located on the first floor of the Main Hospital building.

### Schedule of Services

Catholic Mass: Sundays at 9:00 am

Muslim Prayer: Individually according to prayer-time schedule

Prayerful Reflections: Wednesdays at 11:00 am

Shabbat Reflections: Fridays at 11:00 am

Patients and visitors are encouraged to call our Spiritual Care Department at 212.606.6630.

## Cafeterias and Coffee Shops

### Belaire Café (Belaire Building)

The Belaire Café is located on the plaza level in the Belaire Building. It serves breakfast, lunch and dinner and is open Monday to Friday from 6:45 am – 6:00 pm. Patients, guests, visitors and staff are all welcome.

### Pyramid Café (Main Hospital)

This convenient café offers snacks and drinks, coffee, and a selection of other essentials. It is located in the lobby.



## Private Rooms

Private rooms are limited and based on availability. They also vary in sizes, amenities and pricing from floor to floor.

**The additional costs associated with these rooms are not covered by insurance.** To learn more about our various room types or to request a private room, please call Ambassador Services at 212.606.1610.

## Private-Duty Nursing

HSS provides excellent nursing care to our patients. Private duty nursing is an additional professional service of one-on-one care. HSS can arrange private duty nurses who are trained in orthopedic care and who know the policies, procedures and routines unique to HSS. These services are provided by health professionals or others, including registered nurses and nurse aides.

Private nurses and aides are permitted to stay with patients in both semi-private and private rooms. Private-duty nurses must be approved by clinical leadership. To arrange for private duty nursing services, please contact ACCESS Private Duty Nursing Services at 212.774.7187. **The cost of private duty nursing care is typically not covered by insurance.**

Our recovery nurses are highly trained in critical care. ACCESS Private Duty personnel will not be needed in the recovery room with you. Services will begin once you are admitted to your hospital room.





# Your Rights as a Patient

## PATIENT'S BILL OF RIGHTS

As a patient in a Hospital in New York State, you have the right, consistent with law, to:

1. Understand and use these rights. If for any reason you do not understand or you need help, the Hospital MUST provide assistance, including an interpreter.
2. Receive treatment without discrimination as to race, color, religion, sex, gender identity, national origin, disability, sexual orientation, age or source of payment.
3. Receive considerate and respectful care in a clean and safe environment free of unnecessary restraints.
4. Receive emergency care if you need it.
5. Be informed of the name and position of the doctor who will be in charge of your care in the Hospital.
6. Know the names, positions and functions of any Hospital staff involved in your care and refuse their treatment, examination or observation.
7. Identify a caregiver who will be included in your discharge planning and sharing of post-discharge care information or instruction.
8. Receive complete information about your diagnosis, treatment and prognosis.
9. Receive all the information that you need to give informed consent for any proposed procedure or treatment. This information shall include the possible risks and benefits of the procedure or treatment.
10. Receive all the information you need to give informed consent for an order not to resuscitate. You also have the right to designate an individual to give this consent for you if you are too ill to do so. If you would like additional information, please ask for a copy of the pamphlet "Deciding About Health Care – A Guide for Patients and Families."
11. Refuse treatment and be told what effect this may have on your health.
12. Refuse to take part in research. In deciding whether or not to participate, you have the right to a full explanation.
13. Privacy while in the Hospital and confidentiality of all information and records regarding your care.
14. Participate in all decisions about your treatment and discharge from the Hospital. The Hospital must provide you with a written discharge plan and written description of how you can appeal your discharge.
15. Review your medical record without charge and obtain a copy of your medical record for which the Hospital can charge a reasonable fee. You cannot be denied a copy solely because you cannot afford to pay.
16. Receive an itemized bill and explanation of all charges.
17. View a list of the Hospital's standard charges for items and services and the health plans the Hospital participates with.
18. Challenge an unexpected bill through the Independent Dispute Resolution process.
19. Complain without fear of reprisals about the care and services you are receiving and to have the Hospital respond to you and if you request it a written response. If you are not satisfied with the Hospital's response, you can complain to the New York State Health Department. The Hospital must provide you with the State Health Department telephone number.
20. Authorize those family members and other adults who will be given priority to visit consistent with your ability to receive visitors.
21. Make known your wishes in regard to anatomical gifts. Persons 16 years of age or older may document their consent to donate their organs, eyes and/or tissues, upon their death, by enrolling in the NYS Donate Life Registry or by documenting their authorization for organ and/or tissue donation in writing in a number of ways (such as a Health Care Proxy, will, donor card, or other signed paper). The Health Care Proxy is available from the Hospital.

## INSTITUTIONAL RELATIONSHIPS

Some physicians at HSS may have financial relationships with outside companies. HSS maintains a comprehensive set of policies to guide these relationships and address any potential conflicts of interest. Physicians with certain financial interests are required to give information about those relationships directly to patients. You can also see a list of each physician's outside financial interests (if they have any) on their individual pages on [HSS.edu](https://www.hss.edu).

HSS as an institution also has financial interests with some outside companies. You can learn more about those relationships at <https://www.hss.edu/affiliations.asp>.

If you have questions or would like more information about either of the above, contact the Corporate Compliance office at 212.774.2398.

## PATIENT'S RESPONSIBILITIES

### Statement of Patient's Responsibilities

The Statement of Patient's Responsibilities, designed as a companion to the Patient's Bill of Rights, encourages patients to participate in their own healthcare and treatment. HSS believes that a mutual understanding of the Patient's Bill of Rights and Responsibilities will result in more effective delivery of healthcare services.

To the extent possible, HSS requests that you, as our patient:

1. Provide accurate and complete information about your past illnesses, hospitalizations, medications and other matters relating to your health, and answer any questions concerning these matters.
2. Participate in your healthcare planning by talking openly and honestly about your concerns with your physician and other healthcare professionals.
3. Understand your health problems, treatment course and care decisions to your own satisfaction and ask questions if you do not understand.
4. Cooperate with your physician and other healthcare professionals in carrying out your healthcare plan both as an inpatient and after discharge.
5. Participate and cooperate with our healthcare professionals in creating a discharge plan that meets your medical and social needs.
6. Inform the hospital or any of its professionals of the existence of any advanced directive (proxy, DNR, living will) you have created.
7. Take responsibility for the consequences and outcomes if you do not follow the care, service or treatment plan.
8. Provide accurate information related to insurance or other sources of payment. You are responsible for ensuring payment of your bills and you may be responsible for charges not covered by your insurance.
9. Treat other patients, visitors and staff with respect and consideration. We also expect you to support mutual consideration and respect by maintaining civil language and conduct in interactions with staff and providers.
10. Support our commitment to a diverse and inclusive environment in which racist and/or discriminatory behaviors and acts of intolerance towards others are not tolerated.

11. Follow instructions, policies, rules and regulations in place to support quality care for patients and a safe environment for all individuals in the hospital.

## PRIVACY PRACTICES

THIS NOTICE OF PRIVACY PRACTICES ("NOTICE") DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY. (Updated October 7, 2013)

Respect for our patients' privacy has long been highly valued at HSS. Not only is it what our patients expect, it is the right way to conduct healthcare. As required by law, we will protect the privacy of health information that may reveal your identity and provide you with a copy of our Notice which describes the health information privacy practices of our Hospital and its medical staff and affiliated healthcare providers when providing healthcare services for our Hospital. Our Notice will be posted in our main entrance area and in other locations at the Hospital. You will also be able to obtain your own copy of our Notice by accessing our website at [www.hss.edu](http://www.hss.edu), calling Health Information Management at 212.606.1254, or asking for one at the time of your next visit.

If you have any questions about this Notice or would like further information, please contact the Hospital's Privacy Officer at 212.774.7500.

### WHO WILL FOLLOW THE PRACTICES IN THIS NOTICE?

Hospital for Special Surgery provides healthcare to our patients together with physicians and other healthcare professionals and organizations. The privacy practices described in this Notice will be followed by:

- Any healthcare professional who provides direct services to treat you at any of our Hospital locations; and
- All employees, medical staff, trainees, students, and volunteers at any of our locations that provide direct hospital services.

The privacy practices described in this Notice do not apply when care is being provided to you in the private offices of the Hospital's medical staff or other healthcare professionals, even if these offices are located on Hospital premises. For example, if you are being treated by a doctor on our medical staff while you are an inpatient in the Hospital, or being treated at an outpatient clinic of the Hospital, the privacy practices described in this Notice will apply. If you are seen by the



same doctor for a follow-up appointment at their private office, whether located at the Hospital or outside of the Hospital, the privacy practices in this Notice will not apply. The doctor should provide you with a separate Notice explaining the privacy practices that will apply to his or her private office. In addition, the privacy practices described in this Notice do not apply to members of the Hospital's medical staff or other members of our workforce when they treat you at other hospitals or facilities.

### PERMISSIONS DESCRIBED IN THIS NOTICE

This Notice will explain the different types of permission we will obtain from you before we use or disclose your health information for certain purposes. The two types of permissions referred to in this Notice are:

- An "opportunity to object" which we will provide to you before we may use or disclose your health information for certain purposes. In these situations, you will have an opportunity to object to the use or disclosure of your health information in person, over the phone, or in writing.
- A "written authorization" in which we will provide you with detailed information about who may receive your health information for certain specific purposes. We will only be permitted to use and disclose your health information described on the written authorization in the ways that are explained on the written authorization form you have signed. A written authorization will have an expiration date or event.

### WHAT HEALTH INFORMATION IS PROTECTED

We are committed to protecting the privacy of information we gather about you while providing health-related services. Some examples of protected health information are:

- information indicating that you are a patient at the Hospital or receiving treatment or other health-related services from our Hospital;
- information about your health condition (such as a disease you may have);
- information about healthcare products or services you have received or may receive in the future (such as an operation); or
- information about your healthcare benefits under an insurance plan (such as whether a prescription is covered);

when combined with:

- demographic information (such as your name, address, or insurance status);

- unique numbers that may identify you (such as your social security number, your phone number, or your driver's license number); or
- other types of information that may identify who you are.

### HOW WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

**Requirement for Written Authorization.** We will generally obtain your written authorization before using your health information or sharing it with others outside the Hospital.

#### Exceptions to Written Authorization Requirement.

There are some situations when we do not need your written authorization before using your health information or sharing it with others. They are:

#### 1. Treatment, Payment, and Healthcare Operations

We may use your health information or share it with others in order to treat your condition, obtain payment for that treatment, and run our healthcare operations. In some cases, we may also disclose your health information for payment activities and certain healthcare operations of another healthcare provider or payor.

**Treatment.** We may share your health information with doctors, nurses and other healthcare providers at the Hospital who are involved in taking care of you, and they may in turn use that information to diagnose or treat you. A doctor at our Hospital may share your health information with another doctor inside our Hospital, or with a doctor at another hospital, to determine how to diagnose or treat you. Your doctor may also share your health information with another doctor to whom you have been referred for further healthcare.

**Payment.** We may use your health information or share it with others so that we may obtain payment for your healthcare services. For example, we may share information about you with your health insurance company in order to obtain reimbursement after we have treated you, or to determine whether it will cover your treatment. We might also need to inform your health insurance company about your health condition in order to obtain pre-approval for your treatment, such as admitting you to the Hospital for a particular type of surgery. Finally, we may share your information with other healthcare providers and payors for their payment activities.

**Healthcare Operations.** We may use your health information or share it with others in order to conduct our healthcare operations. For example, we may use your

health information to evaluate the performance of our staff in caring for you, or to educate our staff on how to improve the care they provide. Finally, we may share your health information with other healthcare providers and payors for certain of their healthcare operations if the information is related to a relationship the provider or payor currently has or previously had with you, and if the provider or payor is required by federal law to protect the privacy of your health information.

**Appointment Reminders, Treatment Alternatives, or Distribution of Health-Related Benefits and Services.**

In the course of providing treatment to you, we may use your health information to contact you with a reminder that you have an appointment for treatment or services at our facility. We may also use your health information in order to recommend possible treatment alternatives or health-related benefits and services that may be of interest to you. However, to the extent a third party provides financial remuneration to us so that we make these treatment-related or healthcare operations-related communications to you, we will secure your authorization in advance as we would with any other marketing communication (as described later in this Notice).

**Fundraising.** Fundraising is a communication from the Hospital or one of its business associates, or by the Hospital's affiliated support organization, The Hospital for Special Surgery Fund, Inc., for the purpose of raising funds to further the Hospital's missions of patient care, research, and education, including appeals for money or sponsorship of events. We may use certain information about you for fundraising, including demographic information (such as your age, date of birth, and gender, and where you live or work), your insurance status, the dates when you received services from us, and information about the Hospital department where you received services, the identity of your treating physician(s), and the outcome of your treatment. We may also share this information with a charitable foundation that will contact you to raise money on our behalf. However, you have the right to opt out of future fundraising communications and can do so by following the opt-out instructions provided as part of the fundraising communication.

**Business Associates.** We may disclose your health information to contractors, agents and other business associates who need the information in order to assist us with obtaining payment or carrying out our healthcare operations. For example, we may share your health information with a billing company that helps us to obtain payment from your insurance company. Another example

is that we may share your health information with an accounting firm or law firm that provides professional advice to us about how to improve our healthcare services and comply with the law. If we do disclose your health information to a business associate, we will have a written contract that requires our business associate to protect the privacy of your health information.

**2. Patient Directory and Family and Friends**

We may use your health information in, and disclose it from, our Patient Directory, or share it with family and friends involved in your care, without your written authorization. You will have an opportunity to object to these uses and disclosures of your health information unless there is insufficient time because of a medical emergency (in which case we will discuss your preferences with you as soon as the emergency is over). We will follow your wishes unless we are required by law to do otherwise.

**Patient Directory.** If you do not object, we will include your name, your location in our facility, your general condition (e.g., fair, stable, critical, etc.), and your religious affiliation in our Patient Directory while you are a patient in the Hospital. This directory information, except for your religious affiliation, may be released to people who ask for you by name. Your religious affiliation may be given to a member of the clergy, such as a priest or rabbi, even if he or she doesn't ask for you by name.

**Family and Friends Involved in Your Care.** If you do not object, we may share your health information with a family member, relative, or close personal friend who is involved in your care or payment for that care. We may also notify a family member, personal representative, or another person responsible for your care about your location and general condition here at the Hospital. In some cases, we may need to share your information with a disaster relief organization that will help us notify these persons.

**3. Emergencies or Public Need**

We may use your health information, and share it with others, in order to treat you in an emergency or to meet important public needs. We will not be required to obtain your written authorization or to provide you with an opportunity to object before we use or disclose your health information for these reasons. We will, however, obtain your written authorization for, or provide you with an opportunity to object to, the use and disclosure of your health information in these situations when state law specifically requires that we do so.

**Emergencies.** We may use or disclose your health information if you need emergency treatment or if we are required by law to treat you.

**As Required by Law.** We may use or disclose your health information if we are required by law to do so. We will notify you of these uses and disclosures if notice is required by law.

**Public Health Activities.** We may disclose your health information to authorized public health officials (or a foreign government agency collaborating with such officials) so they may carry out their public health activities. For example, we may share your health information with government officials that are responsible for controlling disease, injury, or disability. We may also disclose your health information to a person who may have been exposed to a communicable disease or be at risk for contracting or spreading the disease if the law requires or permits us to do so. And finally, we may release some health information about you to your employer if your employer hires us to provide you with a physical exam and we discover that you have a work-related injury or disease that your employer must know about in order to comply with employment laws.

**Victims of Abuse, Neglect, or Domestic Violence.** We may release your health information to a public health authority that is authorized to receive reports of abuse, neglect, or domestic violence. For example, we may report your information to government officials if we reasonably believe that you have been a victim of such abuse, neglect, or domestic violence. We will make efforts to obtain your permission before releasing this information, but in some cases we may be required or authorized to act without your permission.

**Health Oversight Activities.** We may release your health information to government agencies authorized to conduct audits, investigations, and inspections of our facility. These government agencies monitor the operation of the healthcare system, government benefit programs such as Medicare and Medicaid, and compliance with government regulatory programs and civil rights laws.

**Product Monitoring, Repair, and Recall.** We may disclose your health information to a person or company that is regulated by the Food and Drug Administration for the purpose of: (1) reporting or tracking product defects or problems; (2) repairing, replacing, or recalling defective or dangerous products; or (3) monitoring the performance of a product after it has been approved for use by the general public.

**Lawsuits and Disputes.** We may disclose your health information if we are ordered to do so by a court or administrative tribunal that is handling a lawsuit or other dispute.

**Law Enforcement.** We may disclose your health information to law enforcement officials for the following reasons:

- To comply with court orders or laws that we are required to follow;
- To assist law enforcement officers with identifying or locating a suspect, fugitive, witness, or missing person;
- If you have been the victim of a crime and we determine that: (1) we have been unable to obtain your agreement because of an emergency or your incapacity; (2) law enforcement officials need this information immediately to carry out their law enforcement duties; and (3) in our professional judgment disclosure to these officers is in your best interests;
- If we suspect that your death resulted from criminal conduct;
- If necessary to report a crime that occurred on our property; or
- If necessary to report a crime discovered during an offsite medical emergency (for example, by emergency medical technicians at the scene of a crime).

**To Avert a Serious and Imminent Threat to Health or Safety.** We may use your health information or share it with others when necessary to prevent a serious and imminent threat to your health or safety, or the health or safety of another person or the public. In such cases, we will only share your information with someone able to help prevent the threat. We may also disclose your health information to law enforcement officers if you tell us that you participated in a violent crime that may have caused serious physical harm to another person (unless you admitted that fact while in counseling), or if we determine that you escaped from lawful custody (such as a prison or mental health institution).

**National Security and Intelligence Activities or Protective Services.** We may disclose your health information to authorized federal officials who are conducting national security and intelligence activities or providing protective services to the President or other important officials.

**Military and Veterans.** If you are in the Armed Forces, we may disclose health information about you to appropriate military command authorities for activities they deem necessary to carry out their military mission. We may also release health information about foreign military personnel to the appropriate foreign military authority.

**Inmates and Correctional Institutions.** If you are an inmate or you are detained by a law enforcement officer, we may disclose your health information to the prison officers or law enforcement officers if necessary to provide you with healthcare, or to maintain safety, security, and good order at the place where you are confined. This includes sharing information that is necessary to protect the health and safety of other inmates or persons involved in supervising or transporting inmates.

**Workers' Compensation.** We may disclose your health information for workers' compensation or similar programs that provide benefits for work-related injuries.

**Coroners, Medical Examiners, and Funeral Directors.** In the unfortunate event of your death, we may disclose your health information to a coroner or medical examiner. This may be necessary, for example, to determine the cause of death. We may also release your health information to funeral directors as necessary to carry out their duties.

**Organ and Tissue Donation.** In the unfortunate event of your death, we may disclose your health information to organizations that procure or store organs, eyes, or other tissues so that these organizations may investigate whether donation or transplantation is possible under applicable laws.

**Research.** In most cases, we will ask for your written authorization before using your health information or sharing it with others in order to conduct research. However, under some circumstances, we may use and disclose your health information without your written authorization if we obtain approval through a special process to ensure that research without your written authorization poses minimal risk to your privacy. Under no circumstances, however, would we allow researchers to use your name or identity publicly. We may also release your health information without your written authorization to people who are preparing a future research project, so long as any information identifying you does not leave our facility. In the unfortunate event of your death, we may share your health information with people who are conducting research using the

information of deceased persons, as long as they agree not to remove from our facility any information that identifies you.

#### 4. Completely De-identified or Partially De-identified Information

We may use and disclose your health information if we have removed any information that has the potential to identify you so that the health information is "completely de-identified." We may also use and disclose "partially de-identified" health information about you for research, public health, or healthcare operations purposes if the person who will receive the information signs an agreement to protect the privacy of the information as required by federal and state law. Partially de-identified health information will not contain any information that would directly identify you (such as your name, street address, social security number, phone number, fax number, electronic mail address, website address, or license number).

#### 5. Incidental Disclosures

While we will take reasonable steps to safeguard the privacy of your health information, certain disclosures of your health information may occur during or as an unavoidable result of our otherwise permissible uses or disclosures of your health information. For example, during the course of a treatment session, other patients in the treatment area may see, or overhear discussion of, your health information.

## USES AND DISCLOSURES OF YOUR HEALTH INFORMATION REQUIRING AUTHORIZATION

As stated above, the Hospital cannot and will not use or disclose your health information without your written authorization for any reason except those described in this Notice. For example, we require your written authorization for most uses or disclosures of your health information for certain marketing purposes, for the sale of health information, or with respect to psychotherapy notes (where appropriate). In addition, you may initiate the transfer of your records to another person or organization by completing a written authorization form.

If you provide us with written authorization, you may revoke, or cancel, that written authorization at any time, except to the extent that we have already relied upon it. If you revoke the authorization, we will no longer use or disclose your health information for the reasons covered by your written authorization. Your revocation will not affect any uses or disclosures we have already made



prior to the date we receive notice of the revocation. To revoke a written authorization, please write to the Hospital's Health Information Management office.

## **YOUR RIGHTS TO ACCESS AND CONTROL YOUR HEALTH INFORMATION**

We want you to know that you have the following rights to access and control your health information. These rights are important because they will help you make sure that the health information we have about you is accurate. They may also help you control the way we use your information and share it with others, or the way we communicate with you about your medical matters.

### **1. Right to Inspect and Copy Records**

You have the right to inspect and obtain a copy, including an electronic copy, from us in a timely manner of any of your health information that may be used to make decisions about you and your treatment for as long as we maintain this information in our records. This includes medical and billing records.

**How to Make Your Request:** To inspect or obtain a copy of your health information, please submit your request in writing to Health Information Management, 535 East 70th Street, New York, NY 10021. You may also submit your request electronically through the MyHSS secure patient portal, via email at [ROIrequest@hss.edu](mailto:ROIrequest@hss.edu) or via fax at 212-774-7364. A request to inspect or obtain a copy of your health information must include: (1) the desired form or format of access; (2) a description of the health information to which the request applies; and (3) appropriate contact information.

**Cost:** If you request a copy of the information, we may charge a fee for the costs of copying, mailing, or other supplies we use to fulfill your request. The standard fee is \$0.75 per page and must generally be paid before or at the time we give the copies to you.

**Form and Format:** If the information you request is stored electronically, we will provide the information in the form and format you request if the information is readily producible in that format, or, if not, we will reach an agreement with you as to alternative readable electronic format.

**Response Time:** We will respond to your request for inspection of records within 10 days. We ordinarily will respond to requests for copies within 30 days. If we need additional time to respond to a request for copies, we

will notify you in writing within the time frame above to explain the reason for the delay and when you can expect to have a final answer to your request.

**If Your Request Is Denied:** Under certain very limited circumstances, we may deny your request to inspect or obtain a copy of your information. If we do, we may provide you with a summary of the information instead. We will also provide a written notice that explains our reasons for providing only a summary, and a complete description of your rights to have that decision reviewed and how you can exercise those rights. The notice will also include information on how to file a complaint about these issues with us or with the Secretary of the Department of Health and Human Services. If we have reason to deny only part of your request, we will provide complete access to the remaining parts after excluding the information we will not let you inspect or copy.

### **2. Right to Amend Records**

If you believe that the health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept in our records.

**How to Make Your Request:** To request an amendment, please write to Health Information Management, 535 East 70th Street, New York, NY 10021. You may also email your request to [ROIrequest@hss.edu](mailto:ROIrequest@hss.edu) or fax your request to 212-774-7364. A request to amend your health information must include a description of the amendment requested and should include the reasons why you think we should make the amendment.

**Response Time:** Ordinarily we will respond to your request within 60 days. If we need additional time to respond, we will notify you in writing within 60 days to explain the reason for the delay and when you can expect to have a final answer to your request.

**If Your Request Is Denied:** Your request for an amendment may be denied if you request an amendment of health information that we determine: (1) was not created by the Hospital, unless the originator of the health information is no longer available to make the amendment; (2) is not part of the Hospital's records; (3) is not health information that you would be permitted to inspect or copy; or (4) is accurate and complete.

If we deny part or all of your request, we will provide a written notice that explains our reasons for doing so. You will have the right to have certain information related to your requested amendment included in your records. For

example, if you disagree with our decision, you will have an opportunity to submit a statement explaining your disagreement which we will include in your records. We will also provide you with information on how to file a complaint with us or with the Secretary of the Department of Health and Human Services. These procedures will be explained in more detail in any written denial notice we send you.

### 3. Right to an Accounting of Disclosures

You have a right to request an “accounting of disclosures,” which identifies certain other persons or organizations to whom we have disclosed your health information in the previous six years in accordance with applicable law and the protections afforded in this Notice. An accounting of disclosures does not describe the ways that your health information has been shared within the Hospital as long as all other protections described in this Notice have been followed (such as obtaining the required approvals before sharing your health information with our doctors for research purposes).

- An accounting of disclosures also does not include information about the following disclosures:
- Disclosures we made to you or your personal representative;
- Disclosures we made pursuant to your written authorization;
- Disclosures we made for treatment, payment or healthcare operations;
- Disclosures made from the patient directory;
- Disclosures made to your friends and family involved in your care or payment for your care;
- Disclosures that were incidental to permissible uses and disclosures of your health information (for example, when information is overheard by another patient passing by);
- Disclosures for purposes of research, public health or our healthcare operations of limited portions of your health information that do not directly identify you;
- Disclosures made to federal officials for national security and intelligence activities; and
- Disclosures about inmates to correctional institutions or law enforcement officers.

How to Make Your Request: To request an accounting of disclosures, please write to Health Information Management at 535 East 70th Street, New York, NY 10021. You may also email your request to [ROIrequest@hss.edu](mailto:ROIrequest@hss.edu) or fax your request to 212-774-7364. Your

request must state a time period within the past six years for the disclosures you want us to include. For example, you may request a list of the disclosures that we made between January 1, 2012, and January 1, 2013. You have a right to receive one accounting within every 12-month period for free. However, we may charge you for the cost of providing any additional accounting in that same 12-month period. We will always notify you of any cost involved so that you may choose to withdraw or modify your request before any costs are incurred. The scope of your right to request an accounting may be modified from time to time to comply with changes in federal law or state law.

Response Time: Ordinarily we will respond to your request for an accounting within 60 days. If we need additional time to prepare the accounting you have requested, we will notify you in writing about the reason for the delay and the date when you can expect to receive the accounting. In rare cases, we may have to delay providing you with the accounting without notifying you because a law enforcement official or government agency has asked us to do so.

### 4. Right to Request Additional Privacy Protections, Including Restriction on Disclosures to Health Plans

You have the right to request that we further restrict the way we use and disclose your health information to treat your condition, collect payment for that treatment, or run our healthcare operations. You may also request that we limit how we disclose information about you to family or friends involved in your care. For example, you could request that we not disclose information about a surgery you had. In addition, you have the right to restrict certain disclosures of protected health information to a health plan where you pay, or another person on your behalf pays, out-of-pocket in full for the healthcare item or service.

How to Make Your Request: To request restrictions, please write to Health Information Management, 535 East 70th Street, New York, NY 10021. You may also email your request to [ROIrequest@hss.edu](mailto:ROIrequest@hss.edu) or fax your request to 212-774-7364. Your request should include (1) what information you want to limit; (2) whether you want to limit how we use the information, how we share it with others, or both; and (3) to whom you want the limits to apply.

We Are Not Always Required to Agree: We are not always required to agree to your request for a restriction, and in some cases the restriction you request may not be permitted under law. We do not need to agree to the



restriction unless (i) the disclosure is for the purpose of carrying out payment or healthcare operations and is not otherwise required by law, and (ii) the health information relates only to a healthcare item or service that you or someone on your behalf has paid for out-of-pocket and in full. However, if we do agree, we will be bound by our agreement unless the information is needed to provide you with emergency treatment or comply with the law. Once we have agreed to a restriction, you have the right to revoke the restriction at any time. Under some circumstances, we will also have the right to revoke the restriction as long as we notify you before doing so; in other cases, we will need your permission before we can revoke the restriction.

### **5. Right to Request Confidential Communications**

You have the right to request that we communicate with you about your medical matters in a more confidential way by requesting that we communicate with you by alternative means or at alternative locations. For example, you may ask that we contact you at home instead of at work.

**How to Make Your Request:** To request more confidential communications, please write to Health Information Management, 535 East 70th Street, New York, NY 10021. You may also email your request to [ROIrequest@hss.edu](mailto:ROIrequest@hss.edu) or fax your request to 212-774-7364. We will not ask you the reason for your request, and we will try to accommodate all reasonable requests. Please specify in your request how or where you wish to be contacted, and how payment for your healthcare will be handled if we communicate with you through this alternative method or location.

### **6. Right to Notice of Breach of Unsecured Health Information**

We are required by law to maintain the privacy of your health information, to provide you with this Notice containing our legal duties and privacy practices with respect to your health information, and to abide by the terms of this Notice. It is the Hospital's policy to safeguard your health information so as to protect the information from those who should not have access to it. If, however, for some reason we experience a breach of your unsecured health information, we will notify you of the breach.

## **MISCELLANEOUS**

### **1. How Someone May Act on Your Behalf**

You have the right to name a personal representative who may act on your behalf to control the privacy of your

health information. Parents and guardians will generally have the right to control the privacy of health information about minors unless the minors are permitted by law to act on their own behalf.

### **2. How to Learn About Special Protections for HIV, Alcohol and Substance Abuse, Mental Health, and Genetic Information**

Special privacy protections apply to HIV-related information, alcohol and substance abuse treatment information, mental health information, and genetic information. Some parts of this Notice may not apply to these types of information. If your treatment involves this information, you may be provided with special authorization forms in connection with the disclosure of such information by the Hospital. To request copies of these forms, please contact Health Information Management at 212.606.1254.

### **3. How to Obtain a Copy of This Notice**

You have the right to a paper copy of this Notice. You may request a paper copy at any time, even if you have previously agreed to receive this Notice electronically. To do so, please call Health Information Management at 212.606.1254. You may also obtain a copy of this Notice from our website at [www.hss.edu](http://www.hss.edu) or by requesting a copy at your next visit.

### **4. How to Obtain a Copy of Revised Notice**

We may change our privacy practices from time to time. If we do, we will revise this Notice so you will have an accurate summary of our practices, and the revised Notice will apply to all of your health information. We will post any revised Notice in our admitting areas and other locations in the Hospital. You will also be able to obtain your own copy of the revised Notice by accessing our website at [www.hss.edu](http://www.hss.edu), calling our Health Information Management office at 212.606.1254, or asking for one at the time of your next visit. The effective date of the Notice will always be noted in the cover and at the top outside corner of each page. We are required to abide by the terms of the Notice that is currently in effect.

### **5. How to File a Complaint**

If you believe your privacy rights have been violated, you may file a complaint with us or with the Secretary of the Department of Health and Human Services. To file a complaint with us, please contact the Privacy Officer at 212.774.7500 or send a letter to the Hospital to the attention of the Privacy Officer. No one will retaliate or take action against you for filing a complaint.

## NONDISCRIMINATION POLICIES

HSS is committed to providing an environment of inclusion, diversity, openness and respect for the patients and communities that we serve. Consistent with this commitment, HSS admits and treats patients, and provides high-quality care and services without regard to age, actual or perceived race, color, creed, ethnicity, religion, national origin, alienage or citizenship status, culture, language, physical or mental disability, socioeconomic status, veteran or military status, partnership or marital status, sex, sexual orientation, gender identity or expression, or any other basis prohibited by federal, state, or local law or by accreditation standards. At HSS, we believe that healthcare services that are respectful of and responsive to health beliefs, practices, and cultural and linguistic needs of diverse patients help to foster positive health outcomes.

### HSS will:

- Provide free aides and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign-language interpreters; and
  - Written information in other formats, such as large print, audio, and accessible electronic formats.
- Provide free language services to people whose primary language is not English, such as:
  - Qualified interpreters; and
  - Information written in other languages.

If you need these services, contact Bella Elogoodin, Senior Director, [languageservices@hss.edu](mailto:languageservices@hss.edu); or at 212.606.1760.

If you feel Hospital for Special Surgery has failed to provide these services or discriminated in another way, you can file a grievance with Reginald Odom, Senior Vice President, Hospital for Special Surgery, 535 East 70th Street, New York, NY 10021; TTY 1.800.676.3777; fax 212.606.1961; [odomr@hss.edu](mailto:odomr@hss.edu). You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, you may contact the office of Reginald Odom for assistance.

You also have the right to file a civil rights complaint with the US Office of Health and Human Services, Office for Civil Rights, electronically at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at US Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington DC; 20201. 1.800.868.1019; 1.800.537.7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>



## INCLUSIVE CARE FOR ALL

At HSS, we believe that healthcare services that are respectful of and responsive to health beliefs, practices, and cultural and linguistic needs of diverse patients help to foster positive health outcomes. HSS has been recognized as a Leader in LGBTQ Healthcare Equality for the sixth consecutive year by the Human Rights Campaign (HRC) Foundation, the largest national lesbian, gay, bisexual, transgender and queer (LGBTQ) civil rights organization in the US. We achieved high marks in the areas of nondiscrimination, LGBTQ education, training, and in our demonstration of commitment to equitable and inclusive care. Our policies help to foster dignity and respect for all patients from diverse backgrounds, identities and experiences.



For more information and additional resources, please visit our Diversity and Inclusion website at <https://www.hss.edu/diversity-inclusion.asp>

## REQUESTING MEDICAL RECORDS

The Department of Health Information Management is responsible for maintaining HSS patient records. HSS patients or their personal representatives may request access to all or part of their medical record. Examples of specific information that may be requested include the following:

- billing statements
- discharge summary
- lab reports
- operative reports
- physician office records
- radiology and/or MRI images
- radiology and/or MRI reports
- rehabilitation records

HSS patients can view selected lab results, health and visit summaries, billing statements, and more on the MyHSS patient portal. (See page 4 for more on using MyHSS.) If you have any questions regarding MyHSS, please contact our MyHSS Help Desk at 844.269.4509. Patients can also complete one of the forms listed below to request a complete copy of their medical records.

- Request for Access to Health Information – to have records sent to yourself
- Individual Authorization – to authorize the release of records to another party

These forms are both located at <https://www.hss.edu/health-information-management-medical-records.asp>



**Your Satisfaction**



## Your Satisfaction

We strive to meet our patients' needs and ensure your satisfaction with your care.

### PATIENT EXPERIENCE

The Patient Experience Advocates at HSS are here to support you and your family. They focus on neutrality, collaboration and problem resolution. They are also experts in Hospital policies and procedures.

#### HSS Patient Experience Advocates:

- serve as liaisons between patients, families and Hospital and medical staff
- advocate for patients' rights
- promote a positive patient experience
- serve as points of contact for complaints and grievances
- provide patient feedback to HSS to continually improve the patient experience
- serve as a resource and support for ethical issues, including end-of-life treatment decisions
- provide information for the patient regarding services and resources both within and outside HSS (e.g., advance directives, financial services, general community resources and information)

We are proud to contribute to a positive healthcare experience for patients, families and the community.

**You may reach a Patient Experience Advocate by emailing [patientexperience@hss.edu](mailto:patientexperience@hss.edu) or contacting the department at 212-774-2403.**



## FEEDBACK ABOUT HSS

### How HSS Responds to Patient Complaints

If you have any issue or concern regarding your care, or if you have a question about Hospital policies or procedures, please contact the Patient Experience Advocates at 212.774.2403 between the hours of 9:00 am – 5:00 pm Monday through Friday. You will be contacted within 24 hours of your call. On evenings, weekends and holidays, contact the Nursing Coordinator at 212.606.1188.

If you wish to file a complaint with HSS, you can report your grievance verbally or in writing. You will receive an acknowledgment that we have received your grievance within 7 business days. You will be informed about the resolution of the grievance within 45 business days. Under unusual circumstances, you will be notified if additional time is needed for our review.

*In addition, you may report a complaint to:*

1. Any HSS staff member or department manager, director, supervisor or nurse in charge.
2. Executive Office of Hospital for Special Surgery by phone at 212.606.1236 or letters sent to Hospital for Special Surgery, 535 East 70th Street, New York NY 10021.
3. New York State Department of Health by phone at 800.804.5447 or letter sent to NYS Department of Health, Centralized Hospital Intake Program, Mailstop: CA/DCS, Empire State Plaza, Albany, NY 12237
4. The Joint Commission by phone at 1.800.994.6610 or letter sent to Office of Quality Monitoring, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181, or email to [complaint@jointcommission.org](mailto:complaint@jointcommission.org).
5. Medicare Patients Only: Livanta by phone at 1.866.815.5440 or letter at BFCC-QIO Program, 9090 Junction Drive, Suite 10, Annapolis Junction, MD 20701.

**Additional information can be found in the “Your Rights as a Patient” section of this guide, starting on page 28.**

## SURVEYS

### Press Ganey

We hope that you will be satisfied with the care you receive at HSS. As you know, HSS has achieved a national reputation for excellence in orthopedics and rheumatology. A large part of this is the quality of our overall care and attention to our patients' experience.

Feedback from our patients is critical in helping us achieve and maintain this excellence. We listen and respond to concerns, especially when they present new opportunities for improvement. We use services from Press Ganey Associates, Inc., to help gather information about our patients' experiences at HSS.

Shortly after you return home following your surgery, you will receive a survey from Press Ganey asking you about your experiences at HSS. We would be very grateful if you could complete and return this survey. It is a vital way of helping us identify areas where we can improve our services.

### Real-Time Survey Feedback

In addition to your Press Ganey survey, you will also have the opportunity to provide feedback in real time on your day of surgery. If your visitor chooses to sign up for text message notifications, we will make sure to include a link to a survey that will allow you, as well as your visitor, to provide us with your feedback.

### Patient-Reported Outcomes Measures (PROMs)

At some point during or after your care at HSS, you may be contacted to fill out a PROMs survey.

These short pre- and post-operative questionnaires help your healthcare team to track your progress and improve care for you and other patients.

To learn more about the importance of filling out PROMs, visit <https://www.hss.edu/proms.asp>.





# Paying for Your Care



# Paying for Your Care

**HSS offers many resources to help you understand and pay for the costs of your care.**

## INSURANCE COVERAGE

You should check with the doctor arranging for your hospital services to determine the health insurance plans in which he or she participates and whether it is expected that other doctors will be required for your care. Your doctor can provide you with the contact information of those other doctors expected to provide care to you.

Hospitals are required by law to provide information about their standard charges for the items and services they provide. Learn more at <https://www.hss.edu/hospital-charges>. For specific information regarding charges and insurance coverage, you may contact the HSS Insurance Advisory Service. They can serve as a liaison service between you, your insurance carrier and HSS to provide information regarding your potential out-of-pocket responsibilities. These could include copayments, deductibles and co-insurance. HSS Insurance Advisory Service can be reached at 212.774.2607 or through our online form located at [www.hss.edu/insurance-form](http://www.hss.edu/insurance-form).

### Hospital and Physician Costs

The physician services you receive at HSS are not included in the Hospital's charges and will be billed separately. Physicians also make their own decisions regarding their participation in insurance plans and may or may not participate in the same plans as the Hospital. HSS anesthesiologists, radiologists and pathologists participate in most of the same plans as the Hospital.

## FINANCIAL ASSISTANCE AND GENERAL INFORMATION

If you are worried that you may not be able to pay in full for your care at HSS, you may be eligible for financial aid. We provide financial aid to patients based on income, assets, needs and insurance status. Information about financial assistance is available at <https://www.hss.edu/financial-assistance> or you may contact our Financial Assistance Office at 212.606.1505.

The Financial Assistance Policy covers only medically necessary services. These include Hospital services and some services provided by certain doctors and other employees of HSS. The policy will be applied consistently regardless of race, color, creed, sexual orientation, ethnic origin, immigration status or any protected category.

### Medicare and Ambulatory Surgery Extended Stay

If you have Medicare coverage, it is possible that even if you stay overnight in the hospital, you will not be considered an inpatient. You may instead receive Ambulatory Surgery Extended Stay services as an outpatient. This is in accordance with Medicare Part A insurance plan guidelines. If this applies to you, you will be given more detailed information about your coverage and options. If you have Medicare Part A or Part B and have questions about your coverage, contact the HSS Insurance Advisory Service at 212.774.2607.

## ELIGIBILITY

In order to be eligible for Financial Assistance, individuals must meet both the Financial Criteria and Coverage Criteria. In order to meet the Financial Criteria, your gross annual income must not exceed seven times the US Department of Health and Human Services Poverty Guidelines. In order to meet the Coverage Criteria, you must be (i) an uninsured US resident; (ii) an insured US resident with coverage that covers services at HSS at least to some extent; or (iii) be referred through the Special Access Program.

Under the Special Access Program, insured US residents in need of specialized care that is not reasonably available closer to their residence than HSS may be eligible for financial assistance. In addition, (i) insured US residents and (ii) uninsured non-residents, in each case who are referred by an HSS Physician Hospital Organization (PHO) physician and meet other requirements set out in the full Policy, may be eligible.

## HOW TO APPLY

Anyone requesting Financial Assistance must complete an application. The applicant should provide documentation that supports their family's current level of income, available assets and demographic information. Documents that prove the current level of income can include pay stubs or Social Security or disability statements. If you cannot provide such items, you may still apply. All applications, supporting documentation, and communication will be treated confidentially.

HSS uses poverty guidelines issued by the US Department of Health and Human Services to determine a patient's eligibility for financial assistance. The amount of the discount varies based on your income and the size of your family. The income limits based on seven times the 2023 Federal Poverty Guidelines (the "FPL") are below.

Family Size	Annual Family Income	Monthly Family Income	Weekly Family Income
1	\$102,060	\$ 8,505	\$ 1,963
2	\$138,040	\$11,503	\$2,655
3	\$174,020	\$14,502	\$3,347
4	\$210,000	\$17,500	\$4,038
5	\$245,980	\$ 20,498	\$ 4,730
6	\$281,960	\$23,497	\$4,730
7	\$317,940	\$26,495	\$6,114
8	\$353,920	\$29,493	\$6,806

The applicant will be notified in writing of the determination within 30 calendar days of receipt of a complete application. You may disregard any Hospital bills while your application for a discount is being considered. You may appeal our initial Financial Assistance determination – the full policy provides a description of our appeals process.

## AMOUNT OF ASSISTANCE

If your income is at or below 500% of the FPL and you are uninsured, care will be provided without charge. (If you are insured, your patient responsibility will be reduced to zero.)

For an individual whose income is between 501% and 700% of the FPL, HSS shall provide a 50% discount.

The discount will be applied to the patient's obligation. For uninsured patients, this is based on the amount that Medicaid would pay for the service. For insured patients, the discount is applied to the deductible and copayment obligation. In no event will a patient who qualifies for Financial Assistance have out-of-pocket expense for the applicable care that exceeds the amount that the Hospital would generally bill based on Medicaid rates.



## AVAILABILITY OF THE FINANCIAL ASSISTANCE POLICY

A copy of the Financial Assistance Policy and an application is available at [www.hss.edu/financial-assistance](http://www.hss.edu/financial-assistance). You may request a copy of the Financial Assistance Policy and an application by email, phone, fax, or in person from:

Hospital for Special Surgery  
Financial Assistance Program  
535 East 70th Street  
New York, NY 10021  
Phone: 212-606-1505  
Fax: 212-774-2811

The requested materials will be mailed without charge. For more information about the Financial Assistance Program, or for assistance with the application process, you may speak with a Financial Assistance Associate who can be reached at the contact address, phone number, or location immediately above. Foreign language translation can be provided if requested. Completed applications should be submitted to the Financial Assistance Program at the above address.

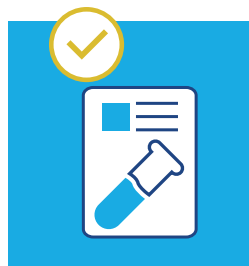
The Financial Assistance Policy, application, and this Summary are also available in various foreign languages. Translators can be provided if requested.

Individuals who feel that the Policy has not been applied in accordance with its terms should seek assistance from the HSS Department of Corporate Compliance and Internal Audit. Complaints should be directed to the HSS Corporate Compliance Officer at 212.774.2398 or the confidential Compliance Helpline at 1.888.651.6234. If you have a complaint, you may also call the New York State Department of Health at 1.800.804.5447.

## BILLING

The physician services you receive in the Hospital are not included in the Hospital's charges. Your surgeon(s), medical doctor(s), and other specialists bill for their services separately. They also make their own decisions about participation in insurance plans. They may or may not participate in the same health plans as the Hospital. Your anesthesiologist (excluding pain management

physician), radiologist and pathologist participate in most of the same plans as the Hospital. Contact and plan participation information for doctors and practice groups at HSS can be found at <https://www.hss.edu/physicians>.



You should also check with your surgeon to determine whether it is expected that the services of any other HSS physicians will be required for your care, so that you may review their insurance plan participation. Your physician can provide you with the contact

information of any additional HSS physicians whose services may be needed.

Similar to your surgeon's charges, the anesthesiologist's professional fees are not included in your Hospital bill. While all of our anesthesiologists participate with Aetna, Affinity, Empire Blue Cross Blue Shield, ConnectiCare, HIP Health Plan of New York, MagnaCare, Oxford, United, Medicare, Medicaid, Workers Compensation and No-Fault, we recommend that you contact our billing company, Fellow Health Partners, or your insurance carrier to confirm coverage under your particular plan. Even if we participate with your carrier, depending on the specifics of your plan, you may be responsible for payment of a co-pay, deductible or coinsurance.

If we do not participate with your insurance carrier, please contact Fellow Health Partners or your carrier to confirm the extent of coverage under your plan. Please be reminded that if there is an outstanding balance after insurance has processed your claim, whether deductible, co-pay, co-insurance, or for any other reason, you will be responsible for payment of this balance. Regardless of your insurance carrier or our participation status with that carrier, after your surgery you will receive a bill for anesthesia services. Fellow Health Partners will also file this claim directly with your carrier. In some cases, you may be asked to speak with your carrier to ensure that we are paid appropriately for our services. Fellow Health Partners will enable and assist you in this process. Finally, in the event that your insurance carrier sends you the check for anesthesia services, you are responsible for forwarding that payment to us.



# Resources for Your Recovery





# Resources for Your Recovery

Support services at HSS are intended to support your healing and overall health.

## PATIENT AND PUBLIC EDUCATION CLASSES

For more than 35 years, HSS Public and Patient Education has walked alongside diverse and underserved communities, empowering them through education and outreach designed to help prevent injuries, improve self-management skills and enable long-term quality of life. Our passion is helping people get back to doing the things they need and love to do.

HSS Public and Patient Education offers a wide range of educational programs for our patients, our local communities and the public. Most of our programming is offered virtually, so you can attend from wherever you are.

Our calendar of programming changes throughout the year. We offer:

- lectures and workshops
- exercise classes
- health videos
- community outreach programs

For a current schedule and to sign up, visit [www.hss.edu/public-patient-education.asp](http://www.hss.edu/public-patient-education.asp).

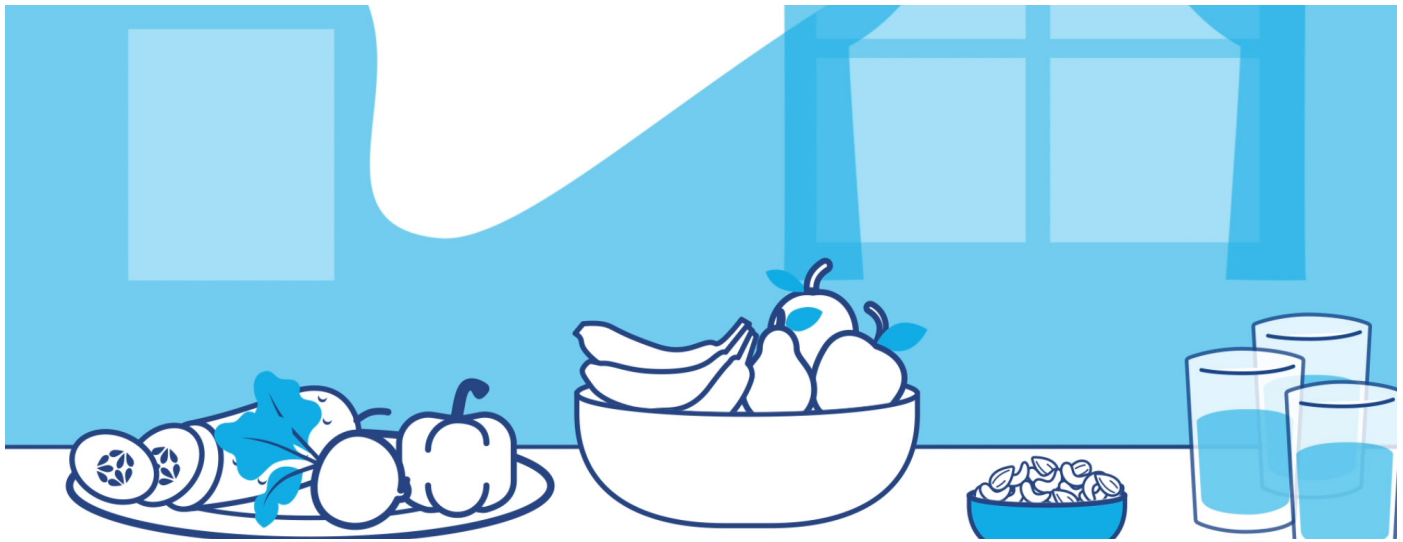
## SUPPORTIVE CARE SERVICES

### Ergonomic Evaluations

The Joint Mobility Center offers ergonomic evaluations to help you optimize the fit of your workstation and improve your workspace. The evaluation includes:

- an individualized musculoskeletal assessment
- analysis of your current workstation setup (through photos and/or video)
- individualized exercise programs
- recommendations and strategies for proper body mechanics and workstation layout

For more information or to schedule an ergonomic workplace evaluation, contact the Joint Mobility Center at 212.606.1213.



### Nutrition Services

The HSS Performance Center offers nutrition counseling for the athlete, including hydration and fueling strategies, achieving ideal body composition and nutrition for optimal recovery. For more information, call 646.797.8005.

## INTEGRATIVE MEDICINE

HSS Midtown offers a variety of wellness programs and alternative therapies. It is open to the public. Our one-on-one classes are designed to help you progress steadily and safely to your fitness goals.

### Services offered include:

- physical therapy
- physiatry
- pain management
- medical acupuncture
- Pilates
- massage therapy
- sports performance

These treatments can be used together with your rehabilitation program to help you heal after your surgery.

### Massage Therapy

Our massage therapists at HSS Midtown and Sports Performance Services are highly experienced in the treatment of medical conditions, ranging from chronic pain management to acute musculoskeletal injuries, including post-operative care. To book a massage at HSS Midtown, call 646.618.7777. To book a massage at the Performance Center, call 646.797.8005.

### Pilates Studio Training

The Pilates Method is a mind/body form of exercise. It focuses mainly on building core strength, correcting alignment and improving range of motion. The method is also extremely adaptable and can be highly beneficial to current or post-rehabilitative patients. The state-of-the-art, fully equipped Pilates studio at HSS Midtown offers a unique experience to each of its clients. Our certified instructors are experienced working with all populations and work towards facilitating each client in achieving their goals. For information, call 646.618.7777.

### Medical Acupuncture

Acupuncture works by stimulating the body's natural healing powers through the stimulation of specific "acupoints" with thin, metallic needles. The physicians that provide acupuncture services at HSS Midtown are committed to the practice of integrative medicine. For more information, call 646.618.7777.

### HSS Midtown

770 Lexington Avenue  
(between 60th and 61st Streets)  
New York, NY 10065  
646.618.7777



## USEFUL CONTACT NUMBERS

### Before Your Admission

#### Patient Access Services Admissions

Questions about arriving for your surgery at HSS  
917.260.4500

#### Belaire Guest Facility

Accommodations  
212.606.1989

#### Coast to Coast

Assistance for travelers within the USA  
212.606.1610

#### International Center

Assistance for international travelers  
212.606.1186

### General Information

#### Main Number / General Assistance / Operator

General questions about HSS  
212.606.1000

#### Patient Information

Find a patient in the hospital/general questions  
212.606.1377

#### Pediatric Orthopedic Urgent Care

Emergency hotline  
877.477.1543

#### MyHSS

Assistance with patient portal  
844.269.4509

#### Physician Referral Service

Request an appointment  
877.606.1555

#### Development Office

Make a charitable donation to HSS  
212.606.1196

#### Nursing Administration

Questions for HSS nursing staff  
212.606.1231

#### Volunteer Office

Contact our volunteers  
212.606.1228

### Rehabilitation

#### Inpatient physical therapy

For patients recovering at HSS  
212.606.1221

#### Outpatient physical therapy

For patients recovering at home  
212.606.1213

#### Virtual physical therapy

Appointments from home  
1.800.493.0039

#### HSS Rehabilitation Network

Other recommended providers  
212.606.1317

#### HSS@Home

Virtual appointments  
212.606.1032

#### Rehabilitation Main Number

All other rehabilitation questions  
1.800.493.0039

### Support Programs and Visitor Services

#### Patient & Family Resource Line

General support  
212.774.7547

#### Case Management

Discharge planning questions  
212.606.1271

#### Patient Advocacy

Questions or concerns about your care  
212.774.2403

#### Social Work Programs

Patient support programs  
646.797.8327

#### Spiritual Care

Spiritual support  
212.606.1757

### Billing and Financial Questions

#### Insurance Advisory Program

Insurance questions  
212.774.2607

#### Patient Accounting

Hospital billing questions  
844.252.1772

### Radiology and Imaging Records

#### Radiology

X-rays, MRIs, ultrasounds and CT scans  
212.606.1015



## SAMPLE PATIENT FORMS

The following pages contain copies of forms you will receive before your surgery. You do not need to sign them; they are included here for your reference.

### Centers for Medicare and Medicaid Services

#### Hospital for Special Surgery is participating in Medicare's Comprehensive Care for Joint Replacement (CJR) model

Hospital for Special Surgery is participating in the Comprehensive Care for Joint Replacement (CJR) model. Medicare designed this model to encourage higher quality care and greater financial accountability from hospitals when Medicare beneficiaries receive lower-extremity joint replacement procedures (LEJR), typically hip or knee replacements. Hospital for Special Surgery's participation in the CJR model should not restrict your access to care for your medical conditions or your freedom to choose your health care providers and services. All existing Medicare beneficiary protections continue to be available to you.

#### **The CJR model aims to help give you better care.**

The CJR model aims to support better and more efficient care for beneficiaries undergoing LEJR procedures. A CJR episode of care is typically defined as an admission of an eligible Medicare beneficiary to a hospital participating in the CJR model for an LEJR procedure. This model uses episode payment and quality measurement for an episode of care associated with LEJR procedures to encourage hospitals, physicians, and post-acute care providers to work together to improve the quality and coordination of care from the initial hospitalization through recovery. Under the CJR model, Hospital for Special Surgery can earn additional payments from Medicare if we meet the high quality goals set by Medicare, while keeping hospital costs and care spending under control. If we don't meet these quality and cost goals, we may have to repay Medicare.

Medicare is using the CJR model to encourage Hospital for Special Surgery to work more closely with your doctors and other health care providers that help patients recover after discharge from the hospital including, but not limited to, nursing homes (skilled nursing facilities), home health agencies, inpatient rehabilitation facilities, and long-term care hospitals. If you require a stay in a Skilled Nursing Facility (SNF) to assist with your recovery from surgery and if, and only if, it is clinically appropriate, the CJR model permits Hospital for Special Surgery to discharge you to a high quality SNF sooner than the three days Medicare usually requires to cover a SNF stay.

Medicare will monitor your care to ensure you and others are receiving high quality care.

Hospital for Special Surgery entered into financial agreements with collaborating health care providers and suppliers who are engaged in care redesign with the hospital and who may furnish health care services to you during your episode of care. Under these arrangements, Hospital for Special Surgery may share payments received from Medicare as a result of reduced episode spending and hospital internal cost savings with collaborating providers and suppliers. Hospital for Special Surgery may also share financial accountability for increased episode spending with collaborating providers and suppliers.

The following website, [www.hss.edu/files/collaboration-list-for-cjr.pdf](http://www.hss.edu/files/collaboration-list-for-cjr.pdf), includes health care providers and suppliers that have established a financial arrangement with Hospital for Special Surgery in order to share in financial rewards and/or losses in the CJR model.

August 2017

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## Centers for Medicare & Medicaid Services

### It's your choice which hospital, doctor, or other providers you use.

You have the right to choose which hospital, doctor, or other post-hospital stay health care provider you use.

- If you believe that your care is adversely affected or have concerns about substandard care, you may call 1-800-MEDICARE or contact your state's Quality Improvement Organization by going to: <http://www.qioprogram.org/contact-zones>.
- To find a different doctor, visit Medicare's Physician Compare website, <http://www.medicare.gov/physiciancompare>, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- To find a different hospital, visit <https://www.medicare.gov/hospitalcompare>, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- To find a different skilled nursing facility, visit Medicare's Nursing Home Compare website, <http://www.medicare.gov/nursinghomecompare>, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- To find a different home health agency, visit Medicare's Home Health Agency Compare website, <http://www.medicare.gov/homehealthcompare>, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For an explanation of how patients can access their health care records and beneficiary claims data, please visit <https://www.healthit.gov/patientsM-families/blue-button>.

### Get more information

If you have questions or want more information about the Comprehensive Care for Joint Replacement(CJR) model, call Hospital for Special Surgery at 212-774-2607 or call 1-800-MEDICARE. You can also find additional information at <https://innovation.cms.gov/initiatives/cjr>.

This letter is to give you information only. No action is required on your part.

## **Beneficiary Notification Letter – BPCI Advanced**

### **Your Doctor or Hospital Has Joined Medicare’s New Payment and Service Delivery Model**

Hello,

We wanted to let you know that your health care provider,  
HOSPITAL FOR SPECIAL SURGERY has  
volunteered to take part in our Centers for Medicare & Medicaid Services (CMS) Bundled Payments for Care Improvement Advanced Model (BPCI Advanced). **This doesn’t change your Medicare rights or benefits and you don’t need to do anything.**

#### **What are bundled payments?**

A bundled payment combines, or bundles together, payments that Medicare makes to your health care providers for the many different kinds of medical services you might get in a specific time period. In BPCI Advanced, this time period could include a hospital inpatient stay or outpatient procedure, plus 90 days.

#### **Why would Medicare bundle payments?**

Bundled payments are thought of as a “value-based” way to pay because health care providers are responsible for both the quality and cost of medical care they give. This is a relatively new way of paying health care providers compared to the “fee-for-service” way Medicare has traditionally paid, where providers are paid separately for each service they provide. Bundled payments encourage these providers to work together to provide better, more coordinated care during your hospital stay, or outpatient procedure, and through your recovery.

#### **What does BPCI Advanced mean for me?**

You’re more likely to get even better care when hospitals, doctors, and other health care providers work together. In BPCI Advanced, hospitals, doctors, and other health care providers may be rewarded for providing better, more coordinated health care. Medicare will watch BPCI Advanced participants closely to make sure that you and other patients keep getting efficient, high quality care.

January 2019

## Beneficiary Notification Letter – BPCI Advanced (page 2)

### What do I need to know about BPCI Advanced?

What's most important for you to know is that **your Medicare rights and benefits don't change** because your health care provider is participating in BPCI Advanced. Medicare will keep covering all of your medically necessary services.

Even though Medicare will pay your doctor in a different way under BPCI Advanced, **how much you have to pay won't change**. Health care providers and suppliers who are enrolled in Medicare will submit their Medicare claims like they always have.

**You'll have all the same Medicare rights and protections**, including the right to choose which hospital, doctor, or other health care provider you see. If you don't want to get care from a health care provider who's participating in BPCI Advanced, then you'll have to choose a different health care provider who's not participating in the Model.

### How can I give feedback about my health care?

Medicare might ask you to take a voluntary survey about the services and care you received from HOSPITAL FOR SPECIAL SURGERY during your hospital stay or outpatient procedure and for a specific period of time afterwards. You can decide whether you want to take the voluntary survey, but if you do, it'll help Medicare make BPCI Advanced and the care of other Medicare patients better.

If you have concerns or complaints about your care, you can:

- Talk to your doctor or health care provider.
- Contact your Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO). You can get your BFCC-QIO's phone number at [Medicare.gov/contacts](https://www.medicare.gov/contacts) or by calling 1-800-MEDICARE. TTY users can call 1-877-486-2048.

### Where can I learn more about BPCI Advanced?

Learn more about [BPCI Advanced](https://innovation.cms.gov/initiatives/bpci-advanced/) at <https://innovation.cms.gov/initiatives/bpci-advanced/>:

- A list of all the hospitals and physician group practices in the country participating in BPCI Advanced.
- All of the inpatient and outpatient Clinical Episodes that are currently included under BPCI Advanced. A Clinical Episode is a grouping of medical conditions or diagnoses that are included in the BPCI Advanced Model.

January 2019



{Insert contact information here}

## Important Message from Medicare

**Patient name:**

**Patient number:**

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### Your Rights as a Hospital Inpatient

- You can receive Medicare covered services. This includes medically necessary hospital services and services you may need after you are discharged, if ordered by your doctor. You have a right to know about these services, who will pay for them, and where you can get them.
- You can be involved in any decisions about your hospital stay.
- You can report any concerns you have about the quality of care you receive to your QIO at {insert QIO name and toll-free number of QIO} The QIO is the independent reviewer authorized by Medicare to review the decision to discharge you.
- You can work with the hospital to prepare for your safe discharge and arrange for services you may need after you leave the hospital. When you no longer need inpatient hospital care, your doctor or the hospital staff will inform you of your planned discharge date.
- You can speak with your doctor or other hospital staff if you have concerns about being discharged

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### Your Right to Appeal Your Hospital Discharge:

- You have the right to an immediate, independent medical review (appeal) of the decision to discharge you from the hospital. If you do this, you will not have to pay for the services you receive during the appeal (except for charges like copays and deductibles).
- If you choose to appeal, the independent reviewer will ask for your opinion. The reviewer also will look at your medical records and/or other relevant information. You do not have to prepare anything in writing, but you have the right to do so if you wish.
- If you choose to appeal, you and the reviewer will each receive a copy of a detailed explanation about why your covered hospital stay should not continue. You will receive this detailed notice only after you request an appeal.
- If the QIO finds that you are not ready to be discharged from the hospital, Medicare will continue to cover your hospital services.
- If the QIO agrees services should no longer be covered after the discharge date, neither Medicare nor your Medicare health plan will pay for your hospital stay after noon of the day after the QIO notifies you of its decision. If you stop services no later than that time, you will avoid financial liability.
- If you do not appeal, you may have to pay for any services you receive after your discharge date.

**See page 2 of this notice for more information.**

## How to Ask For an Appeal of your Hospital Discharge

- You must make your request to the QIO listed above.
- Your request for an appeal should be made as soon as possible, but no later than your planned discharge date and before you leave the hospital.
- The QIO will notify you of its decision as soon as possible, generally no later than 1 day after it receives all necessary information.
- Call the QIO listed on Page 1 to appeal, or if you have questions.

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## If You Miss The Deadline to Request An Appeal, You May Have Other Appeal Rights:

- If you have Original Medicare: Call the QIO listed on Page 1.
- If you belong to a Medicare health plan: Call your plan at {insert plan name and toll-free number of plan}

For more information, call 1-800-MEDICARE (1-800-633-4227), or TTY: 1-877-486-2048. CMS does not discriminate in its programs and activities, To request this publication in an alternate format, please call: 1-800-MEDICARE or email: AltFormatRequest@cms.hhs.gov.

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## Additional Information (Optional):

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## Please sign below to indicate you received and understood this notice.

I have been notified of my rights as a hospital inpatient and that I may appeal my discharge by contacting my QIO.

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Signature of Patient or Representative

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Date / Time

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0692. The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to : CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

(Ingresar información de contacto aquí)

## Un mensaje importante de Medicare

Nombre del paciente:

Número del paciente:

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### Sus derechos como paciente hospitalizado:

- Usted puede recibir los servicios que son cubiertos por Medicare. Estos incluyen los servicios hospitalarios que sean necesarios por razones médicas y los servicios que podría necesitar luego de ser dado de alta, siempre y cuando los servicios sean ordenados por su médico. Usted tiene derecho a enterarse de estos servicios, quién los pagará, y dónde podrá obtenerlos.
- Usted puede participar en toda decisión relativa a su hospitalización.
- Usted puede informar sus preocupaciones relativas a la calidad de la atención que recibe a su QIO en: {ingresar nombre y número de teléfono gratuito de la QIO} La QIO es el revisor Independiente que Medicare autoriza para revisar la decisión de darle de alta.
- Usted puede trabajar con el hospital para prepararse para la alta de manera segura y organizar los servicios que podría necesitar luego de salir del hospital. Cuando usted ya no necesita atención hospitalaria como paciente internado, su médico o el personal del hospital le informará de la fecha prevista para su alta.
- Usted puede hablar con su médico u otro personal del hospital si tiene inquietudes sobre su alta.

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### Su derecho de apelar el alta del hospital:

- Usted tiene derecho a una revisión (apelación) médica independiente e inmediata de la decisión de darle de alta. Si usted la hace, no tendrá que pagar por los servicios que recibe durante la apelación (salvo los cargos como copagos y deducibles).
- Si decide apelar, el revisor independiente le pedirá su opinión. El revisor además examinará sus expedientes médicos y/u otra información relevante. Usted no tendrá que preparar nada por escrito, pero tiene derecho a hacerlo si desea.
- Si decide apelar, usted y el revisor recibirán una copia de la explicación detallada indicando los motivos por los cuales la cobertura de la hospitalización no deberla continuar. Usted recibirá este aviso 'detallado solamente después de solicitar la apelación.
- Si la QJO determina que usted no está en condiciones para ser dado de alta, Medicare seguirá cubriendo los servicios hospitalarios.
- Si la QIO está de acuerdo en que los servicios no deber! an ser cubiertos más allá de la fecha del alta, ni medicare ni su plan de salud de Medicare pagará por su hospitalización después del mediodía del día en que la QIO le notifica de su decisión. Si usted pone fin a los servicios antes de dicho momento, evitará la responsabilidad económica.
- Si usted no apela, podría tener que pagar por los servicios que reciba más allá de la fecha del alta.

**Vea la página 2 de este aviso para más Información.**

## Cómo solicitar una apelación del alta del hospital

- Usted deberá presentar su solicitud a la QIO indicada arriba.
- Deberá hacer su solicitud de apelación lo antes posible, pero en la fecha prevista para el alta y antes de salir del hospital, a más tardar..
- La QIO le notificará de su decisión lo antes posible; por lo general, será un máximo de 1 día después de haber recibido toda la información necesaria..
- Llame a la QIO indicada en la Página 1 para apelar o si tiene preguntas.

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## Si usted pierde la fecha límite para solicitar la apelación, es posible que tenga otros derechos de apelación:

- Si usted tiene Medicare Original: Llame a la QIO indicada en la Página 1.
- Si tiene un plan de salud de Medicare: Llame a su plan al {ingrese el nombre y número de teléfono gratuito del plan}

Para más información, llame al 1-800-MEDICARE (1-800-633-4227), o para TTY: 1-877-486-2048. CMS no discrimina en sus programas y actividades. Para solicitar esta publicación en formato alternativo, llame al: 1-800-MEDICARE o envíe un mensaje de correo electrónico: AltFormatRequest@cms.bbs.gov.

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## Información adicional (Opcional):

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## Firme abajo para indicar que usted ha recibido y entendido este aviso.

Se me notificó de mis derechos como paciente hospitalizado y que podré comunicarme con mi QIO para apelar el alta.

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Firma del paciente o representante

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Fecha / Tiempo

De acuerdo con la Ley de Reducción de Trámites de 1995, ninguna persona será obligada a responder a una recopilación de información a menos que se exhiba un número de control válido de la OMB. El número de control válido de la OMB para esta recopilación de información es 0938-0692. El tiempo necesario para completar esta recopilación de información es de aproximadamente 15 minutos por respuesta, incluido el tiempo para revisar las instrucciones, buscar fuentes de datos existentes, reunir los datos necesarios, y completar y revisar la recopilación de información. Si tiene preguntas sobre la precisión del tiempo estimados o sugerencias para mejorar este formulario, escriba a: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244 -1850.









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