

SME, Inc. USA 5949 Carolina Beach Road Wilmington, NC 28412 Phone: (800)538-4675 Fax: (800)560-5424 SME Clinic 2301 Rexwoods Drive Suite 106 Raleigh, NC 27607 Phone: (919)977-9566 Fax: (919) 977-9567

CLIENT BILL OF RIGHTS AND RESPONSIBILITIES

We believe that all clients receiving services from SME, Inc. USA should be informed of their rights. Therefore you are entitled to:

- 1. Be treated with dignity, courtesy and respect.
- 2. Receive reasonable coordination and continuity of services from the referring agency for home care services.
- 3. Receive a timely response from SME, Inc. USA.
- 4. Be fully informed of SME, Inc. USA policies, procedures, and charges for services including eligibility for third party reimbursement.
- 5. Receive an explanation of all forms you are requested to sign.
- 6. Receive services without regard to age, gender, race, nationality, creed, sexual orientation, diagnosis/infectious disease, disability,
- Participate in decision concerning service needs including the right to refuse service within the confines of the law and the right to formulate advance directives.
- 8. Have all your records (except as otherwise provided for by law or third party payor contracts) and all communications, written or oral, treated confidentially.
- 9. Have access to all health records pertaining to you and to challenge and have your records corrected for accuracy.
- Express dissatisfaction and suggest changes in any service without fear of coercion, discrimination, reprisal, or unreasonable interruption in service.
- 11. Receive information on SME, Inc. USA mechanism for receiving, reviewing and resolving your complaints or concerns.
- 12. Be assured that all SME, Inc. USA staff honors your rights.
- 13. Have access to qualified staff by telephone 24 hours a day, 7 days per week.
- 14. Be informed of your responsibility regarding services.
- 15. Receive information regarding my financial benefit to SME, Inc. USA when referred to another organization, service or individual.
- 16. Participate in the consideration of ethical issues that may arise during your care.

CLIENT RESPONSIBILITIES

- Client agrees to notify SME, Inc. USA of any hospitalization, change in customer insurance, address, telephone number, physician, or when the need for the services no longer exists.
- 2. Client agrees to request payment of authorized Medicare, Medicaid, or other private insurance benefits be paid directly to SME, Inc. USA for any services furnished by SME, Inc. USA.
- 3. Client agrees to accept all financial responsibility for all services furnished by SME, Inc. USA.
- 4. Client agrees that SME, Inc. USA shall not insure or be responsible to the client for any personal injury or property damage related to any service including that caused by improper use of products; the act of omission of any other third party, or by any criminal act or activity, war, riot, insurrection, fire or act of God.
- 5. Client understands that SME, Inc. USA retains the right to refuse delivery of service to any client at any time.
- 6. Client agrees that any legal fees resulting from a disagreement between the parties shall be borne by the unsuccessful party in any legal action taken.

Signed: _	 	 	
Date:	 	 	