CONSUMER BILL OF RIGHTS AND RESPONSIBILITIES

To ensure the finest care possible, as a Patient receiving Irmat Pharmacy services, you should understand your role, rights and responsibilities involved in your own plan of care.

Consumer Rights

- To select those who provide you with Pharmacy services
- To know about the philosophy, characteristics and scope of the services Irmat Pharmacy provides, including its mail service pharmacy program including specific limitation on those services.
- To be fully informed in advance about care/service to be provided, including the disciplines that provide the care.
- The right to identify the staff member of Irmat Pharmacy and their job title, and to speak with a supervisor of the staff member if requested.
- To be informed, both orally and in writing, in advance of service being provided, of the charges, including payment for service expected from your insurance or other third-parties and any charges that you will be responsible for.
- To receive administrative information regarding changes in or termination of Irmat Pharmacy services including the mail service pharmacy program.
- Be informed of consumer rights under state law to formulate an Advanced Directive, if applicable.
- To receive the appropriate or prescribed services in a professional manner without discrimination relative to your age, sex, race, religion, ethnic origin, sexual preference or physical or mental handicap.
- To be treated with friendliness, courtesy and respect by each and every individual representing our Pharmacy.
- To be provided with adequate information from which you can give your informed consent for commencement of services, the continuation of services, the transfer of services to another pharmacy provider, or the termination of services.
- To express concerns, complaints/grievances regarding treatment or care, lack of respect of person or property or recommend modifications to your Pharmacy services, without restraint, interference, coercion, discrimination or reprisal.
- To request and receive complete and up-to-date information relative, to your medication or risks associated with medication.
- To receive services promptly and professionally, while being fully informed as to our Pharmacy’s policies, procedures and charges.
- To speak with a pharmacist upon request.
- To request and receive data regarding treatment, services, or costs thereof, privately and with confidentiality.
- To be given information as it relates to the uses and disclosure of any information contained in your record that could be considered Protected Health Information.
- To have your prescriptions and other information remain private and confidential, except as required and permitted by law.

Consumer Responsibilities

- To provide any forms that are necessary to participate in the mail service pharmacy program, as applicable, to the extent required by law.
- To provide accurate and complete information, including clinical and contact information required for processing of your prescription, and to notify the pharmacy of any changes to this information.
- To agree to a schedule of services and report any cancellation of scheduled deliveries.
- To accept responsibility for your actions, if refusing treatment or not complying with, the prescribed services.
- To respect the rights of Pharmacy personnel.
- To notify your Physician of your participation in the mail service pharmacy program, if applicable.
- To notify your Physician and the Pharmacy with any potential side effects and/or complications.