New Member's Package
2017

63 Main Street Brockton MA (508) 559-6699
TDD: (508) 587-4224
To our new patient:

Welcome to Brockton Neighborhood Health Center. As a new patient, you are receiving this information packet so that we can educate you about the range of our available services, and familiarize you with how our Health Center works.

Please take the time to read through these materials and keep the information packet in a handy place for your future reference. It contains telephone numbers, the names and specialties of providers, hours of operation, patient rights and responsibilities, plus much more.

Should you have any questions regarding this information or any other questions related to our Health Center, please don’t hesitate to ask. We will be happy to assist you in any way.

Our Mission

Brockton Neighborhood Health Center is a multicultural organization that collaborates with community agencies and residents to provide high quality comprehensive health care that is responsive to community health needs and is linguistically, culturally and financially accessible. We believe that all individuals have a right to good health and access to health care.

Accreditation

Brockton Neighborhood Health Center is accredited by the Joint Commission (formally known as The Joint Commission for the Accreditation of Healthcare Organizations) and, is recognized as a Patient Centered Medical Home by the National Committee for Quality Assurance.

Our Services

- Adult Medicine
- Pediatrics
- OBGYN
- Urgent Care
- Behavior Health
- Dental
- Medical Home Initiative
- Specialties (Gastroenterology, Nephrology, Neurology)
- Pharmacy & X-Ray (on-site)
- HIV Services
- Eye Services
- STI Clinic

Please Note: When a life threatening occurrence happens within the health center the patient will be resuscitated.
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HOURS OF OPERATION

Adult Primary, Urgent Care, OB/GYN, Pediatrics, Dental, and Specialists are as follows:

Monday  8:15 am to 8 pm
Tuesday  8:15 am to 8 pm
Wednesday  8:15 am to 8 pm
Thursday  8:15 am to 8 pm
Friday  8:15 am to 8 pm
Saturday  9:00 am to 3 pm  Dental and Adult Primary / Urgent Care
         9:00 am to 1 pm  Pediatrics

Eye Services hours of operation are as follows:

Monday  8:30 am to 5:00 pm
Tuesday  8:30 am to 7:00 pm
Wednesday  9:00 am to 5:00 pm
Thursday  8:30 am to 7:00 pm
Friday  8:30 am to 5:00 pm
Saturday  9:00 am to 2:00 pm – Every other Saturday

Optical Shop hours of operation are as follows:

Monday  9:00 am to 5:30 pm
Tuesday  9:00 am to 7:00 pm
Wednesday  9:00 am to 5:30 pm
Thursday  9:00 am to 7:00 pm
Friday  9:00 am to 5:30 pm
Saturday  9:00 am to 2:00 pm – Every other Saturday

Laboratory Services hours of operation are as follows:

Monday  8:00 am to 8:00 pm
Tuesday  8:00 am to 8:00 pm
Wednesday  9:00 am to 8:00 pm
Thursday  8:00 am to 8:00 pm
Friday  8:00 am to 6:00 pm
Saturday  9:00 am to 8:00 pm
Radiology Services operated By Good Samaritan Medical Center hours of operation are as follows:

Monday  9:30 am to 8 pm
Tuesday  9:30 am to 8 pm
Wednesday  9:30 am to 8 pm
Thursday  9:30 am to 8 pm
Friday  9:30 am to 6 pm
Saturday  Closed

Vicente’s Satellite at 158 Pleasant Street

Monday  11:00 am to 8:00 pm
Tuesday  8:15 am to 5:00 pm
Wednesday  8:15 am to 5:00 pm
Thursday  8:15 am to 5:00 pm
Friday  8:15 am to 5:00 pm
Saturday  Closed

After Hours Coverage

Calls should be made to our main phone number – 508-559-6699. You will be connected to our Nurse Triage center.

2017 HOLIDAY SCHEDULE

Monday, May 29th  CLOSED  Memorial Day
Tuesday, July 4th  CLOSED  Independence Day
Monday, September 4th  CLOSED  Labor Day
Thursday, November 23rd  CLOSED  Thanksgiving Day
Saturday, November 25th  CLOSED  Holiday Parade
Monday, December 25th  CLOSED  Christmas Day
List of Providers

**Adult Medicine**
Dr. Benjamin Lightfoot, (CMO)
Dr. Joseph Panerio-Langer, (Assistant CMO)
Dr. Azmat Maskati
Dr. Marie Francoeur
Dr. Sasikala Sannapareddy
Dr. Syed Muqquads
Dr. Nicolas Palacios
Dr. Douglass Bibuld
Dr. Olivia Pop
Dr. Peggy Mentor
Dr. Rachel Hardenstein
Liljana Etienne, NP
Andrea Haffty, NP
Kaitlin Thomas-Frost, NP
Tykeia Samuel, NP

**OB/GYN**
Dr. Soheil Hanjani
Dr. Vikas Merchia
Dr. David Edinburgh
Dr. Lucy Lomas
Dr. Taidine Lopes
Dr. Anika Moore
Barbara Wax, Lead CNM
Grace Snell, CNM
Kara Govoni, CNM
Kathy Pringle, CNM
Cassandra Etienne, CNM
Susan Went, CNM
Vida Mia Ruiz, CNM
Amy Kogut, CNM
Michelle Hoffman, CNM

**Nephrology**
Dr. Shrekkant Chopra
Dr. Nicolaos Athienites

**Endocrinology**
Dr. Navneet Pala
Dr. Vasantha Reddy

**Dental Clinic**
Dr. Fidelito Gabriel, (Dental Director)
Dr. Katerina Henderson
Dr. Thomas Chang
Dr. Yamin Kana
Dr. Yves Betty Gattereau
Dr. Magda Gaul
Dr. Araceli Rosas-Fernandez
Dr. Sheina Jean-Marie
Dr. Allison Hubbard

**Dental Hygienists**
Monique Celestin, RDH
Saira Ghany, RDH
Lisa Newell, RDH
Melissa Francois, RDH
Job Alexander, RDH
Maria Martin RDH

**Urgent Care**
Dr. Nikhil Gohokar
Dr. Srinivas Bodapati
Dr. Shruti Pathak
Francesca Villanueva, NP
Ruth Tetteh-Lyon, NP
Madeline Rockey, NP
Martha Ayano, NP

**Pediatrics**
Dr. Jane Marie Dolan, Assistant CMO
Dr. Madeline Mbuyamba
Dr. Jean Lee
Dr. Radhika Angara
Dr. Eric Berard
Dr. Rakhi Mehrotra
Mary Cahill, NP

**Mental Health**
Claudia Sousa, LICSW
Eleanor Diethelm, LICSW
Alex Paiva, LMHC
Kettly Benoit, LMHC
Rui Soares, LICSW
Matthew Ellam, PMH, NP

**Eye Services**
Dr. Lawrence Weene
Dr. Henry Woodcome
Dr. Peter Liberto

**Opticians**
Danielle Markol, RDO, Manager
Peter Dunn, RDO

**STI Clinic**
Joan Pratti, RN

**VIP Services**
Helga Ramos, RN
Amelia Montrond, MSW

**Suboxone Clinic**
Amanda Joy, RN
Sue Gillis, LMHC
Marci Bonner, MHC

**Growth Clinic**
Dr. Margot Tang
Emily Sylveste
Amy Allison
Katherine Torres

**Vicente's Site**
Dr. Rahana Aju
Dr. Nabila Azam
Dr. Sunny Chavan
Dr. Gvantsa Didebulidze
Pamela Francoeur, NP
Valerie Racine, NP
Mary Lynch, Registered Dietician
Claudia Fontes, LCSW

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Emily Sylveste
Amy Allison
Katherine Torres
Phone Contacts

Main Number: 508-559-6699
Main Number for Dental (make appts, etc.): 508-894-3681
Main Number for Pediatrics (make appts, etc.): 508-894-3363

If you are calling the health center to:
- make an appointment
- request medical records
- request lab results
- Non-clinical and non-emergency calls

Then, you will be requested by the answering service to call back during the normal hours of the health center.

**Pediatric:**
Brockton Neighborhood Health Center’s pediatricians are part of a call coverage group at Brockton Hospital. The answering service will page the pediatrician on call and relay information about the patient. The physician on call contacts the patient and assesses the situation.

**Adult:**
Brockton Neighborhood Health Center’s Adult Medicine Department has formed their own call system. The answering service will page the physician on call and relay information about the patient. The physician on call will contact the patient and assess the situation. This group also covers patients calling from the Mainspring Site.

**OB/GYN:**
Brockton Neighborhood Health Center’s OB/GYN physicians and nurse midwives are on call. The answering service will page the physician or midwife on call and relay information about the patient. The physician or midwife on call contacts the patient and assesses the situation.

**Dental:**
Off hours calls for dental emergencies are referred to the Adult MD on call. The MD will provide emergency medical treatment and refer the patient to the dental clinic for emergency care the next day.

Medication Refills

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
</tr>
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<tbody>
<tr>
<td>Adult Medicine</td>
<td>(508) 894-3236</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>(508) 894-3551</td>
</tr>
<tr>
<td>OB/GYN</td>
<td>(508) 894-3285</td>
</tr>
</tbody>
</table>
Please note: You will not receive a live person on the medication refill line. The messages are checked at least twice a day, and without the following information your prescription cannot be filled.

- Patient Name
- Date of Birth
- Home phone number
- The name of the medication that you want refilled
- Pharmacy name and telephone number

Your prescription will be refilled within 2-5 business days. In order to receive your medications in a timely manner, please make sure that you call for your refill before you are out of the prescription completely.

Referrals

Your primary care (PCP) may decide that you need specialized care with another medical provider (specialist). Your primary care provider will provide you with a referral; our office will either make an appointment for you or provide you with the contact information for you to make that appointment. Your PCP will still be your regular doctor and will consult with the specialist(s) regarding your health care needs.

Remember the Three C’s for your visit!

C all for an appointment
C arry your medication, or list
C reate your list of concerns and rank them

To best coordinate your care, please do the following for your visit:

- Making an Appointment: Please call the health center to request a date and time that fit your schedule. You will receive all initial information needed before your visit.

- Preparing for the Visit:
  - Medication: Please bring a medication list that has the name, dosage and frequency. Otherwise, bring in all the actual containers of your current medications, including over- the-counter medications as well as holistic (natural) medications.
  - List of Concerns: Before your visit, as recommended, list all your concerns on paper to discuss with your provider. Therefore, you or the provider will not miss anything vital.
    - Make sure the most important of your concerns is at the top of your list so it will be the focus of the visit.
• **Arriving at the Clinic:**
  All established and new (Dental, OBGYN, Pedi, Mental Health and Vision) patients with appointments should go straight up to the individual floors and check-in with the clinical secretaries. All second floor visits (adult medicine and social services) and Urgent Care should report to the first floor for check-in.

• **Beginning of Exam:** Vital Signs and weight are checked at every visit. These great screening tests will help the provider determine a patient care plan that fit your health needs and your lifestyle.

• **Ask Questions:** If there is something, you do not understand, the nursing staff, providers, and support staff will do their best to answer your questions. The staff is here for you!

• **After the Visit:** Your health care provider will inform you of your next follow-up visit and the need for a lab visit or other diagnostic testing if required.
How to be a partner in your Medical Home:

**Talk to us**
- Give us feedback on how office works
- Talk with your care team about your health problems and concerns
- Ask your team how you can best take care of yourself

**Take care of yourself**
- Set health goals that you feel you can reach
- Do things to reach your goals and lower your health risks
- Join support groups with people like you
- Learn how to manage serious illnesses

**Learn before you decide**
- Look at different treatment options, their risks and benefits
- Create an action plan with support from your care team

**Be safe**
- Tell us about any medicines, supplements, and herbal or holistic products you take
- Talk with us about any safety concerns you have
Brockton Neighborhood Health Center

Medical Home
Patient and Provider Roles and Responsibilities

As a patient and partner in my health care team, I will:

- Bring all questions I have to my appointments
- Tell you how I am feeling and how it affects my life
- Ask you about things I do not understand
- Help you create my action plan and track my progress
- Let you know when I get care somewhere else
- Bring a list of all medicines, supplements, and herbal or holistic products I use
- Fill my prescriptions on time, use them as prescribed, and tell you of any problems
- Ask for support services when I need them

As providers and partners in your health care team, we will:

- Respect you and your family values and needs
- Ask you to take part in your health care
- Respect your culture and use language you understand
- Help you set health goals and create an action plan
- Track the care you get from other providers
- Ask for your ideas on how we can improve your care
- Offer appointments at times when you can come in
- Explain test results and what will happen next
- Help you get support services when you need them
- Stay in contact with you as your partner in care

(Adapted from Center for Advancing Health 2009. Supporting Patient Engagement in the Patient-Centered Medical Home)
Patients' Rights and Responsibilities: Your Rights as a Patient

At Brockton Neighborhood Health Center (BNHC), we support your right to know about your health and illness, and your right to participate in decisions that affect your well-being. Our own statement of patients' rights, incorporating state and federal law, describes BNHC’s commitment to protecting your rights. We recognize your privacy and rights and dignity. You have a right to:

- Receive medical care that meets the highest standards of BNHC, regardless of your age, race, ethnicity, national origin or culture, religion, language, any disability or handicap, gender, sexual orientation, gender identity or expression, military service, or the source of payment for your care.

- Meaningful communication and language access services, including a qualified interpreter, which are provided at no cost to you.

- Confidential treatment of all information regarding your care, with the following exceptions required by law:
  - In cases where individuals are at serious and imminent risk of hurting themselves or another person
  - In cases of abuse or neglect of children, disabled, or individuals age 60 and over
  - In cases where disease reporting is mandated in order to protect public health

- Privacy within the capacity of Brockton Neighborhood Health Center. If you are being cared for in a setting where there are others present, you can expect a sincere and reasonable attempt to keep all conversations confidential during any interview, exam or treatment.

- Refuse to be examined, observed or treated by students or staff without this refusal affecting your access to care.

- To choose or change primary or specialty providers if other providers are available to the extent we are able to accommodate this request, including consultation from another provider if requested

- Access your health record in accordance with the law and Brockton Neighborhood Health Center’s policies and procedures.

- Talk to somebody or receive an explanation about any bills or costs for services, and privacy respecting the source of payment for your care or charges.

- Receive information about financial assistance and/or free health care

- Prompt lifesaving treatment without discrimination of insurance status or ability to pay

- Evaluation and management of pain based on providers’ clinical assessment, including information regarding options for pain relief.

- Know the relationship (if there is any) between BNHC and its providers and any other health care facility or educational institution

- Information about your care and how you may take part in the decisions regarding your care. This includes the rights to:
  - Seek and receive all the information necessary for you to understand your medical situation. You have the right to know the name and specialty of the doctors and other health care providers who are responsible for your care and to talk with these providers. You are entitled to know fully about the planned course of diagnosis and treatment (including an explanation of any procedures and tests), and your likely future medical course and prognosis. This is true regardless of your diagnosis.
  - Seek and receive instruction in self-care, prevention of disability, and maintenance of health. You have the right to ask your doctor or nurse any question about your health that concerns you. You have the right to have all reasonable requests responded to promptly and adequately within the capacity of the medical center.
• Have someone accompany you to advocate for you and your care and/or act on your behalf during your appointments.
• Receive information about your admitting hospital before admission if you are a maternity patient which includes information regarding labor and delivery care specific to the hospital, including the rate of cesarean section and the types of anesthesia administered at the hospital.
• Refuse to serve as a research subject.
• Be told about all of the ways that breast cancer can be treated if you have a breast cancer diagnosis.
• Be provided with medically and factually accurate information and offered with emergency contraception upon request if you are a female victim of sexual assault.

So that we can provide you with the best care possible, we also ask that you help us to help you by being responsible for:

• **Keeping your appointments.** If you cannot make a scheduled appointment time, please contact us as soon as you can so that we may reschedule you for the next available time and allow another patient to use the time you are unable to keep.
• **Providing us with accurate and complete information about your health, your identity, any medications or supplements and any current concerns.** This is very important to providers who are making recommendations about your treatment and care plan based on information you provide.
• **Following treatment plans** recommended by your provider. Let care providers know immediately if you need clarification or do not understand your plan of care or the health instructions you are given
• **Being courteous and respectful** of all staff members and other patients.
• **Following the rules** of Brockton Neighborhood Health Center, including the NO Smoking policy
• **Helping us keep your health insurance information up to date,** and bring your coverage information to every visit.
• Seeing that your bills are paid as promptly as possible; following Brockton Neighborhood Health Center’s rules and regulations

Let us know how we can improve services. If you feel as if your rights have not been respected, or if you wish to report on a service, please let us know by speaking with the **Supervisor of the department directly involved with your care.**

If the issue is not resolved to your satisfaction, or if you would like the help of someone not immediately involved, BNHC’s Patient Advocate or BNHC’s Compliance Manager are available to help resolve the problem. Department staff members can assist you with contacting these individuals.

*If there is a specific complaint regarding the safety of your care that you believe remains unresolved, you may contact the Massachusetts Department of Public Health’s Division of Health Care Quality at 800-462-5540, the Commonwealth of Massachusetts Board of Registration in Medicine at 800-377-0550 or the Joint Commission Office of Quality Monitoring at 800-994-6610.*
Your Information.
Your Rights.
Our Responsibilities.

This 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.

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you
| **Get an electronic or paper copy of your medical record** | • You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.  
• We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee. |
| **Ask us to correct your medical record** | • You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.  
• We may say "no" to your request, but we'll tell you why in writing within 60 days. |
| **Request confidential communications** | • You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.  
• We will say "yes" to all reasonable requests. |
<table>
<thead>
<tr>
<th><strong>Your Rights</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>Get a list of those with whom we've shared information</strong></td>
</tr>
</tbody>
</table>
| • You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why.  
• We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months. |
| **Get a copy of this privacy notice** |
| • You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly. |
| **Choose someone to act for you** |
| • If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.  
• We will make sure the person has this authority and can act for you before we take any action. |
| **File a complaint if you feel your rights are violated** |
| • You can complain if you feel we have violated your rights by contacting us using the information on page 1.  
• You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.  
• We will not retaliate against you for filing a complaint. |
For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

**In these cases, you have both the right and choice to tell us to:**

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory
- Contact you for fundraising efforts

*If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.*

**In these cases we never share your information unless you give us written permission:**

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

**In the case of fundraising:**

- We may contact you for fundraising efforts, but you can tell us not to contact you again

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**How do we typically use or share your health information?** We typically use or share your health information in the following ways.

**Treat you**

We can use your health information and share it with other professionals who are treating you.

*Example: A doctor treating you for an injury asks another doctor about your overall health condition.*

**Run our organization**

We can use and share your health information to run our practice, improve your care and contact you when necessary.

*Example: We use health information about you to manage your treatment and services.*

**Bill for your services**

We can use and share your health information to bill and get payment from health plans or other entities.

*Example: We give information about you to your health insurance plan so it will pay for your services.*
How else can we use or share your health information? We are allowed or required to share your information in other ways - usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html)

| Help with public health and safety issues | We can share health information about you for certain situations such as:  
- Preventing disease  
- Helping with product recalls  
- Reporting adverse reactions to medications  
- Reporting suspected abuse, neglect, or domestic violence  
- Preventing or reducing a serious threat to anyone's health or safety |
| Do research | We can use or share your information for health research. |
| Comply with the law | We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law |
| Respond to organ and tissue donation requests | We can share health information about you with organ procurement organizations. |
| Work with a medical examiner or funeral director | We can share health information with a coroner, medical examiner, or funeral director when an individual dies. |
| Address workers' compensation, law enforcement, and other government requests | We can use or share health information about you:  
- For workers' compensation claims  
- For law enforcement purposes or with a law enforcement official  
- With health oversight agencies for activities authorized by law  
- For special government functions such as military, national security, and presidential protective services |
| Respond to lawsuits and legal actions | We can share health information about you in response to a court or administrative order, or in response to a subpoena. |
• We are required by law to maintain the privacy and security of your protected health information.

• We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

• We must follow the duties and privacy practices described in this notice and give you a copy of it.

• We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Changes to the Terms of This Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our website.

Effective Date is September 23, 2013.

**This Notice of Privacy Practices applies to the following organizations.**

*This Notice of Privacy Practices also applies to patients treated at the Brockton Neighborhood Health Center at Vicente’s located at 158 Pleasant Street in Brockton, MA; MainSpring Father Bill’s Homeless Shelter located at 54 North Main Street, Brockton, MA.*

You may contact Brockton Neighborhood Health Center's HIPAA Privacy Officer at (508) 894-3332.
Low-Income Patient Rights and Responsibilities

Below is an addendum to your rights and responsibilities as a Low-income patient (101 CMR 613.08(2)) when applying for assistance in paying for medical and/or dental services.

RESPONSIBILITIES:
A Low-income patient that receives eligible services must:

• Provide all required documentation in order to qualify and retain low-income medical/dental benefits.

• Inform MassHealth and the BNHC of any changes in family income, residency or insurance status. For instance, if any mail that is sent to you by the Office of Medicaid is returned, you will be deemed a non-resident and your medical/dental benefits will be terminated.

• Keep track and supply documentation of more than one family member deductible and/or deductibles from more than one provider of services for Partial Health Safety Net (formerly Free Care) benefits. The family member MUST be a Low-income patient to qualify for family deductible. Once your deductible is met, you will be deemed eligible for Full Health Safety Net (HSN) benefits.

• Inform the Division or MassHealth within 10 days that he/she was involved in an accident, or suffered from an illness or injury, or other loss that has or may result in a lawsuit or other 3rd party payment of a claim billed to HSN. The patient must assist or assign rights to recover previous payments to the Division and/or repay net amounts he/she received from other 3rd party sources to HSN for services paid by HSN.

RIGHTS:
A Low-income patient has the right to:

• Good, quality healthcare from the BNHC regardless of age, race, sex, national origin, citizenship, religion, culture, physical handicap/disability, personal values or beliefs systems.

• Apply for MassHealth or other low income programs. In order to be determined a Low-income patient, you must complete a MBR and submit all required documentation. Our Intake and Pre-registration Offices are available during posted office hours to assist you.

• A payment plan, as described in 101 CMR 613.08(1)(f), if the patient is determined to be a Low-income patient pursuant to 101 CMR 613.00 or a patient that qualifies for medical hardship (101 CMR 613.05).

• A written healthcare benefit notice of your eligibility for assistance should be sent to you within 30 days from the Division of Medical Assistance. IMPORTANT: The benefit notice has two parts. The 1st part explains if you are eligible for MassHealth benefits; the 2nd part states if you qualify for HSN. If you have not received a written notice or need more information, please return to the BNHC for assistance.

File a written grievance for review of the MA-21 determination of denial of HSN or medical hardship benefits with all supporting documentation to: Division of Health Care Finance and Policy, Health Safety Net Office, Two Boylston St, Boston, MA 02116. For all grievances, the Office may request additional information from the grievant, other state agencies, and/or the
Brockton Neighborhood Health Center. Additional information requested by the Office must be submitted within 30 days.

**Accepted Insurance**

**Fees Based On Ability to Pay**

The Brockton Neighborhood Health Center serves all patients regardless of their inability to pay. Patients may be eligible for a sliding fee discount or Free Care for essential services depending upon their family size and income. See one of our staff in the Intake Department to discuss the required documents and the application process required for determining eligibility. We welcome patients without health insurance.

**We Are Providers Of:**
- Blue Cross Blue Shield/HMO Blue
- BMC Healthnet
- CeltiCare Health Plans of Massachusetts
- Children's Medical Security Plan
- Commonwealth Care Alliance
- First Health
- Health Safety Net
- Healthy Start
- Harvard Pilgrim Health Care
- MassHealth
- Medicare (Eligible Seniors may not have to pay the 20% Medicare co-pay)
- Neighborhood Health Plan
- Senior Whole Health
- Tufts Senior Care Options
- Tufts PPO
- Fallon Senior Care Options
- Provider Network Alliance

**Dental:**
- Dental Blue
- Delta Dental
- Doral CCHIP
- Doral MassHealth
- Guardian
- Unicare/Wellpoint

**Mental Health:**
- Cenpatico
- Beacon Health Strategies
- Mass Behavioral Health Partnership (MBHP)
- United Behavioral Health
- Value Options
We Accept Most Commercial Insurance. Patients may be subject to out of network deductibles. See the following documents regarding some of the state sponsored programs for benefit coverage. Please call your insurance provider to get a list.

**BROCKTON NEIGHBORHOOD HEALTH CENTER**
508-559-6699

**Health Safety Net (FREE CARE)**

If you need health care but cannot afford to pay for it, you may be eligible for Health Safety Net Full, Partial or Secondary benefits. The Health Safety Net services are NOT available at most private physician offices. However, it IS available at the Brockton Neighborhood Health Center and at neighboring hospitals in the Brockton area.

**What does Health Safety Net cover? What does it not cover?**
Health Safety Net (HSN) covers inpatient (overnight), outpatient (walk-in), emergency medical services AND NOW PHARMACY. All prescriptions written by our providers or to a referred provider are covered by HSN with small co-pay. If your application for medical benefits is approved for HSN, most other medically necessary services performed at the health center will be covered. Unfortunately, physician services at private offices outside of the BNHC and hospital tests that are read by private physicians are not covered by HSN. Be aware that not all facilities that the health center refers you to will have HSN benefits. In addition, patients that qualify for Partial HSN are responsible for the lab and hospital charges in FULL that are processed outside the BNHC up to their deductible amount. Once your deductible is met, you will be eligible for Full HSN benefits.

**How do I know if I am eligible for Full, Partial or Secondary Health Safety Net?**
- If you are eligible for Limited MassHealth, you will also be eligible for Health Safety Net that those programs do not cover.
- If you are enrolled in MassHealth now, but you were not eligible for medical services at the time of your visit, you may be eligible for HSN for dates prior to that eligibility. Check with our staff so that they can run a REVs for old dates of service.
- If your family income is 200% or less of the Federal Poverty Guidelines, you are eligible for Full HSN.
- If your Family income is 201% to 400% of the Federal Poverty Guidelines, you may be eligible for Partial HSN.
- If your income is up to 400% of the Federal Poverty Guidelines and you have other private insurance, you may be eligible for Secondary HSN for deductibles. HSN does not reimburse for private or public copays.
- If your income is up to 400% of the Federal Poverty Guidelines and you have Medicare insurance with no coverage for the 20% co-insurance, HSN will pay up to the patient responsibility.
- At any income level, based on your financial/medical hardship, you may be eligible for HSN or Partial HSN.

**Can Immigrants get Full or Partial Health Safety Net?**
Yes! Anyone, regardless of his or her immigration status, who resides in Massachusetts, can get Full or Partial HSN.

**How do I apply for Health Safety Net?**
To apply for HSN you must complete a Massachusetts Member Benefit Request (MBR) at the Brockton Neighborhood Health Center and supply income documentation. Examples of accepted income documentation are: your last Federal tax return, two pay stubs for all family members, a letter from your employer, etc. You can apply for benefits within our Pre-Registration or Intake Departments. Our staff
will also help you with any re-determination needs in the future to ensure continuity and lack of disruption of your care.

**After I apply for Health Safety Net, how long do I have to wait for an answer?**
The Office of Medicaid/Division of Medical Assistance will notify you within 30 days, most times sooner, upon completing a MBR application. By applying, you may receive approval in other public programs. If you do not understand the determination letter, feel free to return to the Brockton Neighborhood Health Center’s Intake Department for clarification. The Health Safety Net approval is noted on the second/back page of the notification letter.

**What about other public insurance plans?**
The staff at the Brockton Neighborhood Health Center are trained to assist you in many other public insurance plans like: MassHealth, Healthy Start, Children’s Medical Security Plan, and Commonwealth Care. Someone at the Health Center can help you decide the best plan that will meet your health needs. The final determination of program coverage is made by the Office of Medicaid.

**Do I have to apply for Health Safety Net every time I need to go to the health center?**
No. Your application will be approved for up to a one (1) year period. Once your application for HSN is approved, you will have HSN at all participating health centers and hospitals. HSN does not cover private physician offices or private physicians that read test results. You no longer need to do multiple applications for multiple sites. In fact, it is now a single application for the family unit.

**How much will I have to pay if I qualify for Partial Health Safety Net?**
A reviewer can assist you in your application process. You may be subject to an annual family deductible, as well as, be responsible for a percentage of your office visit charges. Once your application has been completed, you will receive a letter from the Office of Medicaid explaining your deductible amount and percentage due. Laboratory specimens that are forwarded to the hospital are NOT covered under partial HSN.

**How do I qualify for “medical hardship?”**
People of any income level may qualify for medical hardship if their medical bills are so large that paying them would cause significant financial hardship. To qualify for medical hardship, your medical expenses must exceed a set percentage of gross income listed below.

<table>
<thead>
<tr>
<th>Income Level</th>
<th>Percentage of Gross Income</th>
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<tbody>
<tr>
<td>0-200% FPG</td>
<td>10%</td>
</tr>
<tr>
<td>201-300% FPG</td>
<td>15%</td>
</tr>
<tr>
<td>301-400% FPG</td>
<td>20%</td>
</tr>
<tr>
<td>401-600% FPG</td>
<td>30%</td>
</tr>
<tr>
<td>&gt;601% FPG</td>
<td>40%</td>
</tr>
</tbody>
</table>

**Can I appeal the decision of the health center?**
Yes! If you have been denied Full, Partial or Secondary Health Safety Net, you can appeal that decision. To do so, you must send a written complaint to:

Division of Health Care Finance and Policy  
2 Boylston Street  
Boston, MA 02116  
OR  
Fax appeal to: 617-210-5820

The Division must notify you in writing of its decision within 30 days of receiving all information from the health center and you.

If you have any further information, please do not hesitate to ask one of our staff. They will be more than willing to help you.
## Other Sources of Information

<table>
<thead>
<tr>
<th>MassHealth</th>
<th>Health Safety Net (formerly Free Care)</th>
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<table>
<thead>
<tr>
<th>Childrens Medical Security Plan (CMSP)</th>
<th>Healthy Start Program</th>
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<tbody>
<tr>
<td>800-909-2677 <a href="http://www.cmspkids.com">www.cmspkids.com</a></td>
<td>888-488-9161 <a href="http://www.hspmoms.com">www.hspmoms.com</a></td>
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<thead>
<tr>
<th>Neighborhood Health Plan</th>
<th>Senior Whole Health</th>
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<tbody>
<tr>
<td>MassHealth Managed Care Organization (contracted with the BNHC) 253 Summer Street Boston, MA 02210 800-462-5449 <a href="http://www.nhp.org">www.nhp.org</a></td>
<td>MassHealth eligible seniors (contracted with the BNHC) 58 Charles Street Cambridge, MA 02141 888-794-7268 <a href="http://www.seniorwholehealth.com">www.seniorwholehealth.com</a></td>
</tr>
</tbody>
</table>

| Mail completed MBRs: MassHealth Enrollment Center: Central Processing Unit PO Box 290794 Charlestown, MA 02129-0214 Medical Benefit Request (MBR) form: [www.mass.gov/Eeohhs2/docs/masshealth/apppforms/mbr.pdf](http://www.mass.gov/Eeohhs2/docs/masshealth/apppforms/mbr.pdf) | Boston Medical Center Healthnet MassHealth members 1-888-566-0010 CCHIP members 1-877-957-5300 Two Copley Place, Suite 600 Boston, MA 02116 617-748-6000 [www.bmchp.org](http://www.bmchp.org) |

| MassHealth Customer Service Center 800-841-2900 Fax 617-350-3489 | Community Resources Information, Inc. Information about the many types of assistance available to Massachusetts residents [www.massresources.org](http://www.massresources.org) |

| Commonwealth Care Health Insurance Options 1-877-623-6765 | |
"All of us working together"