

McLaren Print System Order

Order No: 54566
Order Date: 2020-06-02
User: Lori Loll
Phone: 5864933529

Ship Location: McLaren Macomb Cashier office c/o Lori Loll
1000 Harrington Boulevard
Mount Clemens, MI 48043

Forms

Quantity: 1000
Paragon Dept No: 90200
Dept Name: McLaren Macomb
Company Number: 260

Order Total Price: 18.38

Item Number: CMS-10065-IM
Item Description: Important Message from Medicare (Macomb)
Revision Date: 4/2020
Print: 2 sided black and white
Paper: 2 Part (White, Yellow)
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Misc Info: ds; 2 part; black



1000 Harrington Blvd Mt Clemens, MI 48043 (586) 493-8800

Important Message from Medicare

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 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.
- You can work with the hospital to prepare for your safe discharge and arrange for services you may need after you leave the hospital.
- You can speak with your doctor or other hospital staff if you have concerns about being discharged.

Additional Information (Optional):

Is there any needed documentation to add?

Per INSTRUCTIONS: Additional information (Optional): This section provides space for additional pertinent information that may be useful to the beneficiary/enrollee. It may not be used as a Detailed Notice of Discharge, even if facts pertinent to the termination decision are provided.

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.

Signature of patient representative: _____ Date/Time: _____

Unable to sign/Patient representative notified: _____ Date/Time: _____

Patient refused to sign: _____ Hospital Rep: _____ Date/Time: _____

Certified Mail Number: _____ Date/Time: _____

Spec Info:

According to the Revised Rule, Act of 2019, no person is required to accept a collection of information unless a display or call number is used. The call number is used for the information collection in 2019-2021. The use of the call number is optional for information collection in 2019-2021. The use of the call number is optional for information collection in 2019-2021. The use of the call number is optional for information collection in 2019-2021. The use of the call number is optional for information collection in 2019-2021.

See page 2 of this notice for more information.

