

McLaren Print System Order

Order No: 79127
Order Date: 2023-09-01
User: Raynette K. Gaines
Phone: 586-493-8010

Ship Location: McLaren Macomb Hospital
1000 Harrington BLvd
Mt Clemens, MI 48043

Forms
Quantity: 100
Paragon Dept No: 12300-1175
Dept Name: Case Management
Company Number: 260

Order Total Price: 27.92

Item Number: CMS-10065-IM (Macomb)
Item Description: Important Message from Medicare
Revision Date: 03/2023
Print: 2 sided black and white
Paper: 2 Part (White, Yellow)
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Poster:
Misc Info: ds; 2 part; black



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 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. Livanta at 1-888-624-9900 / TTY 1-888-985-8775. 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.

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/invoicee. It may not be used as a Detailed Notice of Discharge, even if facts pertinent to the termination decision are provided.

Spec Info: Deliver to CM main office on first floor near IP pharmacy. Please contact Raye, CM Assist at 586-493-8010 if you have any qu

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: _____

2nd IMN Discharge Staff: _____ Date/Time: _____

According to the Payment Reduction Act of 2011, we provide an optional coverage to a collection of administrative address in facilities or other QIO contact number. The total QIO contact number for the administrative address is 800-680-8000. The new system to complete the administrative address is located at: www.medicare.gov. For more information, see the instructions on the reverse side of this notice. If you have questions concerning the accuracy of the data presented or regarding the reporting the data please call the QIO. QIO Contact Information: 1-888-624-9900 (Toll-free) or 1-888-985-8775 (Toll-free) or 1-888-624-9900 (Toll-free) or 1-888-985-8775 (Toll-free).

See page 2 of this notice for more information.

