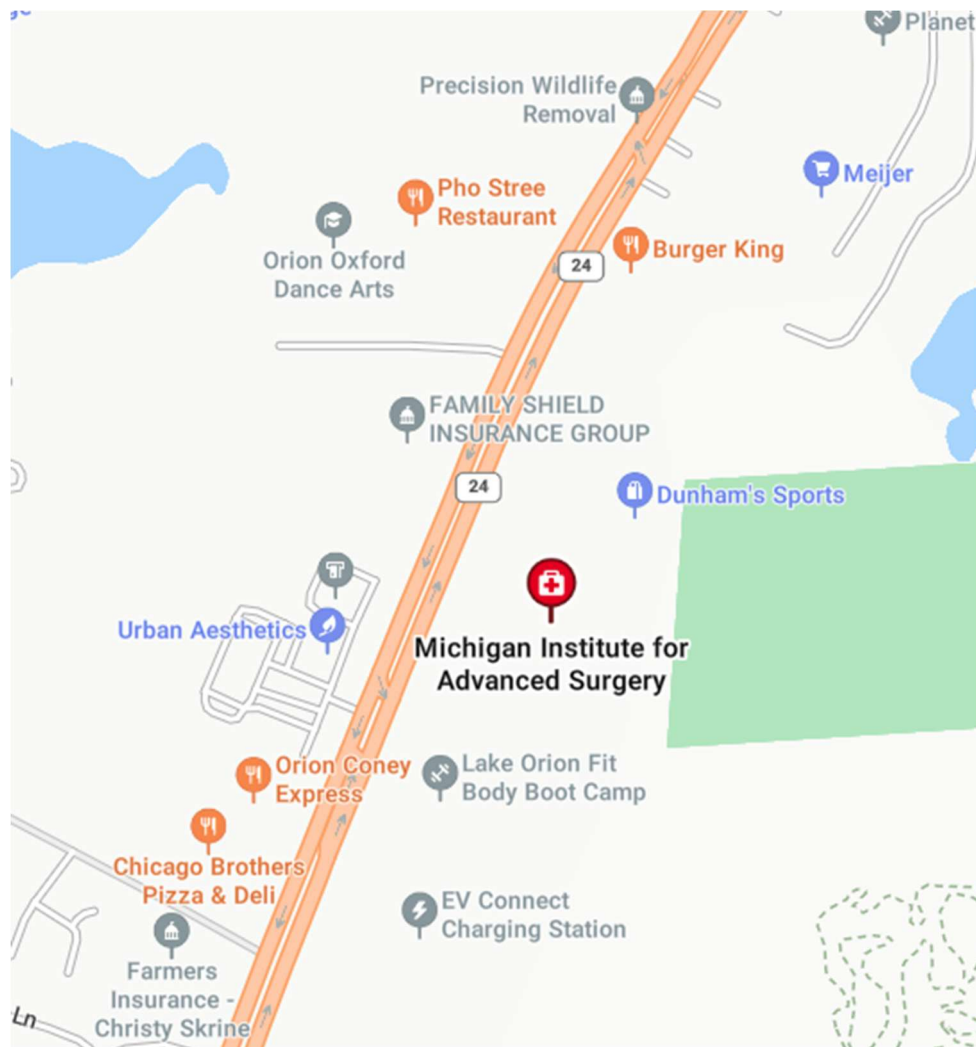


Your Guide to Outpatient Surgery



MICHIGAN INSTITUTE for ADVANCED SURGERY



1375 S. Lapeer Road Suite 109
Lake Orion, MI 48360
Phone: (248) 693-7950

Welcome to Michigan Institute for Advanced Surgery

You and your doctor have carefully reviewed your options and decided that surgery is the best next step. This guide is designed to help you feel prepared and confident by answering common questions and walking you through what to expect before and after your procedure.

Understanding what to expect can ease anxiety and help you feel more comfortable every step of the way. You'll also find important information we are required to share with you to support your care.

You're in good hands. Our team is here to support you and make your experience as smooth as possible. If you have any questions or concerns, please don't hesitate to call us—we're always happy to help.
(248.693.7950)

**Please read this information carefully to
be prepared and have the best experience
on the day of your surgery**

Interpreter services and communication assistance are available at no cost.
Please let us know if you need help understanding this information.



What You Need to Know:	Page:
Welcome to Michigan Institute for Advanced Surgery	2
Your Experience at Michigan Institute for Advanced Surgery	4
Prior to your Day of Surgery	4
Preparing for Surgery	5
Day of Surgery Hydration Protocol	6
Surgery Day!	7
Discharge	8
At Home After Surgery	9
Disclosure of Ownership	9

Important Information:	Page:
Paying for Your Surgery/Financial Information	10
Advance Directives	11
Patient Bill of Rights & Responsibilities	12-13
Complaints/Grievances	14
Rights Surprise Medical Bills	15-16



Your Experience at Michigan Institute for Advanced Surgery

You'll be having same-day (outpatient) surgery at Michigan Institute for Advanced Surgery, where our focus is on safe, high-quality care and making you feel comfortable every step of the way. Our team is here to support you and ensure your experience is as smooth and stress-free as possible.

If you have questions at any time, please call, we're happy to help.

248.693.7950

Prior to Your Day of Surgery

A member of our team will contact you before your procedure to complete your health assessment, and again the day before with your arrival time. Please bring your photo ID and insurance card on the day of surgery.

You may receive more than one call as we prepare for your procedure. If you don't hear from us, please check your voicemail or give us a call.

If your doctor ordered any labs, EKG, or imaging, please complete these at **least one week before surgery** to avoid delays.

Our office is open Monday–Friday, 6:00 a.m. to 4:30 p.m.

Preparing for Surgery

1. Complete any required testing

Based on your health history, you may need lab work, an EKG, or imaging. Our team will let you know if anything is required.

2. Check your medications

Ask your prescribing provider if you should take your medications before surgery—especially blood thinners, diabetes, heart, or seizure medications. If approved, take them with a small sip of water.

3. Know your arrival time

We'll call you the day before with your arrival time. This is when you should arrive—not your surgery start time.

4. If you are receiving GENERAL Anesthesia arrange a driver and support person

Patients receiving any sedation or general anesthesia that makes you sleep, you **must** have a responsible adult stay at the center, drive you home, and remain with you as instructed after surgery.

5. For General Anesthesia Do NOT eat any solid food after Midnight

Follow the Hydration Protocol on Page 7 related to Clear liquids. Smoking or vaping is not allowed after midnight. Avoid marijuana for 3 days before surgery.

6. Leave valuables at home & Remove ALL Jewelry (rings, ALL piercings etc.)

For your safety, please remove all jewelry and body piercings as they can cause burns, swelling, infection, or injury during surgery.

7. Follow your surgeon's instructions

Be sure to follow any additional directions provided by your care team.

8. Need to cancel?

Please notify MIAS and your surgeon's office at least 24 hours in advance.

General Anesthesia Day of Surgery Hydration: What You Need to Know

Drinking small amounts of clear liquids before surgery may have benefits for recovery after Anesthesia including, reducing dehydration, preventing low blood sugar, and decreasing the risk of nausea and vomiting. This practice is safe and encouraged by the national anesthesia and surgical guidelines.

✔ What You CAN Drink

💧 Up to 16 oz (2 cups) total of the following **CLEAR** drink Options:

✔ Ensure Pre-Surgery or ClearFast ✔ Clear Gatorade (no red/purple) ✔ Clear Pedialyte (no red/purple) ✔ Water

🕒 Timing Rules

✔ Finish drinking at least 2 hours before the ARRIVAL time provided

⚠ (unless you have a special condition or Diabetes detailed below**)

✔ Follow all instructions carefully

⊘ Do NOT eat any solid food after midnight

⊘ Do NOT drink anything not listed above

⚠ Special Instructions

****Type 2 Diabetes:** Use **ZERO SUGAR** Gatorade/Pedialyte or water

****Type 1 Diabetes:** **WATER ONLY**

****Special Conditions:** Patients on GLP-1 medications or have a diagnosis of gastroparesis (slow stomach emptying), hiatal hernia, uncontrolled/severe acid reflux, or stomach surgery (gastric bypass, gastric sleeve, etc.)

For Special Conditions; Drink **WATER ONLY** and finish your drink **at least 6 hours** before your scheduled arrival time**

? Questions: **Call your surgeons office or MIAS**

Patients receiving local anesthesia only (not going to sleep) may eat and drink as usual. To help make IV placement easier, patients are encouraged to **stay well hydrated the day before and the morning of their procedure** by drinking water or other non-alcoholic fluids.

Surgery Day

1. Check-in and preparation

You will sign consent forms and change into a gown. Our nursing team will check your vital signs (temperature, pulse, breathing, and blood pressure), review your health history, and provide any needed pre-operative medications.

2. Meet your anesthesia provider

Your anesthesiologist will review your medical history and discuss your anesthesia plan with you.

3. Confirm your procedure

Your surgeon will meet with you to confirm your procedure and mark the surgical site.

4. Safety verification

Our team will ask you to state your procedure **multiple times**. This is an important safety step to ensure everything is correct. If something doesn't seem right, please speak up—we will pause and confirm with your surgeon.

5. Family access

Your family or support person may be able to join you after your nursing assessment—please check with your nurse.

6. Going to surgery

When it's time, a nurse and anesthesia provider will take you to the operating room. Surgery length varies based on your procedure.

7. Recovery

After surgery, you'll return to your room where our recovery nurses will monitor you and support your care.

8. During your stay

Your family or support person is expected to remain at the center while you are in surgery.

MIAS is not an emergency facility. If a medical emergency occurs during your care, we will stabilize you and arrange transfer to the nearest hospital if needed.

Discharge

1. When you're ready to go home

Once you meet discharge criteria set by your physician, anesthesiologist, and care team, you will be prepared for discharge.

2. Review of instructions

Your nurse will review your home care instructions with you and your family or support person. Be sure you understand your care plan, including diet, activity, medications, wound care, pain management, follow-up visits, returning to work, and bathing.

3. After-hours concerns (Please note that the surgery center is **NOT** open after-hours)

If you have an emergency after you leave, call 911 or go to the nearest emergency room. For non-emergency questions, please call your Surgeons office or use the contact information provided by your surgeon.

At Home After Surgery

- **Follow your instructions**

Carefully follow your discharge instructions. Call your surgeon if you have any questions or concerns.

- **If you had General Anesthesia; Take it easy for 24 hours**

Due to anesthesia, do not drive, operate machinery, make important decisions, or drink alcohol for 24 hours.

- **Schedule your follow-up**

If a follow-up visit hasn't been scheduled, please contact your surgeon's office to arrange one.

- **We'll check in on you**

A nurse from our center will contact you after your surgery to see how you're feeling and answer any questions. We're here to support your recovery and make sure you're doing well.

Thank you for choosing Michigan Institute for Advanced Surgery!

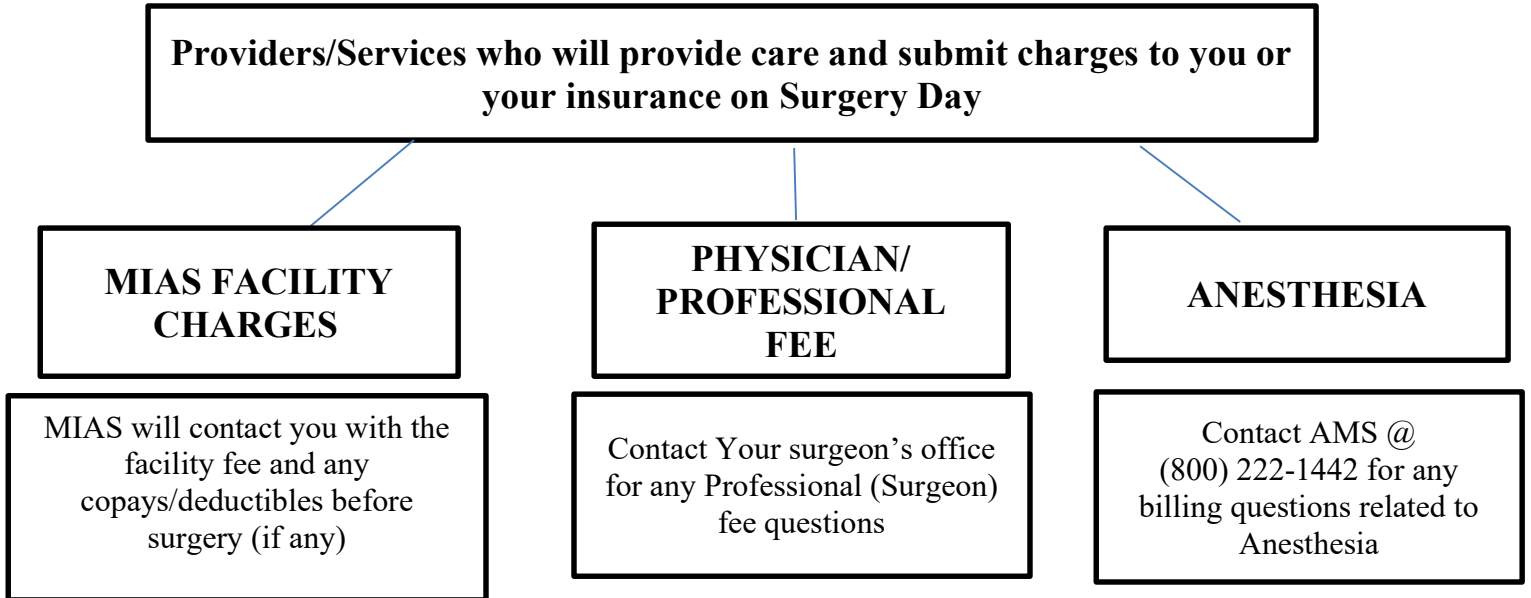
If you need to direct any comments or concerns regarding your visit, please contact our Administrator at 248.693.7950

Disclosure of Ownership

The following physicians and corporations are owners at Michigan Institute for Advanced Surgery: Michigan Knee Institute, LLC; Crittenton Development Corporation; M.P. Donahue, DO, PLLC; MJB Hand Surgery, LLC; Andrew P. Ciarlone, DO; Matthew R. Prince, DO; Outpatient Joints, PLLC; Comfortable Living; Jon Hain, MD; Ryan Siwiec, DO; Regent Surgical

You have the right to choose where you receive care. You may request to have your procedure performed at another facility.

PAYING FOR YOUR SURGERY WHAT TO EXPECT



You may receive multiple bills from different companies for your surgery. The fees for your procedure may show a separation of the following;

1. Facility (Michigan Institute for Advanced Surgery (MIAS))
2. Physician/Professional fee (Surgeon)
3. Anesthesia Management Services (AMS) the contracted service MIAS uses for Anesthesia.
4. If any samples/biopsies are collected for pathology, they will send a bill separately.

Financial Information

MIAS will bill your insurance on your behalf to make the process as easy as possible. Please be sure to provide your most current insurance information so we can verify your coverage before your procedure.

You are responsible for any co-pays, deductibles, or out-of-pocket costs, which are due at the time of surgery.

To protect your identity, a copy of your photo ID and insurance card will be kept in your medical record at registration.

Accounts with unpaid balances after 90 days may be referred to a collection agency.



Advance Directives

You have the right to make decisions about your medical care, including the right to accept or refuse treatment.

If you have an Advance Directive, Living Will, or Medical Power of Attorney, please let us know. We will include a copy in your medical record and share it with your care team.

If you are unable to make decisions for yourself, your designated representative or, if none is available, your family or legal representative may make decisions on your behalf.

MIAS Policy: During your procedure, any Do Not Resuscitate (DNR) order will be temporarily suspended. Your DNR order will be reinstated after discharge or transfer from the center.

If you would like to create an Advance Directive, you may appoint a Patient Advocate (age 18 or older) to make decisions for you if needed. Forms are available through healthcare organizations or the State of Michigan. You may update or change your decisions at any time.

For legal advice regarding Advance Directives, please contact your personal attorney or legal representative.

PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

It is the policy of Michigan Institute for Advanced Surgery that each patient cared for shall have the following Rights and Responsibilities that are within Michigan Institute for Advanced Surgery's capacity, mission, and law application. We believe that a patient who understands and participates in his or her health care may achieve better results. Michigan Institute for Advanced Surgery prepared these Rights and Responsibilities for your benefit.

YOUR RIGHTS AS A PATIENT INCLUDE:

Access to Care: You have the right to be treated by personnel who are qualified through education and experience to perform the services for which they are responsible. You have the right to be treated, when accommodations are available, and treatment is medically indicated, regardless of race, religion, culture, creed, sex, national origin, age, handicap, marital status, sexual preference, or sources of payment.

Respect/Dignity: You have the right to have your dignity as an individual be recognized and respected. Your care will include consideration of your Advance Directives, psychosocial, spiritual, and cultural needs that may influence the perceptions of illness. You as a patient or your representative may exercise your rights without the fear of discrimination or reprisal. You as a patient have the right to be free from all forms of abuse or harassment.

Privacy: You are entitled to privacy, to the extent possible, during any patient/staff interview, discussions about your care, as well as during treatment. You are entitled to confidential treatment of personal and medical records, and may refuse the release to a person outside the health facility or agency except as required because of a transfer to another health care facility, as required by law or third party payment contract, or as permitted or required under the health insurance portability and accountability act of 1996, Public Law 104-191, or regulations under that act 45 CFR parts 160 and 1.64.

Care Plan: Your physician will provide you with appropriate care, information about your medical condition, proposed course of treatment and prospects for recovery. You have the right to be fully informed before transfer to another facility.

Refusal of Medical or Surgical Treatment: You are entitled to refuse medical or surgical treatment to the extent provided by law and to be informed of the consequences of that refusal. When a refusal of treatment prevents the physician or staff from providing appropriate care according to ethical and professional standards, the relations with the patient may be terminated.

Personal Safety: You have the right to expect reasonable safety.

Information: As an individual who is or has been a patient, you are entitled to inspect or receive, for a reasonable fee, a copy of your medical record upon request in accordance with the medical records access act, 2004 PA 47, MCL 333.26261 to 333.26271, except as otherwise permitted or required under the health insurance portability accountability act of 1996, Public Law 104-191, or regulations promulgated under that act, 45 CFR parts 160 and 164. A third party shall not be given a copy of your medical record without your prior written authorization except as required by law:

- **Right to Inspect and Copy.** You have the right to inspect and copy medical information that may be used to make decisions about your care. **Right to Amend.** If you feel that the medical information, we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for the office.
- **Patient Advocate.** You have the right to have your designated representative participate in your care.
- **Right to an Accounting of Disclosures:** You have the right to request an "accounting of disclosures." This is a list of the disclosures we made of medical information about you.
- **Right to Request Restrictions.** You have the right to request a restriction or limitation on the medical information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the medical information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend.
- **Right to Request Confidential Communications.** You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail.
- **Right to a Paper Copy of the Privacy Notice.** You have the right to a paper copy of our Privacy Notice.
- **Quality Improvement Information.** You have the right to request information regarding Michigan Institute for Advanced Surgery's Quality Improvement Program, including information on progress towards meeting quality improvement goals.
- **Preventive Health.** Michigan Institute for Advanced Surgery will provide you with copies of, and/or information regarding, preventive health guidelines. If a preventive health guideline is not provided, you have the right to request a copy. Michigan Institute for Advanced Surgery is dedicated to informing and encouraging our patients to utilize available health promotion, health education and preventive health services.

Pain: Your reports of pain will be acknowledged and assessed. You will be provided with information about pain, pain relief measures, and effective pain management, as appropriate.

Decisions Involving Your Care are Based on Appropriateness of Care and Services: You have the right to be fully informed of the scope of services available at Michigan Institute for Advanced Surgery, provisions for emergency care, and related fees for services rendered. You have the right to be provided, to the extent known by the physician, complete information regarding diagnosis, treatment and the prognosis, as well as alternative treatments or procedures and the possible risks and side effects associated with treatment. You have the right to continuing medical services throughout the period of need. The plan for these services will be timely and will involve appropriate personnel and community resources. You have the right to change your provider if other qualified providers are available.

YOUR RESPONSIBILITIES AS A PATIENT INCLUDE:

Honesty: You are responsible for being honest and direct about everything that is related to you as a patient. You must provide to the best of your knowledge complete and accurate medical history including information about present complaints, past illnesses, hospitalizations, medications, including over the counter and dietary supplements, and allergies. You are responsible to inform your caregiver about any Living Will, Medical Power of Attorney or other directives that could affect your care.

Understanding: You are responsible for understanding your health problems to your own satisfaction. If you do not understand your illness or treatment, ask the doctors and staff to explain it to you.

Following Your Treatment Plan: It is your responsibility to tell those treating you whether you can and/or want to follow a certain treatment plan. Remember that your health is your own responsibility. Following your doctor's instructions/advice is very important. You must have a responsible adult to drive you home after your procedure. Your procedure will be cancelled if you do not have a driver. Having a responsible adult accompany you home in a taxi is also acceptable. A responsible adult is to remain with you for 24 hours following your procedure.

Refusal of Treatment: You are responsible for your actions if you refuse treatment. You do have that right, but you also can change your mind. We respect you and your decisions.

Reporting Changes: It is your responsibility to let us know about any changes in your health and how you feel as you receive medical treatment.

Providing Requests for Information in Writing: It is your responsibility when you request information from us, that you provide it in writing. If you need a copy of a sample letter, please ask the office.

Appointments: You are responsible for keeping appointments, and when unable to do so for any reason, for notifying Michigan Institute for Advanced Surgery.

Charges: You are responsible for providing Michigan Institute for Advanced Surgery with accurate and timely information about your sources of payment and ability to meet financial obligations. You are responsible for the personal financial responsibility of any charges not covered by your insurance.

Respect and Consideration: You are responsible for being considerate to your doctor and staff and other Michigan Institute for Advanced Surgery patients. You are responsible for observing the rules at Michigan Institute for Advanced Surgery, and if instructions are not followed, you may forfeit care provided to you at Michigan Institute for Advanced Surgery.

Pain: As a patient at Michigan Institute for Advanced Surgery, we expect that you will ask your doctor or nurse what to expect regarding pain and pain management, as well as to discuss any pain relief options available. It is important that you ask for pain relief when your pain first begins. Help your doctor and nurse assess your pain. Tell your doctor or nurse if your pain is not relieved and tell your doctor or nurse about any worries you have about taking pain medication.

Complaints/Grievances or Suggestions for Improvement: You, our patient, are our primary concern. We want to make your care at Michigan Institute for Advanced Surgery as pleasant as possible. If you are dissatisfied with the care or services that you receive, or if you feel that your privacy rights have been violated, you have the right to initiate the complaint process and discuss your concerns by calling the **Michigan Institute for Advanced Surgery Administrator at 248.693.7950.**

State of Michigan Facility Complaints

The State of Michigan investigates complaints related to facility safety, quality of care, and licensing for ambulatory surgery centers.

Michigan Dept. of Licensing & Regulatory Affairs (LARA)

Phone: 1-800-882-6006

Website: lara.state.mi.us

Medicare / CMS Complaints

For ASC quality or safety concerns, CMS directs patients to file through the State Survey Agency (LARA). General Medicare complaints or coverage issues can be filed directly with Medicare.

Centers for Medicare & Medicaid Services (CMS)

Phone: 1-800-MEDICARE (633-4227)

Website: medicare.gov

Direct Online Complaint Form: <https://www.medicare.gov/my/medicare-complaint>

Medicare Beneficiary Ombudsman (MBO)

The Medicare Ombudsman assists with unresolved Medicare complaints and helps protect beneficiary rights.

Phone: 1-800-633-4227

Website: <https://www.medicare.gov>

Accreditation Association for Ambulatory Health Care (AAAHC)

For concerns regarding compliance with ambulatory healthcare accreditation standards:

Phone: 847-853-6060

Website: <https://www.aaahc.org>

Non-Discrimination Notice

Michigan Institute for Advanced Surgery complies with all applicable federal civil rights laws. We do not discriminate based on race, color, religion, national origin, age, disability, or sex.

HIPAA Privacy Notice

A full Notice of Privacy Practices is available upon request.

Your Rights and Protections Against Surprise Medical Bills

When you get emergency care or are treated by an out-of-network provider at an in-network hospital or ambulatory surgical center, you are protected from balance billing. In these cases, you shouldn't be charged more than your plan's copayments, coinsurance and/or deductible.

What is "balance billing" (sometimes called "surprise billing")?

When you see a doctor or other health care provider, you may owe certain [out-of-pocket costs](#), like a [copayment](#), [coinsurance](#), or [deductible](#). You may have additional costs or have to pay the entire bill if you see a provider or visit a health care facility that isn't in your health plan's network.

"Out-of-network" means providers and facilities that haven't signed a contract with your health plan to provide services. Out-of-network providers may be allowed to bill you for the difference between what your plan pays, and the full amount charged for a service. This is called **"balance billing."** This amount is likely more than in-network costs for the same service and might not count toward your plan's deductible or annual out-of-pocket limit.

"Surprise billing" is an unexpected balance bill. This can happen when you can't control who is involved in your care-like when you have an emergency or when you schedule a visit at an in-network facility but are unexpectedly treated by an out-of-network provider. Surprise medical bills could cost thousands of dollars depending on the procedure or service.

You're protected from balance billing for:

Emergency services

If you have an emergency medical condition and get emergency services from an out-of-network provider or facility, the most they can bill you is your plan's in-network cost-sharing amount (such as copayments, coinsurance, and deductibles). You **can't** be balance billed for these emergency services. This includes services you may get after you're in stable condition, unless you give written consent and give up your protections not to be balance billed for these post-stabilization services.

If you are a Michigan resident, Michigan law may also protect you from balance billing and require you to pay only your in-network co-payments, deductibles, and/or coinsurance for covered emergency services provided by an out-of-network provider at an in-network facility or out-of-network facility.

Certain services at an in-network hospital or ambulatory surgical center

When you get services from an in-network hospital or ambulatory surgical center, certain providers there may be out-of-network. In these cases, the most those providers can bill you is your plan's in-network cost-sharing amount. This applies to emergency medicine, anesthesia, pathology, radiology, laboratory, neonatology, assistant surgeon, hospitalist, or intensivist services. These providers **can't** balance bill you and may **not** ask you to give up your protections not to be balance billed.

If you get other types of services at these in-network facilities, out-of-network providers **can't** balance bill you, unless you give written consent and give up your protections.

Under Michigan law, you may be protected from balance billing if covered medical services are provided by an out-of-network provider at an in-network facility, and one of the following two conditions is met: (i) You did not have the ability to choose a participating provider; or (ii) the facility did not provide you with a disclosure that you may be responsible for additional charges if an out-of-network provider renders medical services to you. In such case, the most you can be billed for covered services is your in-network co-payments, deductibles, and/or coinsurance. **However, Michigan law states that if you receive a balance billing disclosure from a facility and you consent to receive nonemergency care from an out-of-network provider, you may be balance billed for nonemergency services from an out-of-network provider.**

Under Michigan law, you may also be protected from balance billing for post-stabilization services within the 72-hours following an emergency which are provided by an out-of-network provider at an in-network facility, regardless of whether you had the ability to choose a participating provider and received a disclosure from the facility. In such case, the most you can be billed for covered services is your in-network co-payments, deductibles, and/or coinsurance. Please note, however, that Michigan law does NOT apply to all Michigan health plans. If Michigan law does not apply, you may still be protected under Federal balance billing prohibitions.

You're never required to give up your protections from balance billing. You also aren't required to get out-of-network care. You can choose a provider or facility in your plan's network.

When balance billing isn't allowed, you also have these protections:

- You're only responsible for paying your share of the cost (like the copayments, coinsurance, and deductible that you would pay if the provider or facility was in-network). Your health plan will pay any additional costs to out-of-network providers and facilities directly.
- Generally, your health plan must:
 - Cover emergency services without requiring you to get approval for services in advance (also known as "prior authorization").
 - Cover emergency services by out-of-network providers.
 - Base what you owe the provider or facility (cost-sharing) on what it would pay an in-network provider or facility and show that amount in your explanation of benefits.
 - Count any amount you pay for emergency services or out-of-network services toward your in-network deductible and out-of-pocket limit.

If you think you've been wrongly billed, contact CMS and/or the Michigan Department of Insurance and Financial Services. The federal phone number for information and complaints is: 1-800-985-3059. The state phone numbers for consumer information and complaints is: 877-999-6442.

Visit www.cms.gov/nosurprises/consumers for more information about your rights under federal law and <https://www.michigan.gov/difs/0,5269,7-303--561696--,00.html> for more information about your rights under Michigan law.