

# Member Rights and Responsibilities

As partners in health care, each of us has rights and responsibilities that we must follow in order to make the most of our members' health benefits. The following rights and responsibilities apply to our members:

**Member Rights** Members have the right to:

* Receive information about the health plan, its services, its practitioners and providers, and member rights and responsibilities.
* Treatment with respect, consideration, dignity and privacy.
* Information about all services available through the health plan, including how to obtain emergency and after-hours care.
* Confidentiality of their medical records.
* Candid discussions concerning appropriate or medically necessary treatment options for their condition(s), regardless of cost or benefit coverage.
* Voice complaints or appeals about the health plan or the care provided.
* Request to see the physician selected for their primary care services instead of another member of his/her office staff for an office visit, if they are willing to wait for an available appointment.
* Make recommendations regarding the health plan's member right and responsibilities policies.

**Patient Rights** As a patient, our members have a right to expect the following from their physicians or other providers:

* To participate in decisions concerning their health care.
* To refuse treatment to the extent permitted by law, and to be informed of the medical consequences of that action.
* To obtain from their physician or other health care provider complete and current information concerning a diagnosis, treatment, or prognosis, in terms they can reasonably be expected to understand. When it is not advisable to give such information to a member, the information shall be made available to an appropriate person on their behalf.
* To receive information from their physician or other provider necessary to give informed consent prior to the start of any procedure.
* To know the name and qualifications of all their caregivers. Information can be obtained from the provider or the administrator of any health care facility.

If a member feels that their physician has not given them the kind of service they have the right to expect, our members have the right to follow the complaint procedure for Quality of Care Access Review. They can refer to their member handbook or contact customer service.

# Member Responsibilities

* Members need to establish themselves as a patient of the physician they have selected for their primary care services.
* Members are to follow the instructions and guidance of health care providers.
* Provide honest and accurate information concerning their health history and status.
* Participate in understanding their health problems and developing mutually agreed upon treatment goals.
* Carefully follow the health plan's policies and procedures as described in their member handbook and their contract(s) and rider(s).
* Members are to be sure that their primary care physician coordinates any health care they receive in order to receive the highest level of benefits, if applicable under the terms of your plan coverage.
* Carry their member **ID** card with them and present it when seeking health services.
* Advise their health plan of any changes that affect them or their family such as birth, change of address, or marriage.
* Submit all bills they receive from a non-participating provider within one year from the date of service.
* Notify their health plan when anyone included in their coverage becomes eligible for Medicare or any other group health insurance.
* Keep their health plan informed of their concerns about the medical care they receive.
* Pay appropriate copayment/deductible/coinsurance or other patient responsibility to providers when services or supplies are received.