group health of eau claire	DEPARTMENT:	Member and Provider Services
	SUBJECT:	Member Rights and Responsibilities
	PRODUCT LINE:	BadgerCare and SSI
	POLICY NUMBER:	MS149
	ORIGINAL POLICY EFFECTIVE DATE:	2/1/2008
	LAST REVISED DATE:	10/16/2023
	LAST REVIEWED DATE:	10/16/2023

SCOPE:

To ensure Group Health Cooperative of Eau Claire (the Cooperative) meets the needs of its members and providers by ensuring each member and provider understands their rights and responsibilities.

POLICY:

It is the policy of the Cooperative to provide new members and providers with a copy of the Member Rights and Responsibilities. Existing members and providers will receive a copy of the Member Rights and Responsibilities, if requested. Member Rights and Responsibilities are posted on the Cooperative's public website and incorporated into significant member communications, such as the Member Handbook. A copy will also be made available to members and providers upon request via email, fax, or paper at no cost to them.

PROCEDURE:

MEMBER RIGHTS

- 1. You have a right to get information in a way that works for you. This includes:
 - Your right to have an interpreter with you during any BadgerCare Plus or Medicaid SSI covered service.
- 2. You have a right to be treated with dignity, respect, and fairness and with consideration for privacy. This includes:
 - Your right to be free from discrimination. The Cooperative must obey laws that protect you from discrimination and unfair treatment. The Cooperative provides covered services to all eligible members regardless of the following:
 - o Age
 - Color
 - Disability
 - National origin
 - o Race
 - o Sex
 - Religion
 - Sexual orientation
 - Gender identity
 - All medically necessary, covered services are available and will be provided in the same manner to all members. All persons or organizations connected with the Cooperative that refer or recommend members for services shall do so in the same manner for all members.
 - Your right to be free from any form of restraint or seclusion used to coerce, discipline, be
 convenient, or retaliate. This means you have the right to be free from being restrained or
 forced to be alone to make you behave in a certain way, to punish you, or because someone
 finds it useful.
 - Your right to privacy. The Cooperative must follow laws protecting the privacy of your personal and health information. See the Cooperative's Notice of Privacy Practices for more information.

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3. You have the right to get health care services as provided for in federal and state law. This includes:

• Your right to have covered services be available and accessible to you when you need them. When medically appropriate, services must be available 24 hours a day, seven days a week.

4. You have the right to participate with practitioners to make decisions about your health care. This includes:

- Your right to a candid discussion of appropriate or medically necessary treatment options for your conditions, regardless of cost or benefit coverage.
- Your right to accept or refuse medical or surgical treatment and participate in making decisions about your care.
- Your right to plan and direct the types of health care you may get in the future if you become unable to express your wishes. You can make these decisions by completing an advance directive, living will, or power of attorney for health care.
- Your right to a second opinion if you disagree with your provider's treatment recommendation. Call our Member Services Department for more information about how to get a second opinion.

5. You have a right to know about our providers and any physician incentive plans the Cooperative uses. This includes:

- Your right to ask if the Cooperative has special financial arrangements (physician incentive plans) with our physicians that can affect the use of referrals and other services you might need. To get this information, call our Members Services Department at 715-552-4300 or 1-888-203-7770 (toll-free and request information about our physician payment arrangements.
- Your right to request information about the Cooperative's providers, including the provider's education, board certification, and recertification. To get this information, call our Member Services at 715-552-4300 or 1-888-203-7770 (toll-free).

6. You have a right to ask for copies of your medical records from your provider.

- You may correct inaccurate information in your medical records if your doctor agrees to the correction.
- Call our Member Services at 715-552-4300 or 1-888-203-7770 (toll-free) for assistance with requesting a copy or change to your medical records. Please note that you may have to pay to copy your medical records.

7. You have a right to be informed about any Medicaid covered benefits that are not available through the Cooperative because of moral or religious objection. This includes:

- Your right to be informed of how to access these services through ForwardHealth using your ForwardHealth card.
- Your right to disenroll from the Cooperative if the Cooperative does not cover a service you want because of moral or religious objections.

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- 8. You have a right to file a complaint, grievance, or appeal if you are dissatisfied with your care or services. This includes:
 - Your right to request a fair hearing if you are dissatisfied with the Cooperative's decision about your appeal or if the Cooperative does not respond to your appeal in a timely manner.
 - Your right to request a Department of Health Services grievance review if you are unhappy with Cooperative's decision about your grievance or if the Cooperative does not respond to your grievance in a timely manner.
- 9. You have the right to receive information about the Cooperative, its services, its practitioners, providers, and member rights and responsibilities. This includes:
 - Your right to know about any big changes with the Cooperative at least 30 days before the
 effective date of the change.
- 10. You have a right to be free to exercise your rights without negative treatment by the Cooperative and its network providers. This includes:
 - Your right to make recommendations about the Cooperative's Member Rights and Responsibilities policy.

MEMBER RESPONSIBILITIES

Reference source, if applicable: N/A

- You have a responsibility to supply information (to the extent possible) that the Cooperative and its practitioners and providers need in order to provide care.
- You have a responsibility to let the Cooperative know how best to contact and communicate with you. You have a responsibility to respond to communications from the Cooperative.
- You have a responsibility to follow plans and instructions for care that you have agreed to with your practitioners.
- You have a responsibility to understand your health problems and participate in creating mutually agreed-upon treatment goals, to the degree possible.

Upon request a copy of the Member Rights and Responsibilities will be made available to members and providers via email, fax, or paper at no cost to them.

Dual Spurlock			
APPROVED:	DATE:	10/16/2023	
All policies and procedures require department manager COO, and CMO for final approval and signature.	r review and appi	roval before being ser	nt to CEO,

group health	DEPARTMENT:	Member and Provider Services
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KMTSJ, Inc.	POLICY NUMBER:	MS149
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REVISION HISTORY:

Rev. Date	Revised By/Title	Summary of Revision
10/14/2010	Erika Thorson	
05/03/2012	Erika Thorson	
02/25/2013	Erika Thorson	No revisions
04/24/2014	Erika Thorson	No changes made
09/04/2015	Karen Ring/ Service Manager	No changes made
01/12/2016	Karen Ring/ Service Manager	No changes made
01/25/2017	Karen Ring/ Service Manager	Added information under member rights
10/26/2017	Jen Rust Anderson, Compliance Officer	Updated per AAAHC 2017 handbook and added information about posting via website
01/25/2018	Karen Ring/ Service Manager	No changes
02/14/2019	Karen Ring/ Service Manager	No changes
04/08/2020	Karen Ring/ Service Manager	No changes
03/15/2021	Brea Michaelson	Added information to policy section about how rights and responsibilities are communicated. Added information about the organization to member rights section. Included "appropriate or medically necessary treatment options, including the right to refuse treatment regardless of cost or benefit coverage" to participation in health care decisions under member rights. Added "understand health problems" under the "members have a responsibility to" section. Changed the policy approval description under approval signature to align with the "Policy and Procedure Approval" policy.
04/14/2022	Dual Spurlock/Service Manager	Updated for NCQA guidelines
11/18/2022	Dual Spurlock/Service Manager	Updated for NCQA guidelines
10/16/2023	Dual Spurlock/Director of Member and Provider Relations	Updated new Member rights and responsibilities