

CHIP Member Rights and Responsibilities

WHAT ARE MY RIGHTS?

You have the right to:

- > Have information presented to you in a way that is easy to understand, including help with language needs, visual needs, and hearing needs.
- > Be treated fairly and with respect.
- > Have your health information kept private.
- > Get information on all treatment options and alternatives.
- > Make decisions about your health care, including agreeing to treatment.
- > Take part in decisions about your medical care, including the right to refuse treatment.
- > Ask for and get a copy of your medical record.
- > Ask that your medical record be corrected or changed, if needed.
- > Get medical care regardless of race, color, national origin, sex, sexual orientation, gender identity, religion, age, or disability.
- > Get information about grievances, appeals, and State fair hearings.
- > File a grievance or request an appeal.
- > Get emergency care at any hospital or other setting.
- > Get emergency care 24 hours a day, 7 days a week.
- > Not feel controlled or forced into making medical decisions.
- > Ask how we pay your providers.
- > Create an Advance Directive that tells doctors what kind of treatment you do and do not want in case you become too sick to make your own decisions.
- > Be free from any form of restraint or seclusion used as a means of force, discipline, convenience or retaliation. This means you cannot be held against your will. You cannot be forced to do something you do not want to do.
- > Use your rights at any time and not be treated badly if you do. This includes treatment by SelectHealth CHIP, your medical providers, the State Medicaid and CHIP agency.

- > To be given health care services that are the right kind of services based on your needs.
- > To get health care services that are covered by SelectHealth CHIP, fairly easy to get to, and accessible to all members. All members include those who may not speak English very well, or have physical or mental disabilities.
- > To get a second opinion at no charge
- > To get covered health care services within 30 days for routine, non-urgent care, and within 2 days for urgent care that is not life-threatening.
- > To get a covered health care service from an out-of-network provider if we cannot provide the service.

WHAT ARE MY RESPONSIBILITIES?

Your responsibilities are:

- > Follow the rules of your plan.
- > Read your Member Handbook.
- > Show your CHIP medical card each time you get medical care.
- > If you must cancel an appointment, call the provider 24 hours before the appointment. Respect the staff and property at your provider's office.
- > Provide correct information to your providers and your CHIP plans.
- > Understand the medical care you need.
- > Use providers and facilities in the SelectHealth CHIP network.
- > Tell us if you get a medical bill that you don't think you should have to pay.
- > Pay your copayments, deductibles, and quarterly premiums.
- > Call Department of Workforce Services (DWS) if you change your address, family status, or other health care coverage.