

Your Rights and Responsibilities



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Member Rights

Your right to get information about the organization, its services, its practitioners and providers and member rights and responsibilities:

- You have a right to ask for information in writing about your rights and responsibilities.
- You have a right to have information about your health care plan and its services explained to you in a way you will understand, and in a different language if necessary.
- You have a right to interpreters when you contact Community Health Plan, either by phone or in writing.
- You have a right to know the name, title, and qualifications of the practitioners, providers, and staff who care for you.
- You have a right to get information in writing about what you must do to see a provider other than your PCP.
- You have a right to ask for information in writing about what you must do when you need our okay for health care services.
- You have a right to get information in writing about Community Health Plan’s structure and operations.
- You have a right to get information in writing about how we pay doctors and hospitals. You may also get an explanation of how referrals to specialists affect our payment to providers.
- You have a right to get information in writing about if we pay providers extra for certain care (physician incentive programs).
- You have a right to ask for information in writing about which medical service you use and showing how we paid for a service. This is known as an explanation of benefits (EOB).
- You have a right to request copies of your medical record and ask for changes when necessary.
- You have a right to know that the government has set standards for safe and effective pharmacy services.

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- You have a right to know what drugs are covered by your insurance. For more information, ask for a copy of the *2010 Directory of Prescription Drug Formulary & Network Pharmacies* by calling the Community HealthFirst customer service team at 1-800-942-0247 toll free. If you are hearing or speech impaired, please call TTY 1-866-816-2479 toll free or local 206-613-8875.
- You have a right to get information in writing about how we report how well we do with your care. We measure our performance using the Healthcare Effectiveness Data Information Set, or HEDIS. You may ask to see the HEDIS data and have someone explain what the information means.

If you want any of the information listed above, contact the Community HealthFirst customer service team at 1-800-942-0247 toll free. If you are hearing or speech impaired, please call TTY 1-866-816-2479 toll free or local 206-613-8875.

Your right to be treated with respect and recognition of your dignity and right to privacy:

- You have a right to be given care and service that go along with your values and beliefs.
- You have a right to get services without being discriminated against.
- You have a right to have your medical record and information regarding your health care treated confidentially.
- You have a right to expect that Community Health Plan will protect your privacy.
- You have a right to have your wishes for your future medical care made known to others if you are too sick to let them know. This includes the right to choose a person to make medical decisions for you if you are unable to do so. You can do this with a living will, a durable power of attorney for health care, or both.

Your right to participate with practitioners in making decisions about your health care:

- You have a right to provide your written okay to have the medical care.
- You have a right to be told how to make your wishes known about future care. That includes the right to choose a person to make medical decisions for you if you are unable to do so.
- You have a right to refuse treatment and be told what might happen with your health.
- You have a right to refuse to take part in experimental research.

Your right to a candid discussion of appropriate or medically necessary treatment options for your conditions, regardless of cost or benefit coverage:

- You have a right to get information about what health care services you can get.
- You have a right to get information about other health care options available from Community Health Plan.
- You have a right to get information about what you must do when you need an okay for health care services.

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- You have a right to candidly discuss with your provider the right or medically necessary treatment options for your health condition, including the risks involved, regardless of cost or coverage.
- You have a right to get a second opinion from another Community Health Plan provider, with an okay by your PCP.
- You have a right to be able to speak freely about your health care and concerns without any bad results.

Your right to voice complaints or appeals about the organization or the care it provides:

- You have a right to tell us your complaints or to appeal decisions about your health care or about Community Health Plan without fear that you may not be able to get care in the future.
- You have a right to be told about our grievance process when telling us about your complaints. You also have the right to get an answer to your complaint in a timely manner.
- You have a right to get a copy of our grievance policy. This will tell you how to file an appeal if you disagree with one of our decisions or if you are dissatisfied with your health care.

Your right to make recommendations regarding the organization's member rights and responsibilities policy:

- You have a right to recommend changes to Community Health Plan policies and procedures, including the policy about your rights and responsibilities and our policy on advance directives.
For information about how to recommend changes, contact the Community HealthFirst customer service team at 1-800-942-0247 toll free. If you are hearing or speech impaired, please call TTY 1-866-816-2479 toll free or local 206-613-8875.

Your right to safe and timely health care:

- You have a right to get care and service in a safe, comfortable, and clean environment.
- You have a right to get proper and timely health care, including emergency services, 24 hours a day, seven days a week.

Your right to choose your providers and your health plan:

- You have a right to get care from a Community Health Plan provider.
- You have a right to choose your primary care clinic, ask for a PCP, or change providers as often as once a month, at any time during the month.
- You have a right to seek care from a Community Health Plan women's health care provider, without a PCP referral.
- You have a right to change health plans.

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Member Responsibilities

Your responsibility to supply information (to the extent possible) that the organization and its practitioners and providers need in order to provide care:

- You have a responsibility to give complete and correct facts to your practitioners, providers, and Community Health Plan about your health history, current health status, and changes in your symptoms.
- You have a responsibility to let us know if you have a living will or a durable power of attorney for health care.
- You have a responsibility to tell us about your suggestions for improvements, concerns, and complaints.

Your responsibility to understand your health problems and participate in developing mutually agreed upon treatment goals, to the degree possible:

- You have a responsibility to, as much as possible, understand your health problems and work with your providers to create treatment goals you agree on.
- You have a responsibility to make informed decisions about treatments and procedures before they are performed.
- You have a responsibility to accept the risks of refusing treatment.
- You have a responsibility to get permission from your PCP before going to a specialist.

Your responsibility to follow plans and instructions for care that you have agreed to with your practitioners:

- You have a responsibility to follow the treatment plans and instructions for care that you and your provider agree on.
- You have a responsibility to tell your provider if you do not understand your treatment plan or if you believe you cannot follow through with it.

Your responsibility to treat your providers and staff with respect:

- You have a responsibility to treat health care professionals, staff, other members, and the health care provider's property in a kind and respectful manner.
- You have a responsibility to make and keep appointments. Tell your PCP if you are going to be late or if you need to cancel an appointment.
- You have a responsibility to identify yourself as a member of the Community Health Plan when you seek care. Carry your identification card and your child's identification card with you.
- You have a responsibility to get medical services through your PCP, except in an emergency or when your PCP recommends a specialist.
- You have a responsibility to call Community Health Plan if you do not understand how your health plan works or if you have questions about your coverage.

Note: Your provider's office offers additional rights and responsibilities, which are posted in your health center or clinic.

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Advance Directives

An advance directive puts your choices for health care into writing and tells your doctor and family what to do if:

- You lose consciousness, or
- You can no longer make health care decisions for yourself.

It may also name someone to speak for you if you are not able to speak for yourself. Having an advance directive means that your loved ones or your doctor will not have to make medical choices for you without your guidance.

Washington State law has two kinds of advance directives:

- **Durable Power of Attorney for Health Care.** This names another person to make medical decisions for you if you are not able to make them for yourself.
- **Healthcare Directive (living will).** This tells people whether or not you want treatments to prolong your life. If you want to be allowed to die naturally, you can use this document to make that clear.

You can cancel an advance directive at any time by writing down your wish to cancel it and giving it to your doctor and family.

Talk to your doctor, family, friends, and those close to you. Put decisions about your medical care in writing now.

Community Health Plan or your doctor can give you more information about advance directives. To read the Community Health Plan policy about advance directives, please see [“Community Health Plan Advance Directives Policy.”](#)

If you are not happy with the way Community Health Plan or a provider handles advance directives, you may file a complaint with the Washington State Department of Health. You can contact the Department of Health (DOH) Consumer Hotline at 1-800-525-0127; TTY users dial 711 for Washington Relay Service. You may also file a complaint directly with Community Health Plan by calling the phone numbers below. You also have the right to complain to the Secretary of the Department of Health and Human Services at 1-866-627-7748.

Community Health Plan Advance Directives Policy

Community Health Plan, together with its providers, contractors, vendors, and business associates, shall follow all Federal or State laws, agency determinations, or contract requirements regarding advance directives.

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Advance directive means a written instruction, recognized under state law, relating to how to provide health care when an individual is incapacitated. For the state of Washington, this written instruction takes the form of two documents: a Health Care Directive (also known as a Living Will) and a Durable Power of Attorney for Health Care.

At the time of enrollment, all members of Community Health Plan are told, both orally and in writing, of their right to make decisions about their care, to accept or refuse surgical or medical treatment, to make an advance directive, and to change or cancel it at any time. Together with the above information, members are given a copy of Community Health Plan's policy and procedure about advance directives, including any policy that would prevent Community Health Plan from following a member's advance directive. Members are also given a list of their rights under state law. All of this information is given in a language the member understands.

Community Health Plan puts its policy and procedure about advance directives in its *Provider Manual* and on this web site. You can also ask for them by calling the Community HealthFirst customer service team at 1-800-942-0247 toll free. If you are hearing or speech impaired, call TTY 1-866-816-2479 toll free or local 206-613-8875. Anyone who asks for a copy will be given one. You do not have to be a member to see the policy and procedure.

Providers, contractors, vendors, and business associates of Community Health Plan give the above information to members as follows:

- **Hospitals:** at the time the member is admitted as an inpatient.
- **Nursing facilities:** at the time the member is admitted as a resident.
- **Providers of in-home care services:** before the member comes under the care of the provider or at the time of the first home visit, so long as it is provided prior to care being given.
- **Hospice programs:** at the time the member initially gets hospice care from the program.

Primary care providers should talk about advance directives with their adult patients and must put this in the patient's medical record.

If Community Health Plan cannot honor a member's advance directive, we will:

- Tell the member before admission or enrollment or when the member completes the directive.
- Give the member a written statement that explains:
 - The difference between an objection by the organization and an objection by the provider.
 - Which state legal authority permits the objection.
 - The range of medical conditions or procedures affected.
- Record a written plan of what we intend to do if the member still chooses to get care from that provider or organization.

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If you are not happy with the way Community Health Plan or a provider handles advance directives, you can file a grievance with Community Health Plan.

If you think that Community Health Plan or its providers, contractors, vendors, or business associates are not following the DSHS rules for advance directives, you may file a grievance with the Department of Social and Health Services (DSHS) by calling 1-800-562-3022.

Community Health Plan actively works to increase the awareness of members, providers, and staff about advance directives.