HEALTH EXCEL
IPA

MEMBER RIGHTS and RESPONSIBILITIES

- To exercise these rights without regard to race ethnicity, national origin, religion, sex, age, mental or physical disability, sexual orientation, genetic information or source of payment;
- To be treated with respect and recognition of your dignity and need for privacy;
- To receive confidential treatment of all information and records associated with your care;
- To be provided with information about your IPA, its services, and the health care service delivery process;
- To be informed of the name, qualifications, and titles of the physician who has primary responsibility for coordinating your care, and be informed of the names, qualifications, and specialties of other professionals who may be involved in the your care;
- To have 24-hour access to your Primary Care Physician (PCP), or covering physician;
- To receive complete information about the diagnosis, proposed course of treatment or procedure, alternate courses of treatment or non-treatment, the clinical risks involved in each, and prospects for recovery in terms that are understandable to you, in order for you to give informed consent or to refuse that course of treatment;
- To be informed of continuing health care requirements following office visits, treatments, procedures, and hospitalizations;
- To actively participate in decisions regarding your health care and treatment plan. To the extent permitted by law, this includes the right to refuse any procedure or treatment. [If the recommended procedure or treatment is refused by you, an explanation will be given by your provider and will address the effect that this will have on your health];
- To have access to personal medical records based upon state and Federal requirements;
- To be informed of non-emergent costs of care and receive an explanation of your financial obligations prior to incurring the expense (including co-payment, deductibles, and co-insurance);
- To examine and receive an explanation of bills generated for services delivered to you;
- To be informed of applicable rules in the various health care settings regarding member conduct;
- To express opinions or concerns regarding your IPA or the care provided. To offer recommendations for changes in the health care delivery process by contacting your IPA Member Services Department. In turn, your IPA will have a timely and organized system for resolving member complaints and formal grievances with your Health Plan;
- To be informed of the member grievance and appeal process;
- To change your PCP by contacting your Health Plan's Customer Services Department;
- To receive reasonable continuity of care and be given timely and sensible responses to questions and requests made for service;
- To be able to formulate Advanced Directives for health care;
- These member rights shall apply to any person who has legal responsibility to make health care decisions for you;

Note: Members have the right to be represented by parents, guardians, family members or other conservators for those who are unable to fully participate in their treatment decisions.