



MEMBER RIGHTS & RESPONSIBILITIES

Please click the link below to view either the Commercial, Medicaid, or Medicare Member Rights & Responsibilities.

[**Commercial Member Rights & Responsibilities**](#)

[**Medicaid Member Rights & Responsibilities**](#)

[**Medicare Member Rights & Responsibilities**](#)

COMMERCIAL MEMBER RIGHTS & RESPONSIBILITIES

MEMBER RIGHTS

- A right to receive information about the Cooperative, its services, its practitioners and providers and member rights and responsibilities.
- A right to be treated with respect and recognition of their dignity and their right to privacy.
- A right to participate with practitioners in making decisions about their health care.
- A right to a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- A right to voice complaints or appeals about the Cooperative or the care it provides.
- A right to make recommendations regarding the Cooperative's member rights and responsibilities policy.

MEMBER RESPONSIBILITIES

- A responsibility to supply information (to the extent possible) that the Cooperative and its practitioners and providers need in order to provide care.
- A responsibility to follow plans and instructions for care that they have agreed to with their practitioners.
- A responsibility to understand their health problems and participate in developing 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.

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:
 - Age
 - Color
 - Disability
 - National origin
 - Race
 - Sex
 - Religion
 - Sexual orientation
 - Gender identity
 - Genetic Information
 - Retaliation
 - 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.
- 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.

MEDICAID MEMBER RIGHTS & RESPONSIBILITIES

- 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.
- 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.



MEDICAID MEMBER RIGHTS & RESPONSIBILITIES

MEMBER RESPONSIBILITIES

- You have a responsibility to supply information (to the extent possible) that the Cooperative and its practitioners and providers need 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.

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MEDICARE MEMBER RIGHTS AND RESPONSIBILITIES

As a Medicare member of our plan, you have the right to:

- Be treated with courtesy, dignity, and respect always.
- Not be discriminated against based on race, ethnicity, national origin, disability, religion, gender, or age.
- Have your personal and health information kept private.
- Receive information in a way that works for you (e.g., Braille, large print).
- Have access to providers, specialists, and hospitals for medically necessary services.
- Get emergency care when and where you need it.
- Get information about the plan, its network of providers and your covered services.
- Know all your treatment options, participate fully in decisions about your health care, and get a treatment plan from your provider.
- Get a coverage decision or coverage information from your plan before getting services.
- Ask your plan to pay for an item or service you think should be covered.
- Know how your plan pays your providers.
- Ask for an appeal of certain decisions about health care payment, coverage of items and services, or drug coverage.
- File a complaint about concerns or problems with your plan.

As a Medicare member of our plan, you have the responsibility to:

- Give your providers the necessary information they need to care for you and follow through with treatment plans that you agreed to.
- Get familiar with your covered services and the rules you must follow to get these covered services.
- Tell us if you have any other insurance coverage or prescription drug coverage in addition to our plan.
- Notify us if you move. If you move outside the plan's service area, you cannot remain a member of our plan.
- Present your Member ID card to your provider when getting care.
- Pay your share of the cost (coinsurance or copayments when applicable) when you get services covered by the plan.

See your Evidence of Coverage document for more information about your rights and responsibilities or call Member Services.