

Oregon Medicaid Kaiser Permanente

Member Rights and Responsibilities

As a member of Oregon Health Plan (OHP) and Kaiser Permanente, you have rights. There are also responsibilities or things you have to do when you get OHP. If you have any questions about the rights and responsibilities listed here, call Member Services at 1-800-813-2000 (TTY 711) Monday through Friday, 8 a.m. to 6 p.m.

You have the right to exercise your member rights without a bad response or discrimination. You can make a complaint if you feel like your rights have not been respected. You can also call an Oregon Health Authority Ombudsperson at 877-642-0450 (TTY 711). You can send them a secure email at <http://www.oregon.gov/oha/ERD/Pages/Ombuds-Program.aspx>.

There are times when people under age 18 (minors) may want or need to get health care services on their own. To learn more, read "Minor Rights: Access and Consent to Health Care." This booklet tells you the types of services minors can get on their own and how their health records may be shared. You can read it at <http://www.OHP.Oregon.gov>. Click on "Minor rights and access to care." Or go to sharedsystems.dhsoha.state.or.us/DHSForms/Served/le9541.pdf.

Your Rights as an OHP Member

You have the right to be treated like this:

- Be treated with dignity, respect, and consideration for your privacy.
- Be treated by providers the same as other people seeking health care.
- Have a stable relationship with a care team that is responsible for managing your overall care.
 - **You have the right to:**
 - Not have people hold you down or keep you away from others as a way to:
 - Make you do something you don't want to do
 - Make caring for you easier for your providers
 - Punish you for something you said or did

You have the right to get this information:

- Materials explained in a way and in a language you can understand.
- Materials that tell you about CCOs and how to use the health care system. (The Member Handbook is one good source for this.)

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- Written materials that tell you your rights, responsibilities, benefits, how to get services, and what to do in an emergency. (The Member Handbook is one good source for this.)
- Information about your condition, what is covered, and what is not covered, so you can make good decisions about your treatment. You can ask for this information in a language and a format that works for you.
- A health record that keeps track of your conditions, the services you get, and referrals.
 - Have access to your health records.
 - Share your health records with a provider.
- Written notice of a denial or change in a benefit before it happens. You might not get a notice if it isn't required by federal or state rules.
- Written notice about providers who are no longer in-network.
- Notification in a timely manner if an appointment is cancelled.

You have the right to get this care:

- Care and services that put you at the center. Get care that gives you choice, independence, and dignity. This care will be based on your health needs and meet standards of practice.
- Services that consider your cultural and language needs and are close to where you live. If available, you can get services in nontraditional settings.
- Care coordination, community-based care, and help with care transitions in a way that works with your culture and language. This will help keep you out of a hospital or facility.
- Services that are needed to know what health condition you have.
- Help to use the health care system. Get the cultural and language support you need. This could be:
 - Certified or qualified health care interpreters.
 - Certified traditional health workers.
 - Community health workers.
 - Peer wellness specialists.
 - Peer support specialists.
 - Doulas.
 - Personal health navigators.
- Help from CCO staff who are fully trained on CCO policies and procedures.
- Covered preventive services.
- Urgent and emergency services 24 hours a day, 7 days a week without approval or permission.
 - Referrals to specialty providers for covered coordinated services that are needed based on your health.

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- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation, as specified in other federal regulations on the use of restraints and seclusion.

You have the right to do these things:

- Choose your providers and to change those choices.
- Have a friend, family member, or helper come to your appointments.
- Be actively involved in making your treatment plan.
- Agree to or refuse services. Know what might happen based on your decision. A court-ordered service cannot be refused.
- Refer yourself to behavioral health or family planning services without permission from a provider.
- Make a statement of wishes for treatment. This means your wishes to accept or refuse medical, surgical, or behavioral health treatment. It also means the right to make directives and give powers of attorney for health care, listed in ORS 127.
- Make a complaint or ask for an appeal. Get a response from Kaiser Permanente when you do this.
- Ask the state to review if you don't agree with Kaiser Permanente's decision. This is called a hearing.
- Get free certified or qualified health care interpreters for all non-English languages and sign language.

Your responsibilities as an OHP member

You must treat others this way:

- Treat Kaiser Permanente staff, providers, and others with respect.
- Be honest with your providers so they can give you the best care.

You must tell OHP this information:

Call OHP at 800-699-9075 (TTY 711) when you:

- Move or change your mailing address.
- If any family moves in or out of your home.
- Change your phone number.
- Become pregnant and when you give birth.
- Have other insurance.

You must help with your care in these ways:

- Choose or help choose your primary care provider or clinic.
- Get yearly checkups, wellness visits, and preventive care to keep you healthy.
- Be on time for appointments. If you will be late, call ahead or cancel your appointment if you can't make it.

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- Bring your medical ID cards to appointments. Tell the office that you have OHP and any other health insurance. Let them know if you were hurt in an accident.
- Help your provider make your treatment plan. Follow the treatment plan and actively take part in your care.
- Follow directions from your providers or ask for another option.
- If you don't understand, ask questions about conditions, treatments, and other issues related to care.
- Use information you get from providers and care teams to help you make informed decisions about your treatment.
- Use your primary care provider for tests and other care needs, unless it's an emergency.
- Use in-network specialists or work with your provider for approval if you want or need to see someone who doesn't work with Kaiser Permanente.
- Use urgent or emergent services appropriately. Tell your primary care provider within 72 hours if you do use these services.
- Help providers get your health records. You may have to sign a form for this.
- Tell Kaiser Permanente if you have any issues or complaints or need help.
- Pay for services that are not covered by OHP.
- If you get money because of an injury, help Kaiser Permanente get paid for services we gave you because of that injury.

Reference: Oregon Administrative Rule (OAR) 410-141-3590- MCE Member Relations: Member Rights and Responsibilities