

Document ID: MEMB 002	Title: Member Rights and Responsibilities Policy
Revision: 1-1-2022	Effective Date: 1-1-2022

I. PURPOSE

To ensure that Member's Rights and Responsibilities are enforced across all Empower locations, unless otherwise stated in contract.

II. DEFINITIONS

HIPAA - Health Insurance Portability and Accountability Act of 1996, Public Law 104-191:

- 1. Allows persons to qualify immediately for comparable health insurance coverage when they change their employment relationships;
- 2. Mandates the use of standards for electronic exchange of health care data, specifies what code sets should be used; and requires the use of national identification systems for health care patients, providers, payers and employers; and
- 3. Specifies the types and measures required to protect the security and privacy of PHI

Beneficiary/MEMBER

A person enrolled, currently or formally enrolled, in a health plan offered by a client of Empower Health Solutions. May also be referred to as an "enrollee" or as a "covered person"

Beneficiary/MEMBER Rights and Responsibilities Statements

Written statements delineating and summarizing the Empower member rights and responsibilities policies and designed to acquaint beneficiaries and/or providers with those polices. These may exist in "poster" form or may be incorporated into other documents such as member or provider handbooks.

Protected Health Information (PHI)

Individually identifiable health information that is: (1) Transmitted by electronic media; (2) Maintained in any medium; and (3) Transmitted or maintained in any other form or medium.

III. POLICY

- A. It is the policy of Empower that beneficiary/member have the right to:
 - 1. Receive information about Empower covered services, names and titles of senior staff beneficiaries, clinical guidelines, and Beneficiaries rights and responsibilities.
 - 2. Receive information about their rights and choices for services based on contract requirements and/or limitations.
 - 3. Receive general information about Empower practitioners including licensure, specialty, address, phone number, hours of availability, and demographic information (if available)



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- 4. Be treated with respect and recognition of their dignity and need for privacy.
- 5. Have information about their diagnoses and treatment kept confidential, to the extent allowed by law, unless they provide written authorization for release of such information.
- 6. Participate in decisions regarding his or her health care, including the right to refuse treatment.
- 7. Participate in a candid discussion with their practitioners(s) regarding appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- 8. Voice complaints or appeals about Empower or the care delivered by practitioners or providers.
- 9. Make recommendations regarding Empower Beneficiary rights and responsibilities policies.
- 10. Be represented by a person of their choosing in their interactions with Empower.
- 11. Be informed of services, benefits, and how to access care.
- 12. Receive care in a timely manner.
- 13. Receive information and explanation regarding any bill or charge regardless of payment source.
- 14. Receive a copy of our Notice of Privacy Practices at Empower service locations, on our web site and upon request.
- 15. Inspect and get a copy of their Protected Health Information (PHI) that we keep, subject to certain limitations.
- 16. Ask us to amend or correct their PHI that we keep.
- 17. Ask us to communicate their PHI by alternative means (such as by fax) or to an alternative location (such as a business address).
- 18. Ask us to restrict how we use or disclose their PHI.
- 19. Request and receive an accounting of certain disclosures of their PHI made by us or by our business associates (that is, disclosures not made for treatment, payment, or healthcare operations and where a patient has not specifically authorized release).
- 20. Make complaints about our privacy practices to our organization and to the secretary of the U.S. Department of Health and Human Services if they believe we are not complying with HIPAA.
- 21. Receive information on available treatment options and alternatives, presented in a manner appropriate to the beneficiary's condition and ability to understand.
- 22. 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.
- 23. Request a second opinion.



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- 24. Reasonable accommodations.
- 25. Receive oral interpretation services free of charge for any materials in any language.
- 26. The right to be provided written notice of a change in the beneficiaries'/member care coordination provider within seven (7) calendar days.
- 27. The right to a member handbook and referral network directory within a reasonable amount of time after attribution.
- B. It is the policy of Empower that beneficiary/member have the responsibility to:
 - 1. Provide, to the extent possible, information that the organization and its practitioners and providers need in order to care for them and to assist in obtaining necessary treatment records.
 - 2. Follow the plans and instructions for care that they have agreed upon with their practitioners.
 - 3. Participate, to the degree possible, in understanding their health problems and developing mutually agreed upon treatment goals.
 - 4. Cooperate with Empower policies and procedures with regard to service authorization, referrals, and change of address notice.

IV. PROCEDURE

- A. Beneficiary/member Requests for Empower or Provider Information When a beneficiary/member contacts the Empower Office, the inquiry is routed to the appropriate staff who determines if the request for information is appropriate. If so, the staff member either responds to the request verbally or mails the requested information to the beneficiary. If the beneficiary's/members request for information is outside of the parameters of Section III.A.1 above, or appears inappropriate, the beneficiary's request is referred to the quality director, clinical director, or provider services director, for disposition. The company maintains electronic documentation of all beneficiary requests for information.
- B. Distribution of Beneficiary's/Members Rights and Responsibility statements (as appropriate with contract guidelines)
 - 1. Empower distributes a written Members Rights and Responsibilities Statement, summarizing Members rights and responsibilities policies to beneficiaries, participating practitioners, and relevant Primary Care Physicians (PCPs).
 - 2. Empower includes the Members Rights and Responsibilities Statement in Member handbooks, which typically are distributed to all covered persons at the start of a contract and to all newly covered persons. Practitioners are asked to post the Member's Rights and Responsibilities Statement in their offices (see MEMB 002 and



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MEMB 002a, Sample Member's Rights and Responsibilities poster for English and Spanish). If a particular contract does not provide for distribution of member handbooks initially, or to new beneficiaries, then the Engagement Center administering the contract develops an alternate means of informing at least those members who utilize services (i.e., through inclusion in Explanation of Benefits materials or via website).

- 3. Beneficiaries/members are notified of policy revisions through some combination of updated beneficiary handbooks, inclusion in beneficiary newsletters, periodic informational forums, beneficiary mailings, and notices to providers and practitioners.
- 4. All Empower providers receive a copy of the Members rights statement through inclusion on the website or in the provider handbook and information distributed to new providers. Additionally, the policy is available to practitioners and providers on the Empower Internet Web site, is furnished to practitioners during any site visit to the practitioner's office and is available at periodic provider forums. Practitioners are encouraged at forums and in newsletters to post the statement in their offices and to otherwise make it available to beneficiaries in treatment and their families, as appropriate.
- C. Additional Beneficiary/Member Information Information required under items 1-4 below is incorporated into Member Handbooks or distributed by alternate means as described in Section B. above (as appropriate with contract guidelines)
 - 1. Empower provides written information about benefits and charges applicable to the beneficiary including:
 - a) Inclusions and exclusions from benefits and services
 - b) Copayments and other charges for which the beneficiary is responsible
 - c) Restrictions on benefits that apply to services obtained outside the organization's system or service area
 - d) How to submit a claim for covered services;
 - 2. Empower provides members with written information about how to obtain services including:
 - a) How to request authorization for inpatient, outpatient, partial hospitalization, and other behavioral health care services
 - b) How to obtain referrals for specialty care;
 - c) How to obtain care after normal office hours;
 - d) How to obtain emergency care
 - e) How to obtain care outside the organization's service area;
 - 3. Empower provides members with written information about:
 - a) How to voice a complaint;



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- b) How to appeal a decision that adversely affects the beneficiary's coverage, benefits, or relationship to the organization;
- How the organization evaluates new technologies and interventions for inclusion as a covered benefit, if applicable (Clinical Policy New Medical Technologies).
- 4. Empower assists beneficiaries/members affected by the closure of a practitioner's office or site to select a new practitioner (Empower CLIN 001 Continued Access When Network Providers Discontinue Participation in Empower's Network).

D. Presentation of Beneficiary Information

Beneficiary literature that is provided to beneficiaries as provided above is:

- 1. Designed to be readable (i.e., by using the Flesch Kincaid Readability test) according to the needs of the covered population or contract requirements, easily understood, and consumer tested (Per Empower QM 33 Cultural and Linguistic Competency and Health Literacy Program).
- 2. Available as needed in the primary languages of the major population groups served in accordance with contract requirements. (Empower's Clinical Customer Service Policy Attachment Handling calls with limited English Speaking Beneficiary's, if applicable)
- 3. Health literacy is considered in developing communication materials that addresses the need of the population served. Plain language is used in developing beneficiary materials. Empower makes available language services for beneficiaries who request assistance either through oral interpretation or translation.

E. Confidentiality

- Empower maintains written confidentiality policies and procedures that include case management, electronic treatment records, facsimile mail, and electronic mail (See Confidentiality of Protected Health Information (PHI).
- 2. Empower confidentiality policies and procedures must conform to all federal and state confidentiality laws and regulations
- 3. Contracts with practitioners and providers must explicitly state Empower expectations about the confidentiality of beneficiary information and records.
- 4. Empower maintains written policies and procedures to address the care and treatment of minors (See Clinical P&P Treatment of Minors), as well as adults who are unable to exercise rational judgment or give informed consent.
- 5. Beneficiaries must have the opportunity to approve or deny release of identifiable personal information by Empower, except for purposes of Treatment, Payment and Operations (TPO) or when such release is required by law.
- 6. Beneficiaries have specific rights under HIPAA



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- a) Beneficiaries may obtain a copy of Empower Notice of Privacy Practices from the Empower web site, their health plans, and email, or in written format upon request (See MEMB 001 Member Privacy Rights Policy).
- b) Beneficiaries may inspect and get a copy of their PHI that Empower maintains, subject to certain limitations. Beneficiaries are required to make such requests in writing and may be charged a reasonable fee to cover the cost of generating the copy (See MEMB 001 Member Privacy Rights Policy).
- c) Beneficiaries may ask Empower to amend or correct their PHI maintained by Empower. Empower requires beneficiaries to make such requests in writing, but is not required to grant all requests. (See MEMB 001 Member Privacy Rights Policy).
- d) Beneficiaries may ask Empower to communicate their PHI by alternative means (such as by fax) or to an alternative location (such as a business address).

 Beneficiaries are required to make such requests in writing (See MEMB 001 Member Privacy Rights Policy).
- e) Beneficiaries may ask Empower to restrict how their PHI is used or disclosed. Beneficiaries are required to make such requests in writing but Empower is not required to grant all restriction requests (See MEMB 001 Member Privacy Rights Policy).
- f) Beneficiaries who request it must be given an accounting of certain disclosures of their PHI made by Empower or by Empower business associates (that is, disclosures not made for treatment, payment, or healthcare operations and where a patient has not specifically authorized release. (See MEMB 001 Member Privacy Rights Policy).
- g) Beneficiaries may make complaints about Empower privacy practices to Empower and to the secretary of the U.S. Department of Health and Human Services if they believe Empower Health Solutions is not complying with HIPAA (See Empower Quality Management Policy QM 306 Complaints and Grievances).

F. Beneficiary Participation

- Beneficiaries have the right to immediate access to services and practitioners or providers in the case of emergent, urgent and/or routine needs according to established timelines.
- 2. Beneficiaries have the right to refuse treatment, to the extent allowed by law.

V. REFERENCES

PASSE Agreement 2.5.2



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Empower Policies and Procedures

- CO 010 Confidentiality of Protected Health Information (PHI),
- CLIN 001 Continued Access When Network Providers Discontinue Participation in Empower's Network,
- QM 33 Cultural and Linguistic Competency and Health Literacy Program,
- MEMB 001 Member Privacy Rights Policy,
- QM306 Complaints and Grievances

VI. ATTACHMENTS

MEMB 002 Member Rights and Responsibilities (English Sample) MEMB 002a Member Rights and Responsibilities (Spanish Sample)

VII. RESPONSIBILITY FOR IMPLEMENTATION

Empower Care Coordination Directors and Empower Chief Operations Officer and their designees

VIII. RESPONSIBILITY FOR MONITORING POLICY COMPLIANCE

Sr. VP of Coordinated Care and Integration, Empower Care Coordination Directors, Empower Compliance Director