



Member Rights and Responsibilities

As member of the Calvo's SelectCare HMO or PPO Plans you have the following rights:

Information

- Know the names and qualifications of health care professionals involved in your medical treatment.
- Get updated information about the services covered and any limitations or exclusions
- Know how your plan decides what services are covered.
- Get information about copayments and fees that you must pay.
- Get updated information about providers that participate in the plan.
- Get information on how to file a complaint or appeal with the plan.
- Know how the plan pays for services to in-network and out-of-network health care professionals
- Receive information from health care professionals about your medications, how to take them, and possible side effects.
- Receive information from health care professionals about any proposed treatment or procedure, as you may need in order to consent to or refuse a course of treatment. Except during an emergency, this information should include a description of the proposed procedure or treatment, the potential risks and benefits involved, any alternate course of treatment (even if not covered) or non-treatment and the risks involved in each, and the name of the health care professional who will carry out the procedure or treatment.
- Be informed by participating health care professionals about continuing health care requirements after you are discharged from inpatient or outpatient facilities.
- Be informed if a health care professional plans to use an experimental treatment or procedure in your care. You have the right to refuse to participate in research projects.
- Receive an explanation about non-covered services.
- Receive a prompt reply when you ask the plan questions or request information.
- Receive a copy of the plan's Member Rights and Responsibilities Statement.

Access to care

- Obtain primary and preventive care from the primary care physician you chose from the plan's network.
- Change your primary care physician to another available primary care physician who participates in the plan.
- Get necessary care from participating network specialists, hospitals and other health care professionals.
- Get referrals to participating network specialists who are experienced in treating your chronic illness.
- Be advised by your health care professionals on how to schedule appointments and get health care during and after office hours. This includes continuity of care.
- Be told how to get in touch with your primary care physician or a back-up physician 24 hours a day, every day.
- Call 911 (or any available emergency response service) or go to the nearest emergency facility when you have a medical condition with acute symptoms that are severe enough that a prudent layperson, who has average knowledge of health and medicine, could reasonably expect the lack of immediate medical attention to result in serious danger to the person's health.
- Receive urgently needed medically necessary care.

The freedom to make decisions

- Use these rights regardless of your race, physical or mental disability, ethnicity, gender, sexual orientation, creed, age, religion, national origin, cultural or educational background, economic or health status, English proficiency, reading skills, genetic information, or source of payment for your care.
- Have any person who has legal responsibility to make medical care decisions for you make use of these rights on your behalf.
- Refuse treatment or leave a medical facility, even against the advice of doctors (providing you accept responsibility and the consequences of the decision).
- Complete an Advance Directive, Living Will or other directive and give it to your health care professionals.
- Know that you or your health care professional cannot be punished for filing a complaint or appeal.

As member of the Calvo's SelectCare HMO or PPO Plans you have the following responsibilities:

Member responsibilities

- To provide complete and accurate information to the best of your ability about your health, medications (including over-the-counter products and dietary supplements), and any allergies and sensitivities.
- Agree to follow the treatment plan prescribed by your provider and to participate in your care.
- Inform the provider about any living will, medical power of attorney, or other directive that could affect your care.
- Accept personal financial responsibility for any charges not covered by insurance, if applicable.
- Treat all health care providers, staff, and others respectfully.