



Member Rights and Responsibilities

Member Rights

You and your provider can receive a copy of your Member Rights and Responsibilities by mail, fax, email, or on our website at [anthem.com/inmedicaid](https://www.anthem.com/inmedicaid). As a member of this health plan, you have the right to:

- Receive information about Anthem, the services we provide, your managed care program, doctors and facilities in your plan, and your rights and responsibilities. You will also be notified by phone call or mail if benefits, services, or service delivery sites change or end. You can find information about Anthem on our website at [anthem.com/inmedicaid](https://www.anthem.com/inmedicaid). You can also call Member Services at **866-408-6131** (Hoosier Healthwise and Healthy Indiana Plan); **844-284-1797** (Hoosier Care Connect); **833-412-4405** (Indiana PathWays for Aging); **TTY 711**.
- Use buildings and services that meet standards of the Americans with Disabilities Act (ADA). This means that people with disabilities or physical problems can get into medical buildings and use important services.
- Get information about Anthem's structure and operation.
- Be treated with respect and with due consideration for your dignity and privacy.
- Receive information on available treatment options and alternatives, presented in a way that is right for your condition and that you can understand.
- Know that the date you joined Anthem is the date your benefits begin, and Anthem will not cover services you received before that date.
- Choose a primary medical provider (PMP) who is part of the network, and change your PMP without cause or reason.
- Be free from any restrictions on freedom of choice among network providers.
- Know if your doctor takes part in a physician incentive plan through Anthem. Call us to learn more about this.
- Take part in all decisions about your healthcare. This includes the right to have and review a care plan and a service plan, and the right to refuse treatment.
- Get a second opinion from a different doctor.
- Receive covered services and medically necessary care in a timely and culturally competent manner.
- Have a care coordinator you can contact directly who will develop a care plan with you. Your care coordinator will work with you, your caregiver, your healthcare providers, and other service providers to assess your healthcare needs and ensure they are met.
- Have a service coordinator you can contact directly who will develop a service plan with you, if you are receiving home- and community-based services.
- Have the right to request a fair hearing if you are not given the choice of home- and community-based waiver services instead of institutional level of care, if you are denied the service(s) or the provider(s) of your choice, or if your services are denied, suspended, reduced, or terminated. The right to request a fair

hearing includes providing a notice of action.

- Know which hospitals you should use, and have access to them.
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation, as specified in federal laws on the use of restraints and seclusion.
- Request and receive a copy of your medical records. And you may request they be amended or corrected, as stated in state and federal healthcare privacy laws.
- Have honest talks with your doctors about the right treatment for your condition, in spite of the cost.
- Find out how Anthem decides if new technology or treatments should be part of a benefit.
- Have Anthem, your doctors, and all of your care providers keep your medical records and health insurance information private.
- Have your problems taken care of quickly. This includes things you think are wrong, as well as issues that have to do with your benefits, payment of services, or receiving an OK from us.
- Have access to medical advice from your doctor, either in person or by phone, 24 hours a day, seven days a week. This includes emergency or urgent care.
- Obtain interpreter services at no charge if you speak a language other than English, or if you have hearing, vision, or speech loss.
- Voice complaints or appeals about Anthem, the plan, or the care that we provide to you.
- Ask for information and other Anthem materials (letters, newsletters) in other formats. These include Braille, large-sized print, or audio CD, at no charge to you. Call Member Services at **866-408-6131** (Hoosier Healthwise and Healthy Indiana Plan); **844-284-1797** (Hoosier Care Connect); **833-412-4405** (Indiana PathWays for Aging); **TTY 711**.
- Tell us what you would like to change about your Anthem health plan, including the member rights and responsibilities policy.
- Question a decision we make about the care you got from your doctor. You will not be treated differently if you file a complaint.
- Know that Anthem can make changes to your health plan benefits, as long as we tell you about them in writing before the changes take effect.
- Know that Anthem does not take the place of workers' compensation insurance.
- Ask about our quality program and tell us if you would like to see changes made.
- Ask us how we do utilization reviews and give us ideas on how to change them.
- Know you will not be held liable if Anthem becomes insolvent (bankrupt and cannot pay its bills).
- Make an advance directive.
- Know that Anthem, your doctors, or your other healthcare providers cannot treat you differently for these reasons:

- Your age
- Your sex or gender identity
- Your sexual orientation
- Your race
- Your national origin
- Your language needs
- The degree of your illness, health condition, or disability

Member Responsibilities

As a member of this health plan, you have the responsibility to:

- Tell us, your doctor, and your other healthcare providers when you need help, how you prefer to be supported, and about your medical conditions to the best of your ability.
- Tell your doctor if you do not understand what they tell you about your condition, care, or what you need to do.
- Follow the rules of your doctor's office.
- Provide information to help us and your healthcare providers know how to support your healthcare needs.
- Take the lead in developing your treatment goals using support as needed.
- Follow through on your treatment plans (and instructions for care) you, your doctors, and your other healthcare providers agree to, or let us know when the plan needs to be adjusted to help you to be successful with reaching your goals.
- Treat your doctor and other healthcare providers with respect.
- Make appointments with your doctor when needed, or reach out to us for support as needed.
- Keep all scheduled appointments and be on time.
- Call your doctor if you cannot make it to your appointment.
- Always call your PMP first for all of your medical care (unless you have an emergency).
- Show your ID card each time you receive medical care.
- Use the emergency room only for true emergencies.
- Tell Anthem and the Division of Family Resources (**800-403-0864** or **fssabenefits.in.gov/bp/**) if:
 - You move.
 - You change your phone number.
 - You have any changes to your insurance.
 - Your income changes.
 - The number of people in your household changes.

[anthem.com/inmedicaid](https://www.anthem.com/inmedicaid)

Serving Hoosier Healthwise, Healthy Indiana Plan,
Hoosier Care Connect, and
Indiana PathWays for Aging

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