

Rights and Responsibilities

Medicaid is a voluntary program, meaning that you have to agree to be a part of it. You have to follow certain rules, but you are also entitled to the following rights.

You have the right:

- To be able to get in touch with your doctor
- To go to any doctor or clinic for birth control (family planning)
- To get care right away if you believe you have an emergency
- To be told what your illness or medical problem is and what the doctor thinks is the best way to treat it
- To decide about your healthcare and to give your permission before the start of treatment or surgery
- To have the personal information in your medical records kept private
- To be treated with respect, dignity and privacy
- To report to Medicaid any complaint or grievance about your doctor or your medical care
- To request a fair hearing if the Medicaid Agency reduces or denies services based on medical criteria
- To be informed of your rights in a language and manner you understand
- To receive information on available treatment options and alternatives, presented in a manner you can understand
- To participate in decisions regarding your health care, including the right to refuse treatment or Care Management Services
- To receive care that is free of any restraint or action that would force you to do something against your will or punish you
- To request and receive a copy of your medical records, and to request that they be changed if it is not correct
- To participate in care team meetings that center around you and to discuss your Care Plan with your case manager/care coordinator, primary care provider and other ACNS staff members
- To be free to exercise your rights with assurances that Alabama Care Network Southeast(ACNS) staff and Participating Providers will not treat you negatively for doing so
- To receive a copy of your Rights and Responsibilities at least once a year
- To choose a Primary Care Provider, Maternity Care Provider, Case Manager/Care Coordinator, and a Community Health Care Worker to the extent possible and appropriate
- To see any participating Primary Care Provider or Maternity Care Provider for services, regardless of location; however, your care management services will be provided by the ACHN serving your county of residence
- To obtain emergency services outside the primary care case management system regardless of whether the case manager referred you to the Provider that furnished the services
- To request disenrollment from ACNS by submitting an oral or written request to Medicaid. Reasons for disenrollment include: needed services are not available in this Region and your doctor states that receiving services separately would subject you to unnecessary risk; you move out of the Region;

Alabama Care Network Southeast complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-833-296-5245 (TTY: 711). 注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-833-296-5245 (TTY: 711). Updated 11/01/2024

you object to the plan on moral or religious grounds; poor quality of care and/or lack of access to services covered; unavailability of Providers experienced in dealing with your care needs; intermediate sanctions imposed by Medicaid on ACNS; for cause, at any time; without cause ninety (90) calendar days after initial enrollment or during the ninety (90) calendar days following notification of enrollment, whichever is later; without cause at least once every twelve (12) months; or without cause upon reenrollment if a temporary loss of enrollment has caused you to miss the annual disenrollment period

To request reenrollment any time after you have dis-enrolled from ACNS

Medicaid is a voluntary program. This means that you agree to be a part of Medicaid and to follow Medicaid's rules.

This also means you have the following duties:

- To follow the rules for Medicaid
- To call your doctor first before going to the emergency room, unless it is life threatening, or if you go to other doctors or clinics
- To sign a document that says you understand that your Care Plan was reviewed with you if you decide not to participate in your care team meeting
- To give as many facts as you can to help your doctor or other health care provider take care of you. For example, it is important to tell your doctor about all the medicines you take (You may want to take all your medicine bottles with you to the doctor.)
- To call your doctor or clinic and let them know if you cannot come to an appointment
- To follow the instructions you get from your doctor or clinic
- To ask questions about things you do not understand
- To follow the rules set up by your personal doctor for his or her office
- To tell your doctor or clinic about any insurance you have
- To keep your Medicaid card in a safe place. Never let anyone else use your card
- To tell Medicaid about any changes that might affect your coverage such as address, marital status, income or insurance coverage. A relative should report the date of death of a Medicaid client

Some rules your doctor might have:

- Treat others with respect and courtesy. This means showing respect to the doctor, employees, and other patients and their families. This also means you are to answer questions with courtesy, follow directions and otherwise do what is asked of you
- Do not bring food or drink into the office
- Bring no more than one visitor with you to wait in the office
- Pay for any services not covered by Medicaid
- Call if you cannot keep your appointment

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