

Sunshine Client's Rights and Responsibilities

Member Rights

- As a recipient of Medicaid and a member in a Plan, members also have certain rights. They have the right to:
- Be treated with courtesy and respect
- Have their dignity and privacy considered and respected at all times
- Received a quick and useful response to their questions and requests
- Know who is providing medical services and who is responsible for their care
- Know what member services are available, including whether an interpreter is available if they do not speak English
- Know what rules and laws apply to their conduct
- Be given easy to follow information about their diagnosis, the treatment they need, choices of treatments and alternatives, risks, and how these treatments will help them
- Make choices about their health care and say no to any treatment, except as otherwise provided by law
- Be given full information about other ways to help pay for their healthcare
- Know if the provider or facility accepts the Medicare assignment rate
- To be told prior to getting a service how much it may cost them
- Get a copy of a bill and have the charges explained to them
- Get medical treatment or special help for people with disabilities, regardless of race, national origin, religion, handicap, or source of payment
- Received treatment for any health emergency that will get worse if they do not get treatment
- Know if medical treatment is for experimental research and to say yes or no to participating in such research
- Make a complaint when their rights are not respected
- Ask for another doctor when they do not agree with their doctor (second medical opinion)
- Get a copy of their medical record and ask to have information added or corrected in their record, if needed
- Have their medical records kept private and shared only when required by law or with their approval
- Decide how they want medical decisions made if they can't make them themselves (advanced directive)
- To file a grievance about any matter other than a Plan's decision about their services
- To appeal a Plan's decision about their services
- Received services from a provider that is not part of our Plan (out-of-network) if we cannot find a provider for you that is part of our Plan
- Speak freely about their healthcare and concerns without any bad results
- Freely exercise their rights without the Plan or its network providers treating badly
- Be free from any form of restraint or seclusion used as means of coercion, discipline, convenience or retaliation

- Request and receive a copy of their medical records and ask that they be amended or corrected

Member Responsibilities

- As a recipient of Medicaid and a member in a Plan, members also have certain responsibilities. They have the responsibility to:
- Give accurate information about their health to the Plan and providers
- Tell their provider about unexpected changes in their health condition
- Talk to their provider to make sure they understand a course of action and what is expected of them
- Listen to their provider, follow instructions and ask
- Keep their appointments or notify their provider if they will not be able to keep an appointment
- Be responsible for their actions if treatment is refused or if you do not follow the healthcare provider's instructions
- Make sure payment is made for non-covered services they receive
- Follow healthcare facility conduct rules and regulations
- Treat healthcare staff with respect
- Tell us if they have problems with any healthcare staff
- Use the emergency room only for real emergencies
- Notify their case manager if they have a change in information (address, phone number, etc.)
- Have a plan for emergencies and access this plan if necessary for their safety
- Report fraud, abuse and overpayment