

Member Rights and Responsibilities

Health Plan of Nevada commercial members have the following rights:

- To be treated with respect and dignity and every effort made to protect their privacy.
- To select a primary physician from HPNs extensive provider list including the right to refuse care from specific practitioners.
- To be provided the opportunity to voice complaints or appeals about the organization and/or the care provided and to pursue resolution of the grievance or appeal.
- To receive information about the plan, its services, its providers and practitioners and members' rights and responsibilities in a manner and format that is easily understood and in languages (other than English) that are commonly used in the service area.
- To participate with practitioners in the decision-making process regarding their health care, including the right to refuse treatment.
- To have a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- To have timely access to care and services, taking into account the urgency of their medical needs.
- To have direct access to women's health services for routine and preventive care.
- To have direct access to medically necessary specialist care, in conjunction with an approved treatment plan developed with the primary physician. Required authorizations should be submitted for an adequate number of direct access visits.
- To have access to emergency health care services in cases where "prudent layperson" acting reasonably, would believe that an emergency existed.
- To have adequate and timely services outside the network, if HPNs network is unable to provide necessary services covered under contract.
- To have a second opinion, at no cost, from a qualified health care professional within the network or arrangements made for you to obtain one outside the network.
- To formulate Advance Directives.
- To have access to their medical records in accordance with applicable state and federal laws, including the ability to request and receive a copy of medical records, and request that the medical records be amended or corrected, as specified in federal regulation.
- To have oral interpretation services available free of charge for all non-English languages.
- To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation, as specified in federal regulation on the use of restraint and seclusion.
- To make recommendations regarding the organization's members' rights and responsibilities policies.

Health Plan of Nevada commercial members have the following responsibilities:

- To know how HPNs Managed Care Program operates.
- To provide, to the extent possible, information that HPN and its providers need in order to provide the best care possible.
- To follow instructions and guidelines they have agreed to with those providing health care services.
- To maximize their health habits by understanding their health problems and participate in developing and following the health care plan and treatment goals that they, their physician and HPN have mutually agreed upon.
- To consult their primary physician and HPN before seeking non-emergency care in the service area. The member is urged to consult their physician and HPN when receiving urgently needed care while temporarily outside the HPN service area.
- To obtain written referral from their physician before going to a specialist.
- To obtain prior authorization from HPN and their physician for any routine or elective surgery, hospitalization or diagnostic procedures.
- To be on time for appointments and provide timely notification when canceling any appointment they cannot keep.
- To avoid knowingly spreading disease.
- To recognize the risks and limitations of medical care and the health care professional.
- To be aware of the health care provider's obligation to be reasonably efficient and equitable in providing care to other patients in the community.
- To show respect for other patients, health care providers and plan representatives.
- To abide by administrative requirements of HPN, health care providers and government health benefit programs.
- To report wrongdoing and fraud to appropriate resources or legal authorities.
- To know their medications. Members should keep a list of current medications to bring to appointments with providers.
- To address medication refill needs at the time of their office appointment. When the member obtains their last refill, they should notify the office that they will need refills at that time. They are asked not to wait until they are out of medication.
- To report all side effects of medications to their primary provider and to notify the primary provider if they stop taking medications for any reason.
- To ask questions during appointment times regarding physical complaints, medications, any side effects, etc.