

Your Healthcare Rights: Be Informed

The Patient's Bill of Rights took effect on September 23, 2010. Created as a means to end health insurance abusive and discriminatory practices, to introduce industry-wide guidelines, and to unify a complex and segmented system, it is implemented, protected, supervised and guaranteed by several Federal and State agencies.

Here is a list:

1. Protection from discrimination and unfair practices:

HIPAA (Health Insurance Portability and Accountability Act), ACA ("Obamacare"), and your Civil Rights protect you from discrimination or unfair treatment based on age, sex, race, color, place of origin, disability or religion. Patients have a right to considerate, respectful and non discriminatory care from their healthcare providers and health plan representatives.

2. Privacy and Confidentiality:

They are guaranteed under several laws. The Privacy Rule establishes who is legally authorized to review your records. HIPAA places stiff fines on offenses, and medical providers are obligated to provide their patients with a written notice detailing its implementation in their practice. The Patient Safety Act and Rule established a system for confidential and secure access to patients' medical records in order to ensure quality control and safety. Confidentiality is guaranteed during any discussion with a medical provider about your health information. Your rights also include setting limits on who may see your information, being informed of who was given your information and asking your providers to contact you only in a specific way.

3. Medical records:

Patients have the right to review, request a copy of your medical records, or have them forwarded to another medical provider. You can request your physician to amend, update or correct any incomplete, erroneous or inaccurate record.

4. Choice of Providers and Plans:

Access to and choice of appropriate high-quality healthcare providers is an essential right. It is your right to receive the care you need when you need it, including seeing a specialist. The ACA also allows patients to choose a PCP (Primary Care Physician, OB/GYN and pediatrician within their healthplan network without prior approval or authorization from another physician. If you are unhappy with your present choice, you may change to another provider. If your doctor leaves your network, you have the right to continuity of care, even out of network, with no penalty. Certain mental health conditions are guaranteed coverage.

5. Access to Emergency Services:

In cases of "life or limb at risk", or in case of injury, severe symptoms or serious illness, you have the right to seek and receive emergency services wherever and whenever, without the need of a prior authorization, outside of your insurance network and without financial penalty to you.

6. Participation in Treatment Decisions:

Your healthcare provider must present options, and include you, and any individual you designate, in any decision regarding your treatment. You may accept or refuse any treatment, surgery or medication. You may seek a second opinion with another professional.

You have the right to have an Advance Directive on file. If the patient cannot make his/her own decisions, documents such as Power-of-Attorney, Advanced Directive and Do Not Resuscitate forms should definitely be given to every healthcare provider the patient is receiving care from. Forms and information can be found on State government websites.

In California:

<http://www.sos.ca.gov/ahcdr/forms.htm>

<http://www.emsa.ca.gov/pubs/pdf/DNRForm.pdf>

<http://www.courts.ca.gov/forms.htm>

7. Dependants:

They can stay under a parent's insurance coverage until age 26.

In addition, children under the age of 19 may no longer be denied benefits or coverage based on a "pre-existing condition" (health issue that was present before the child applied for health insurance).

8. Information Disclosure:

You have the right to receive accurate information from your healthcare providers and insurance representatives. It must be easily understood, in the language or manner that you best understand. Assistance should be available if you need further explanations, to help you make the best informed decision. You may also request a written description or explanation of your condition.

9. Healthplan regulations:

- a. "Lifetime" limits on a policy are no longer allowed
- b. The retroactive cancellation of a policy is no longer allowed in case of a "honest" mistake on the part of the applicant
- c. Preventative services are to be provided to subscribers free of charge (except if plan is grandfathered)

10. Complaints and Appeals

The patient has the right to a fair, prompt and impartial review of any complaint they may have against a health provider, facility or healthcare representative. Contact the specific office, supervisor or entity for details on filing a complaint.

You have the right to file an appeal and ask for an Independent Review in case of a denial by your insurance plan of a service, treatment or payment. Steps on filing an appeal are detailed in your policy or can be found on their website.

More serious offenses should be reported to the appropriate governmental agencies. in CA: <http://www.cdph.ca.gov/services/Pages/ComplaintsCaliforniaHealthCare.aspx>

These are the major points you should be aware of to be an informed patient. It may also explain the significant number of forms your doctor will ask you to sign. Always make sure you read any document you sign, request a copy, and understand that compliance with the signature requirements are mandatory for your provider, and in your best interest.

More CA links:

http://www.takechargeca.ca.gov/campaigns/health_main.shtml

<http://www.opa.ca.gov/Pages/KnowYourRights.aspx>

<http://www.calpatientguide.org/>

<http://www.disabilityrightsca.org/about/opr.htm>

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