



POLICY AND PROCEDURE MANUAL

SUBJECT: Member Rights and Protections	ACCOUNTABILITY NMRE, NMRE Network Providers	Effective Date: August 26, 2015	Pages: 2
REQUIRED BY	BBA Section: PIHP Contract Section: Other: (listed under "References")	Last Review Date: July 15, 2019	Past Review Date: March 23, 2016
Policy: <input checked="" type="checkbox"/> Procedure: <input type="checkbox"/>	Review Cycle: Annual Author: NMRE Customer Services Specialist	Responsible Department: Customer Services	Reviewers: NMRE CEO

Definitions

Beneficiary: A person served by the publicly funded behavioral health and substance use disorder system or his/her representative. For the purposes of this policy, the terms "beneficiary" and "member" are used interchangeably.

Network Provider: Any provider that receives Medicaid funding directly or indirectly to order, refer, or render covered services as a result of the state's contract with the NMRE, its member CMHSPs, and the Substance Use Disorder provider panel.

Northern Michigan Regional Entity (NMRE): The PIHP for Region 2, the 21-counties located in Michigan's northern lower peninsula.

Purpose

The purpose is to ensure that everyone served by NMRE Network Providers is treated in a manner that protects his/her rights pursuant to 42 CFR 438.100, "Enrollee Rights." The NMRE will comply with any applicable federal and state laws that pertain to enrollee rights and ensure that its staff and Network Provider staff take those rights into account when furnishing services to a member.

Policy

The NMRE and its Network Providers will honor and respect member rights, as proscribed by federal and state regulation, including but not limited to:

- (1) The right to receive information in accordance with federal regulations;
- (2) The right to be treated with respect and with due consideration for his or her dignity and privacy;

- (3) The right to receive information on available treatment options and alternatives, presented in a manner appropriate to the individual's condition and ability to understand;
- (4) The right to participate in decisions regarding his or her health care, including the right to refuse treatment;
- (5) The right to be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation, as specified in other Federal regulations on the use of restraints and seclusion;
- (6) The right to request and receive a copy of their medical records, and request that they be amended or corrected as specified in regulation.

Each member will be free to exercise his/her rights; the exercise of those rights will not adversely affect the way the he/she is treated.

References

1. 42 CFR 438.100, "Enrollee Rights and Protections"
2. 42 CFR 438.206-210, "Access Standards"
3. 45 CFR Part 150, "CMS Enforcement in Group and Individual Insurance Markets"
4. 45 CFR Part 154, "Health Insurance Insurer Rate Increases: Disclosure and Review Requirements"
5. 45 CFR 164, "Security and Privacy"
6. 45 CFR, Part 80, "Nondiscrimination Under Programs Receiving Federal Assistance through the Department of Health and Human services Effectuation of Title VI of the Civil Rights Act of 1964"
7. 45 CFR Part 91, "Nondiscrimination on the Basis of Age in Programs or Activities Receiving Federal Financial Assistance from HHS"

Approval Signature



NMRE Chief Executive Officer

7/15/19

Date