

Physicians Integrated Medical Group (PIMG)
(415) 643-9188

Member Bill of Rights and Responsibilities

As a PIMG Member, you have the RIGHT to:

- Obtain all medically necessary care covered under your plan
- Receive considerate and courteous care, with respect for personal privacy and dignity.
- Receive information about all health services available to you, including a clear explanation of how to obtain them.
- Receive information about your rights and responsibilities.
- Receive information about your Health Plan and Medical Group, the services we offer you, the physicians and other practitioners contracted to care for you within the Medical Group, including their addresses and phone numbers. This can be done by calling, faxing, writing or in person.
- Select a Personal Physician and expect his/her team of health workers to provide or arrange for all the care that you need.
- Have reasonable access to appropriate medical services.
- Participate actively with your physician in decisions regarding your medical care. Your physician will consider your input in the proposed treatment plan. To the extent permitted by law, you also have the right to refuse treatment.
- Receive from your physician an understanding of your medical condition and any proposed appropriate or medically necessary treatment alternatives, including available success/ outcomes information, regardless of cost or benefit coverage, so you can make an informed decision before you receive treatment.
- Receive preventive health services.
- Know and understand your medical condition, treatment plan, expected outcome and the effects these have on your daily living.
- Have confidential treatment of any medical conditions.
- Have confidential health records, except when disclosure is required by law or permitted in writing by you. With adequate notice, you have the right to review your medical record with your Personal Physician.

- Communicate with and receive information from Member Services in a language that you can understand.
- Know about any transfer to another hospital, including information as to why the transfer is necessary and any alternatives available.
- Obtain a referral from your Personal Physician for a second opinion.
- Be fully informed about the Health Plan/Medical Group appeals and complaint procedure and understand how to use it without fear of interruption of health care.
- Voice complaints or appeals about the Health Plan or the care provided to you and present your appeal in person to the health plan or medical group if you choose to do so.
- Participate in establishing Public Policy of the health plan, as outlined in your Evidence of Coverage and Disclosure Form or Health Service Agreement.
- Request a copy of the criteria used to arrive at any medical decision, particularly if a denial letter is issued to you and any Medical Group Policy and Procedures affecting any aspect of your medical care. (Any practitioner, member and/or the public can obtain PIMG's Utilization Management criteria upon request)
- Request a form, to obtain a copy of the Quality Management Program, Quality Management Plan or the PIMG's progress in meeting its goals.
- Have a practitioner advocate on your behalf or advise you on medical care without any restrictions.
- Not be discriminated in any way or for any reason. The PIMG's provision of health services is not influenced by member race, ethnicity, national origin, religion, sex, age, mental or physical disability, sexual orientation, genetic information, or source of payment. The PIMG will accept for treatment any patient in any of the health care services that they provide under the terms on its contracts.
- Receive information about your Plan; chosen a medical group, its services, its practitioners and providers; contracted medical facilities and practitioners; and the member's rights and responsibilities.
- Prepare advance directives (defined by the Patient Self-Determination Act effective 11/5/90) and to self-determination in treatment plans.
- Be represented by parents, guardians, family members or other conservators for those who are unable to fully participate in their treatment decisions.
- Make recommendations regarding PIMG's member's rights and responsibilities policies.

- Receive information regarding the following, by calling directly to a PIMG's Customer Services staff person at 415-643-9188:
 - *Practitioners contracted with PIMG
 - *Addresses of practitioners that are contracted with PIMG
 - *Prior authorization, review rules or questions about the utilization process
 - *How to voice a complaint
 - *Primary care services, including points of access
 - *Specialty care and hospital service
 - *Care after normal office hours
 - *Emergency care, including PIMG's policy on when to directly access emergency care or use 911 services

(Any PIMG staff person will accept collect calls regarding utilization management issues during business hours when calling the above number)

As a PIMG Member, you have the RESPONSIBILITY to:

- Carefully read all health plan/PIMG materials immediately after you are enrolled so you understand how to use your benefits and how to minimize your out of pocket costs. Ask questions when necessary. You have the responsibility to follow the provisions of your health plan/PIMG membership as explained in the Evidence of Coverage and Disclosure Form or Health Service Agreement.
- Treat all practitioners and providers and their staff with courtesy and respect
- Maintain your good health and prevent illness by making positive health choices and seeking appropriate care when it is needed.
- Provide, to the extent possible, complete information that your physician, and/or the Plan need to provide appropriate care for you.
- Follow the treatment plans and instructions you and your physician have agreed to and consider the potential consequences if you refuse to comply with treatment plans or recommendations.
- Ask questions about your medical condition and make certain that you understand the explanations and instructions you are given.
- Make and keep medical appointments and inform the Plan physician ahead of time when you must cancel.
- Communicate openly with the Personal Physician you choose so you can develop a strong partnership based on trust and cooperation.

- Help the health plan to maintain accurate and current medical records by providing timely information regarding changes in address; family status and other health plan coverage.
- Notify the health plan or the PIMG as soon as possible if you are billed inappropriately or if you have any complaints.
- Select a Personal Physician for your newborn before birth, when possible, and notify the health plan as soon as you have made this selection.
- Treat all Health Plan and PIMG personnel respectfully and courteously as partners in good health care.
- Pay your dues, co-payments and charges for non-covered services on time.

Review/Revision History: First issued: November 1996
Prior revision: March 30th, 2006
Last revision: