



# LIBERTY Dental Plan Inc.

## Policies & Procedures: **MEMBER RIGHTS AND RESPONSIBILITIES**

DESKTOP       COMMERCIAL       MEDICAID       MEDICARE

<b>Responsible Department:</b> Quality Management	<b>Issue Date:</b> 09/17/02		
<b>Approved By:</b> Richard Goren, DDS Sr. VP, Chief Dental Officer 	<b>Revision Date:</b> 03-06-14 06-23-17	<b>Approval Date:</b> 03-23-03      01-07-10 12-21-04      01-05-11 04-01-05      01-12-12 12-05-06      12-27-12 11-01-07      12-13-13 10-01-08      12-09-14 01-02-09      12-11-15 12-16-16	
Richard Hague, DMD Dental Director 			

### **PURPOSE/SCOPE:**

LIBERTY Dental Plan (“LIBERTY”) has established a policy that confirms the members’ rights and responsibilities to receive coverage of benefits for dental services as identified in the Member Handbook/Evidence of Coverage Booklet and Schedule of Benefits.

### **POLICY:**

LIBERTY acknowledges that in order to provide access to quality care and service, the staff, network providers and members must acknowledge the existence of shared obligations based on the member’s rights and responsibilities.

### **PROCESS/PROCEDURE:**

LIBERTY carefully describes member rights and responsibilities in the Evidence of Coverage Booklet/Member Handbook and Provider Reference Guide and are made available online or by request.

The type of member rights and responsibilities include, but are not limited to:

The Member’s Rights:

- To be treated with respect, giving due consideration to the Member’s right to privacy and the need to maintain confidentiality of the Member’s medical and dental information;
- To be provided with information about the plan and its services, including covered services;
- To request a printed copy of the Member Handbook at least once per year or more frequently as determined necessary;

- To be able to choose their Primary Care Dentist in the LIBERTY's network within a reasonable distance from their place of residence from the Provider Directory List upon enrollment;
- To the freedom to change their Primary Care Dentist upon request for any reason and as frequently as needed. Instructions on this procedure are provided and outlined in the Member Handbook;
- To participate in decision making regarding their own dental care including the member's preference about future treatment decisions, and the right to refuse treatment;
  - Members under the age of 18 cannot receive or make decisions about their treatment without a parent or guardian's consent. This does not apply if emergency care is needed.
  - Emancipated minors may make their own decisions regarding dental care.
- To have access to the grievance and appeal system including the right to;
  - file a grievance about the organization, it's providers or the care received, either verbally or in writing

To request an appeal of any denial/adverse benefit determination, or notice of action, within applicable time frames as mandated by state or federal regulation

- To expect a resolution to their grievance or appeal within a reasonable amount of time but not to exceed mandated turnaround time frames
- To receive interpretation services in their preferred language at no cost;
- To have access to all medically necessary dental services provided in Federally Qualified Health Centers, Rural Health Clinics or Indian Health Service Facilities, and access to emergency dental services outside the Contractor's network pursuant to federal law;
- To request a State fair hearing, including information on the circumstances under which an expedited fair hearing is possible;
- To have access to, and where legally appropriate, receive copies of, amend, or correct their dental record;
- To be provided disenrollment requirements and limitations and to disenroll upon request;
- To receive written Member informing materials in alternative formats (including Braille, large size print, and audio format) upon request and in a timely fashion appropriate for the format being requested;
- To be provided information about the definitions of emergency care;
- To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation;
- To receive information on available treatment options and alternatives, presented in a manner appropriate to the their condition and ability to understand;
- Freedom to exercise these rights without adversely affecting how they are treated by LIBERTY, providers, or the State;
- Freedom from LIBERTY prohibiting a provider from advising on their behalf;
- To have access to Contractor's health education programs and outreach services in order to improve dental health;
- To request a second opinion, including from a specialist at no cost;
- To formulate advance directives

The Member's Responsibilities:

- To provide accurate and updated information to contracting dentists, dental office staff and LIBERTY administrative staff to provide care (to the extent possible);
- To not allow any other person to use their ID Card;
- To communicate changes in demographic or dependent information, or other changes that would effect eligibility;
- Notify LIBERTY of any other insurance coverage
- To respect and follow the policies and guidelines given by LIBERTY's contracting dentists, dental office staff and LIBERTY administrative staff with respect and courtesy;
- To cooperate with LIBERTY's contracting dentists in following a prescribed course of treatment; including instructions and oral health care recommendations/guidelines provided
- To actively participate in treatment decisions;
- To keep scheduled appointments or communicate with the dental office at least twenty-four (24) hours in advance to cancel an appointment;
- To communicate and provide feedback on their needs and expectations to their dental office and to LIBERTY  
To report any suspected provider fraud/abuse
- Be aware of and follow LIBERTY's guidelines in seeking dental care.

A list of member rights and responsibilities Member Services Department is available during regular business hours and after hours at LIBERTY's to assist with member's inquiries and complaints, assist in securing emergency dental treatment and transferring eligibility from one office to another.

**REFERENCE:**

<b>STATE</b>	<b>REGULATOR</b>	<b>CITE</b>
<b>Federal</b>	Department of Health and Human Services	<i>45 CFR Part 164</i>
<b>Federal</b>	Department of Health and Human Services	<i>42 CFR §438.100(b)(1-3)</i>