



**Health New England**

## **YOUR RIGHTS AS A HEALTH NEW ENGLAND MEMBER**

### **FULLY FUNDED PLANS ONLY**

February 2016

Dear Health New England Subscriber:

Each year, Health New England is required by state and federal laws and national accreditation standards to tell you about certain rights and services available to you as a member. In the following pages you will find this information:

- I. Health New England Location and Service Hours
- II. Health New England's In-Plan Providers
- III. Health New England's Policy to encourage open clinical dialogue between our providers and our members
- IV. Women's Health & Cancer Rights Act of 1998: Annual Notice of Rights
- V. Health New England's Quality Management Program
- VI. Member Rights and Responsibilities
- VII. Inquiries and Grievances
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- IX. Race, Ethnicity and Language Data Collected by Health New England
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- XIII. How to get information about your Plan

Please review this information. If you have any questions, please call Member Services at (413) 787-4004 or (800) 310-2835, Monday through Friday from 8 a.m. to 6 p.m. We're here to help!

Sincerely,

John Florek  
Member Services Manager

## INTERPRETER AND TRANSLATION SERVICES

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This is important information. You can call Health New England Member Services to have this information read to you. We can answer your questions in English or Spanish. For other languages, Health New England has language interpreter services available. Our hours are Monday through Friday from 8:00 AM to 6:00 PM. Translation services are FREE for our members.

Esta es información importante. Puede llamar a Servicios de Atención al Miembro de Health New England para solicitar la lectura de esta información. Podemos responder a sus preguntas en inglés o español. Para otros idiomas, Health New England cuenta con servicios disponibles de intérpretes. Nuestro horario de atención es de lunes a viernes, de 8:00 a. m. a 6:00 p. m. Los servicios de traducción son GRATUITOS para nuestros miembros.

Esta informação é importante. Pode contactar os Serviços de Membros Health New England para que esta informação lhe seja lida. Podemos responder às suas perguntas em inglês ou espanhol. Para outros idiomas, a Health New England dispõe de serviços de interpretação linguística. O nosso horário é de segunda a sexta-feira, das 8h00 às 18h00. Os serviços de tradução são GRATUITOS para os nossos membros.

Informazioni importanti. Per richiedere la lettura di tali informazioni può contattare il servizio Health New England Member Services. Possiamo rispondere alle Sue domande in inglese o spagnolo. Per le altre lingue, Health New England dispone di un servizio di interpretariato. I nostri uffici sono aperti da lunedì a venerdì, dalle 8:00 alle 18:00. I servizi di traduzione sono GRATUITI per i nostri membri.

Это важная информация. Для получения информации Вы можете позвонить в Службу сервиса для членов Health New England. Мы можем ответить на Ваши вопросы на английском или испанском языках. Для других языков Health New England предоставляет услуги устного переводчика. Мы работаем с понедельника по пятницу с 8:00 до 18:00. Услуги перевода для наших членов БЕСПЛАТНЫ.

Sa se enfòmasyon ki enpòtan. Ou kapab rele Sèvis Manm Health New England pou fè yo li enfòmasyon sa yo pou ou. Nou kapab reponn kesyon ou yo nan lang Anglè oswa Panyòl. Pou lòt lang yo, Health New England gen sèvis entèprèt lang ki disponib. Orè nou se lendi jiska vandredi depi 8:00AM jiska 6:00PM. Sèvis tradiksyon an GRATIS pou manm nou yo.

Σημαντικές πληροφορίες. Μπορείτε να καλέσετε το τμήμα εξυπηρέτησης πελατών της Health New England για να σας διαβάσουν τις πληροφορίες. Μπορούμε να απαντήσουμε στις ερωτήσεις σας στα Αγγλικά ή τα Ισπανικά. Για άλλες γλώσσες, η Health New England διαθέτει υπηρεσίες διερμηνείας. Οι ώρες λειτουργίας μας είναι από Δευτέρα έως Παρασκευή, 8:00 π.μ. έως 6:00 μ.μ. Οι μεταφραστικές υπηρεσίες είναι ΔΩΡΕΑΝ για τα μέλη μας.

Ce document contient des informations importantes. Vous pouvez appeler notre équipe Health New England Member Services afin que ce document vous soit lu. Nous pouvons répondre à vos questions en anglais ou en espagnol. Pour les autres langues, Health New England fait appel à des services d'interprétation. Nous sommes ouverts du lundi au vendredi, de 8 h à 18 h. Les prestations de traduction sont GRATUITES pour nos membres.

នេះគឺជាព័ត៌មានសំខាន់ៗ។ លោកអ្នកអាចហៅទូរស័ព្ទទៅ HNE Member Services ដើម្បីឲ្យគេអានព័ត៌មាននេះជូនលោកអ្នក។ យើងអាចឆ្លើយសំណួររបស់អ្នកជាភាសាអង់គ្លេស ឬភាសាអេស៉្បាញ៉ុល។ សម្រាប់ភាសាផ្សេងទៀត, HNE មានសេវាអ្នកបកប្រែភាសាជូនអ្នក។ ម៉ោងធ្វើការរបស់យើងគឺពីថ្ងៃចន្ទ ដល់ថ្ងៃសុក្រ ពីម៉ោង 8:00 ព្រឹកដល់ម៉ោង 6:00 ល្ងាច។ សេវាបកប្រែមិនគិតថ្លៃទេសម្រាប់សមាជិករបស់យើង។

ນີ້ແມ່ນຂໍ້ມູນສໍາຄັນ. ທ່ານສາມາດໂທຫາ ຝ່າຍ HNE Member Services ເພື່ອໃຫ້ອ່ານຂໍ້ມູນນີ້ແກ່ທ່ານຟັງ. ພວກເຮົາສາມາດຕອບຄໍາຖາມຂອງທ່ານເປັນພາສາອັງກິດ ຫລືພາສາສະເປນ. ສໍາລັບພາສາອື່ນ, HNE ມີບໍລິການລ່າມແປພາສາໄວ້ໃຫ້ທ່ານ. ຊົ່ວໂມງເຮັດວຽກຂອງພວກເຮົາແມ່ນ ວັນຈັນເຖິງວັນສຸກ ແຕ່ 8:00 ໂມງເຊົ້າ ເຖິງ 6:00 ໂມງແລງ. ການບໍລິການແປພາສາສໍາລັບສະມາຊິກຂອງພວກເຮົາແມ່ນຟຣີ.

Đây là thông tin quan trọng. Quý vị có thể gọi cho Health New England Member Services để được đọc thông tin này cho quý vị. Chúng tôi có thể trả lời các câu hỏi của quý vị bằng tiếng Anh hoặc tiếng Tây Ban Nha. Đối với các ngôn ngữ khác, Health New England hiện có dịch vụ thông dịch viên. Giờ làm việc của chúng tôi từ thứ Hai đến thứ Sáu từ 8:00 giờ sáng đến 6:00 giờ chiều. Các dịch vụ dịch thuật MIỄN PHÍ cho hội viên.

这是重要信息。您可致电 HNE Member Services，让他人为您阅读本信息。我们可以英语或西班牙语回答您的问题。对于其他语言，HNE 可提供语言翻译服务。我们的工作时间是周一至周五，上午 8:00 至下午 6:00。翻译服务免费为我们的会员提供。

本資訊十分重要。您可以致電 HNE Member Services，要求為您閱讀該資訊。我們可以用英語或西班牙語回答您的問題。對於其他語言，HNE 可提供口譯服務。我們的工作時間是星期一至星期五，上午 8:00 至下午 6:00。我們為會員提供免費的翻譯服務。

هذه معلومات مهمة. يمكنك الاتصال بخدمات أعضاء Health New England لتتم قراءة هذه المعلومات لك. يمكننا الإجابة عن أسئلتك باللغة الإنجليزية أو الإسبانية. وبالنسبة للغات الأخرى، فإن Health New England توفر خدمات المترجم الفوري. ساعات العمل من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا إلى 6:00 مساءً. خدمات الترجمة مجانية لأعضائنا.

### *I. Health New England Location and Service Hours*

#### For Customer Service

- Call Health New England Member Services. We're here to help! (413) 787-4004 or (800) 310-2835, Monday – Friday, 8 a.m. – 6 p.m.
- Visit us in person at: One Monarch Place, Springfield, MA. Our office hours are Monday – Friday, 9 a.m. – 5 p.m.

#### For Medical Care

- Contact your PCP's office at the number listed in the Health New England Provider Directory. We require all PCPs to provide coverage 24 hours a day, 7 days a week.
- Please talk to your PCP's staff to find out their office hours and how they handle care after normal business hours.

#### For Emergency Care

- Go to the nearest emergency room or dial 911.

#### For Care Coordination

- Call Health New England Health Services (800) 842-4464 ext. 5027, Monday – Friday, 8 a.m. – 5 p.m.
- Our clinical case managers work directly with your providers to coordinate the care you need.

#### For Utilization Management Decisions

- Contact Health New England Member Services. The toll-free number and access hours are listed above.
- Member Services can answer general inquiries about utilization management (UM) decisions. For example, Member Services can confirm whether a prior approval request has been approved for coverage.
- If you need assistance directly from utilization review staff, Member Services will transfer your call to the appropriate UM department. For example, you may speak with UM review staff in Health Services (Medical and Behavioral Health) or in Pharmacy Services.
- UM review staff are available at least nine hours a day during normal business hours, Monday – Friday, 8 a.m. – 5 p.m.

### *II. Health New England's In Plan Providers*

In-Plan Providers are part of our network. There are three ways to find In-Plan Providers:

- You can check the Plan Provider Directory.
- You can call Member Services.
- You can check [healthnewengland.org](http://healthnewengland.org).

### *III. It is Health New England's Policy:*

- to encourage open clinical dialogue between our providers and our members. Our providers have always been, and continue to be, free to communicate with members regarding the treatment options available to them, including medication treatment options, regardless of benefit coverage limitations; and,
- that decisions regarding patient care are made based upon the appropriateness of care and the services rendered. This process reflects the need to avoid under utilization of necessary services. In the event that a service is denied, the decision is based upon the appropriateness of the service within the scope of covered benefits. Health New England does not offer incentives to encourage denials, nor is compensation tied to denials.

### *IV. Women's Health and Cancer Rights Act of 1998: Annual Notice of Rights*

If your plan covers mastectomies, and if you are receiving benefits under the plan in connection with a mastectomy, you have the right to receive coverage of:

- Reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
- Prostheses and treatment of physical complications at all stages of the mastectomy, including lymphedemas.

We provide coverage based on what you and your attending physician determine to be appropriate for you. If your plan requires deductibles, coinsurance, or copayments for other benefits under the plan, these requirements may apply to the above procedures to the same extent that they apply to other benefits.

### *V. Health New England's Quality Management Program*

Health New England has a written Quality Management Program Description. This document provides detailed information about the program and contains the annual work plan, or schedule of events. It also explains how the program is evaluated. If you would like a copy of this information, or results of quality improvement activities, please contact Pat Scheer, Health New England's Director of Quality Operations, at (413) 233-3435.

## *VI. Member Rights and Responsibilities*

Health New England members have specific rights and responsibilities that form the basis of quality health care. We are pleased to share our Member Rights and Responsibilities Statement, which tells you what you can expect of us and what we ask of you.

### **Member Rights**

- As a Member of Health New England, you have certain rights. These are to:
- Receive information on Health New England, its services, In-Plan Providers, policies, procedures, and your rights and responsibilities. We will not release information that by law may not be given to Members or any third party. We will not disclose privileged information about In-Plan Providers.
- Be treated with respect and with recognition of your dignity and right to privacy.
- Participate in health care decisions with your doctor or other health care provider.
- Expect that your doctor or other health care provider will fully and openly discuss appropriate, medically necessary treatment options, regardless of the cost or benefit coverage. It does not mean that we cover all treatment options. If you are unsure about coverage, please contact Member Services.
- Contact us with a grievance or complaint about Health New England or an In-Plan Provider.
- Refuse a treatment, drug, or other procedure recommended by your doctor or other health care provider as the law allows. Providers should tell you about any potential medical effects of refusing treatment.
- Select a Primary Care Physician (PCP) who is accepting new patients. For a list of PCPs, search the Provider Directory on [healthnewengland.org](http://healthnewengland.org) or call Member Services.
- Change your PCP. You may choose any In-Plan PCP, except those who have notified us that they no longer accept new patients.
- Have access, during Health New England's business hours, to Member Services Representatives who can answer your questions and help resolve problems.
- Expect that your medical records and information on your relationship with your doctor will remain confidential, in accordance with state and federal law and Health New England policies.

- Make recommendations regarding our member rights and responsibilities policies.

### **Member Responsibilities**

As a Member of Health New England, you have certain responsibilities. These are to:

- Provide, as much as possible, the information your providers need to care for you. This includes information on your present and past medical conditions, as you understand them, before and during any course of treatment.
- Follow the treatment plans and instructions for care that you have agreed on with your provider.
- Read Health New England materials to become familiar with your benefits and services. If you have any questions, please call Member Services.
- Follow all Health New England policies and procedures.
- Treat providers and Health New England staff with the respect and courtesy that you would expect for yourself.
- Arrive on time for appointments or give proper notice if you must cancel or will be late.
- Understand your health problems, which is an important factor in your treatment, and participate in developing mutually agreed upon treatment goals to the extent possible. If you do not understand your illness or treatment, talk it over with your doctor.
- Participate in decision-making on your health care.
- Inform us of any other insurance coverage you may have. This helps us process claims and work with other payers.
- Notify us of status changes (such as a new address) that could affect your eligibility for coverage.
- Help Health New England and In-Plan Providers get prior medical records as needed. You agree that we may obtain and use any of your medical records and other information needed to administer the plan.
- Consider the potential effects if you do not follow your provider's advice. When a service recommended by an In-Plan Doctor is covered, you may choose to decline it for personal reasons. For example, you may prefer to get care from Out-of-Plan providers rather than In-Plan Providers. In these cases, we may not cover substitute or alternate care that you prefer.

## *VII. Inquiries and Grievances*

If you are unhappy with Health New England or any of the care you receive you should call us. You can ask us to reconsider:

- An action we have taken or not taken
- A Health New England policy
- The absence of a policy you think we should have

These requests are called inquiries. We will respond to your inquiry and ask you if you are satisfied with our response. If you are not satisfied with our response, we will offer to start a review of your complaint through the internal grievance process. Grievances can be oral or written. Procedures and timelines for the internal grievance process are in your Explanation of Coverage (EOC). Our Complaints and Appeals Coordinators will help you with the grievance process.

If we have denied your clinical appeal and you do not agree with our decision, you can ask for an external appeal. The External Appeal Process is outlined in the next section.

## *VIII. External Appeal Process*

If Health New England has denied your claim or request for service, you may have the right to appeal. In addition, for most members, an external appeal process may be available from the Massachusetts Health Policy Commission, Office of Patient Protection (OPP).

If we have denied your clinical appeal and issued a Final Adverse Determination, you can ask for a non-Health New England, external appeal. To do so, you need to file a written request with the OPP. We will provide you with the necessary filing forms when we notify you of our final decision. You can also obtain the necessary forms by calling OPP or accessing its Web site. The fee for filing an appeal is \$25. This fee may be waived by OPP if it determines that the payment of the fee would result in an extreme financial hardship to the Member. Information on contacting OPP is at the end of this section. You must submit the request within four months after you receive Health New England's final decision on your appeal.

The OPP will screen appeal requests. The OPP screening determines whether the request complies with OPP's requirements for external review requests (such as the \$25 filing fee), whether the request involves a service or benefit that has been explicitly excluded from coverage, and whether the request is the result of a final Adverse Determination. Requests that pass the screening are sent to an independent

review panel chosen by OPP. If the service or treatment you are requesting is a Covered Benefit, the appeal panel will decide if it is Medically Necessary. The panel will notify you and Health New England of its decision within 60 business days of receipt of the request for review, unless it determines that it needs additional time. The panel may extend the time by an additional 15 business days. Your doctor can ask the panel to decide more quickly (an expedited review). If the panel agrees, it will decide within four business days. The decision of the review panel is final and binding. If the subject of the external review involves the termination of ongoing services, you may ask the external review panel to continue coverage for the terminated service while the review is pending. Any such request must be made before the end of the second business day following receipt of the final adverse determination. The review panel may allow your request if it determines that substantial harm to your health may result without such continuation or for such other good cause as the review panel will determine. Any such continuation of coverage will be at Health New England's expense regardless of the final external review decision.

### **How to contact the Office of Patient Protection:**

**Toll-free telephone: (800) 436-7757**

**Website: [mass.gov/hpc/opp/](http://mass.gov/hpc/opp/)**

**Email: [HPC-OPP@state.ma.us](mailto:HPC-OPP@state.ma.us)**

**Fax: (617) 624-5046**

**Address:**

**Health Policy Commission  
Office of Patient Protection  
50 Milk Street, 8<sup>th</sup> Floor  
Boston MA 02109**

### **Final Adverse Determinations**

Remember, an external appeal is only available following a clinical appeal that is denied by Health New England. This is called a "Final Adverse Determination." An "adverse determination" is a decision by Health New England, based upon a review of information provided, to deny, reduce, modify or terminate health care services for failure to meet the requirements of coverage based on medical necessity, appropriateness of health care setting and level of care, or effectiveness. When the Health New England formal internal grievance or appeal process is completed for an "adverse determination," it becomes a "final" adverse determination.

## *IX. Race, Ethnicity and Language Data Collected by Health New England*

The Commonwealth of MA has established statewide goals for improving health care quality and reducing racial and ethnic disparities in health care. We want

to do our part to remove any barriers to fair and unbiased treatment for all of our members. To help up do this, we collect information about your race and ethnic background. Using this information we may be able to identify possible issues that affect the care or treatment you receive. We will then be able to work with our provider community to address any issues.

The information we collect is designed for the purpose of data collection. It will not be used for determining eligibility, rating or claim payment. We keep this information confidential according to our policies and state and federal law. These policies are outlined in Health New England's Notice of Privacy Practices, located on our website at [healthnewengland.org](http://healthnewengland.org).

#### *X. Health New England Case Management*

Registered Nurses in Health New England's Health Services Department provide case management. Our nurses work with you and your physician to help you navigate the complex health care delivery system. Our primary goal is to restore you to your highest possible level of function. This process is known as Case Management.

#### **What is Case Management?**

At Health New England, our Case Managers:

- Identify patients with complicated illnesses, multiple risk factors, and/or higher than average use of services
- Assess the opportunities to coordinate, manage, and monitor the total care of a patient
- Identify and eliminate barriers to ensure that you get the best care available

The Case Manager is like a "coach" for the patient. We ensure optimal communication between all members of the health care team. Working closely with your physician, your Case Manager will:

- Explain your condition and answer your questions
- Help you navigate the health care system
- Develop a treatment plan for your care

#### **Who is a candidate for Case Management?**

Any member of Health New England can be a candidate for Case Management. A member may be identified:

- By your physician
- By referral from an inpatient hospital stay
- By referral from the Disease Management or Utilization Management Team

- By referral from Health New England's health information line
- At your request

If you are facing a major illness, a complex diagnosis, or a chronic medical condition you will certainly benefit from Case Management services.

#### **How can we help?**

The Case Managers at Health New England are here for you. You can call us when you or a member of your family is facing a difficult or complex medical situation. Please call (800) 310-2835, and ask a Member Services Associate to connect you with a Case Manager. The Case Management Program is available Monday through Friday from 8 a.m. to 5 p.m. We look forward to your call.

#### *XI. Health New England Information Line*

Health New England provides a Health Information Line that is staffed by licensed nurses and clinicians. The Health New England Nurse Line is available by telephone (24 hours a day) and through email (response within 24 hours). Interpretation services are available if you call into our Nurse Line by telephone. Using this service, you can become well informed about wellness and prevention and make better use of covered services.

The Health new England Nurse Line provides access to resources for answers to a broad range of health related questions. For example, you can get:

- Advice about a sick child or family member
- Answers to medication questions, such as advice on how much medicine to give to a sick child
- Answers to questions about your health
- Help in deciding what level of care is most appropriate for your condition
- Help in deciding whether and where to go to seek care
- Help on how to apply self care prior to a visit
- Information about pregnancy

#### **To call the Health New England Nurse Line:**

- Call (413) 787-4000 or toll free (800) 842-4464, and choose option 2 (member covered by Health New England), and then option 5 (Nurse Line).

An experienced nurse will listen carefully to your concerns and give you information to help you choose the care that's right for you.

**To email the Health New England Nurse Line:**

- Enter the Health New England Secure Messaging Center at: <https://hne-mail.com>. (If you have not used our secure messaging, you will need to register your email and choose a password.)
- Enter your email address and password.
- Click on the “Compose” tab
- Enter your Health New England ID number in the subject line (required for eligibility verification and response)
- Send your Health Information Line question to: [nurseline@hne.com](mailto:nurseline@hne.com).

An experienced nurse will respond to your question within 24 hours.

*XII. Your Rights under the Massachusetts Mental Health Parity Laws and the Federal Mental Health Parity and Addiction Equity Act (MHPAEA)*

You may have rights under state and federal mental health parity laws. Both laws say that health plans must cover treatment for mental health and substance use disorders in the same way that they cover treatment for medical conditions. This means that copays, coinsurance and deductibles, for mental health conditions must be the same as those for medical conditions. Also, mental health office visit copayments must not be greater than primary care visits. The methods we use to review coverage for mental health or substance use disorder benefits are comparable to those we use to review medical benefits. Clinical standards may permit a difference in how benefits are reviewed.

If you think Health New England is not covering treatment for mental health and substance use disorders in the same way that we cover treatment for medical conditions, you may file a complaint with the Division of Insurance (DOI) Consumer Services Section.

You may file a written complaint by using the DOI’s Insurance Complaint Form. You may request a copy of the form by phone or by mail. You also can find the form on the DOI’s webpage at:

<http://www.mass.gov/ocabr/insurance/consumer-safety/file-a-complaint/>

You may also submit a complaint by telephone by calling (877) 563-4467 or (617) 521-7794.

If you submit a verbal complaint, you must follow up in writing. You must include the following information on the Insurance Complaint Form:

1. Your name and address;
2. The nature of your complaint;
3. Your signature authorizing the release of any information to help the DOI with its review of the complaint.

*A parity complaint is **not** the same as an appeal under your Plan. You may still need to file an appeal with Health New England. Filing an appeal with us may be necessary to protect your right to continued coverage of treatment while you wait for an appeal decision. Follow the appeal procedures outlined in your Explanation of Coverage for more information about filing an appeal.*

*XIII. How to Get Information about Your Plan*

At Health New England, we continually review the coverage that we offer. We work with doctors, pharmacists, and other clinical professionals to compare emerging medical technology with the services we already cover. We also look for ways to improve and simplify how we administer covered services. As a result, from time to time we provide updates to your coverage, and we notify you, your employer, and our providers of these changes.

To obtain an updated copy of your Explanation of Coverage (EOC) or for the latest coverage information about your Plan, Health New England’s contracted providers, or specific information about covered services, please call Member Services at (413) 787-4004 or (800) 310-2835, Monday through Friday from 8 a.m. to 6 p.m. How can we help!