

Questions About Your Health Plan Enrollment

If you have questions, complaints or concerns about your health care or your health care provider, there are things you can do.

1. You can call or write a letter to your health plan about your complaint or concern. Often, they can help you immediately. If you are not satisfied, you have the right to file a grievance. Be sure to read your health plan's member handbook for more instructions.
2. You can also write or call the Michigan Department of Health and Human Services (MDHHS) Beneficiary Helpline about your questions, complaints or concerns. You can request a change in health plans, ask for a medical exception, a For-Cause Disenrollment or a Beneficiary Complaint form.

You can appeal a health plan decision you do not agree with by sending a written request to:

Michigan Department of Health
and Human Services
Medical Services Administration
Beneficiary Helpline
PO Box 30470
Lansing, MI 48909-9753
or call: 1-800-642-3195

You can take any of these actions at any time.

Reporting Medical Beneficiary Fraud

You may be prosecuted for fraud if you:

- Withhold information on purpose or give false information when applying for health care coverage or other medical assistance programs, or
- Do not report changes that affect your eligibility to your MDHHS specialist.

If you are found guilty under Federal law, you can be fined as much as \$10,000 or can be sent to jail for up to a year or both.

You can also be prosecuted for fraud under State law. If you are found guilty, you can be sent to jail, fined and ordered to repay the State monies paid on your behalf for health care. And if you are convicted of a felony under the State law, your jail sentence may be up to four years.

Report cases of suspected fraud to the Michigan Department of Health and Human Services (MDHHS) Office of the Inspector General by calling 1-800-222-8558. You do not have to give your name.

Reporting Medicaid or Healthy Michigan Plan Provider Fraud

A health care provider who is enrolled in the Medicaid or Healthy Michigan Plan program is also subject to Federal and State penalties for Medicaid fraud. Report any provider you suspect of billing for a service he or she did not perform or providing a service that is not needed.

Report suspected provider fraud to:

Office of Health Services Inspector General
PO Box 30062
Lansing, MI 48909
or call the 24-hour hotline:
1-855-MIFRAUD (1-855-643-7283)

Or visit the website at www.michigan.gov/fraud
You do not have to give your name.

For questions and/or problems, or help to translate, call the Beneficiary Help Line at 1-800-642-3195 (TTY 1-866-501-5656).
Spanish: Si necesita ayuda para traducir o entender este texto, por favor llame al telefono 1-800-642-3195 (TTY 1-866-501-5656)
Arabic: 1-800-642-3195 (TTY 1-866-501-5656)

إذا كان لديكم أي سؤال، يرجى الإتصال بخط المساعدة على الرقم المجاني ١-٨٠٠-٦٤٢-٣١٩٥



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Your Rights and Responsibilities



If you receive Medicaid or the Healthy Michigan Plan and belong to a health plan

Eligible for Medicaid or Healthy Michigan Plan



When you get Medicaid or the Healthy Michigan Plan, you are receiving health care benefits from the State of Michigan.

It is important to know what your rights and responsibilities are for these programs.

You need to know these things to be sure you receive the best possible care and treatment.

Know the Process...

1. If you are found eligible for Medicaid or Healthy Michigan Plan, you will receive information and forms to fill out from MICHIGAN ENROLLS. This information will tell you how to sign up for a health plan.
2. You must choose a health plan that is listed in your area. If you have a serious medical condition under active treatment with a doctor who is not in a health plan, you may not be required to join a health plan. You should contact MICHIGAN ENROLLS with questions you have about this process.
3. You need to choose a primary care provider (PCP), like a doctor, who works with your health plan. If you do not choose, one will be assigned to you.
4. Complete the enrollment information and mail it to MICHIGAN ENROLLS, or call MICHIGAN ENROLLS at 1-888-367-6557, if you have questions.
5. You will receive a card and more information from the health plan you have chosen.

You Have the Right to:

- Be treated with respect.
- Receive quality health care.
- Be seen by a primary provider who will arrange the care you need.
- Get all the facts from your primary provider about your health and treatment.
- Know about all treatments even if they are not covered by Medicaid or Healthy Michigan Plan.
- Refuse treatment.
- A second medical opinion.
- Be told what services are covered by Medicaid.
- Know if a co-payment is required.
- Know how your health plan works and the services available.
- Know the names and backgrounds of your health care providers.
- Choose your primary care provider.
- Change your primary care provider by following the rules of the health plan.
- Change plans for any reason during the first 90 days of enrollment.
- Change plans during a certain time of the year.
- Request a disenrollment form to change your health plan if you have “good cause.”
- Get help with any special needs you may have.
- Get help with any special language needs you may have.
- Tell your primary care provider how you wish to be treated if you ever become too ill to decide for yourself.
- Be told in writing when and why benefits are being reduced or stopped.
- Have your medical records kept confidential, consistent with applicable law.
- Get a copy of your medical records, consistent with applicable law.
- Voice your concern about the service or care you receive.
- Contact your health plan with any questions or complaints that you may have.
- Use the health plan’s grievance procedure to resolve problems.
- Contact the Michigan Department of Health and Human Services with any questions or complaints that you may have.

- Appeal most denials or reductions of Medicaid or Healthy Michigan Plan eligibility or services.
- Help with transportation if you don’t have a way to get to and from a doctor’s office or other medical service.

You Have the Responsibility to:

- Show your health plan and mihealth card to all providers before receiving services.
- Never let anyone use your cards.
- Choose a primary care provider. Then contact and make an appointment with the provider you have chosen.
- Make appointments for routine checkups and vaccinations (shots).
- Keep your appointments.
- Provide complete information about your past medical history.
- Provide complete information about current medical problems.
- Ask questions about your care.
- Follow your provider’s medical advice.
- Respect the rights of other patients and health plan employees.
- Use emergency room services only when you believe an injury or illness could result in lasting injury or death.
- Notify your primary care provider if emergency treatment was necessary and make an appointment for follow-up care if needed.
- Make prompt payment for services not covered by Medicaid or Healthy Michigan Plan.
- Report changes that may affect your coverage to the health plan and the local MDHHS office. This could be an address change, birth of a child, death of a family member, marriage, or divorce.
- Promptly apply for Medicare or other insurance when you are eligible.
- Report other insurance benefits you have to the Beneficiary Helpline 1-800-642-3195.