

Member Rights and Responsibilities

You have the right to:

- Receive information about Community Health Group, its services, its doctors and other providers.
- Receive information about your rights and responsibilities as a Community Health Group member.
- Be treated with respect and dignity.
- Privacy.
- Participate with your doctor in decision making about your health care.
- An open and honest discussion of your appropriate or medically necessary treatment options regardless of cost or health plan benefit coverage.
- Complain about Community Health Group or the care you receive.
- Appeal when you don't agree with a decision Community Health Group has made.
- Prepare an Advance Health Care Directive (a document that may authorize another person to make health care decisions for a patient when the patient is no longer able to make decisions for himself or herself).
- Ask someone to explain or translate if you don't understand something that is said or written.
- Have your medical records kept private. All of your personal and medical information is kept confidential. All information is stored and handled in ways that ensure its security and privacy in all settings.

We do not share information from your medical record without your written authorization except as may be required or allowed by law, for example:

- When a regulatory department of the State of California requests information that is directly related to claims paid/payable; tort liability; member complaints/grievances filed directly with the department; or audits and investigations.
- When those providing care to you need to share information that is directly related to that care (i.e., for purposes of diagnosis or treatment).
- When we must respond to a court order, subpoena or order from an arbitrator.

With these exceptions in mind, you can choose what information can be given to someone else: all, part or none. Your written permission to share your medical information must include certain elements, including but not limited to your signature, the date, who may receive the information, what information can be released and how long your authorization is in effect.


When new members join our health plan, we may ask them to sign a consent form which allows us to release medical information for *routine operations*. Routine operations are the activities that we need to monitor quality of care and to coordinate care with the member's doctors and other health care providers. A special consent form, signed by the member, is required prior to releasing any additional sensitive medical information. Personal health information is never shared with employers or anyone else without the member's specific consent.

Sometimes, your doctor or Community Health Group may give medical or personal information about you to others, including your employer, in a way that does not identify you. When this happens, we are careful to make sure your privacy is protected so that no one can tell that the information is about you. Usually this happens when Community Health Group or a doctor is working to measure and improve the quality of care you and other patients receive.

A statement describing our policies and procedures for preserving the confidentiality of medical records is available and will be furnished to the member upon request.

Some Special Rights You Have as a Medi-Cal Member

You have the right to:

- 
- Get family planning and counseling services from any qualified Medi-Cal provider within or outside Community Health Group's network of contracted providers.
 - Access sexually-transmitted disease (STD) services through Community Health Group's network of contracted providers, as well as through local health department clinics, family planning clinics, or other community STD service providers.
 - Access confidential HIV counseling and testing services through Community Health Group's provider network and through out-of-network local health department and family planning providers.
 - Access services at Federally Qualified Health Centers. American Indian members have the right to access services at Indian Health Service facilities.
 - Request a fair hearing from the California Department of Health Services.

Member Responsibilities

You have the responsibility to:

- Give needed information to Community Health Group, its doctors and other providers so that they can care for you.
- Follow the plans and care instructions that you have agreed to with your doctor and others who provide care to you.
- Take your member I.D. card(s) with you when getting medical care. If you have other insurance, like Medicare, take that card, too.
- Know your doctor's name.
- Remember what your doctor tells you about your health problem.
- Ask questions if you don't understand what you are told.
- Keep follow-up visits with your doctor.
- Tell your doctor if you don't want to follow a treatment plan.
- Be on time for appointments or cancel appointments at least one business day ahead of time.
- Go with your children who are under age 18 when they are getting medical care. You can sign a form that allows the child to be treated without you there.

Services that Do Not Require Prior Authorization

The following services apply to **physicians who contract directly with CHG**. These services do not require prior authorization **when obtained from providers who are in CHG’s network**. However, if the patient is under the age of 21 and has a CCS-qualifying diagnosis, contact CHG’s Health Care Services Department. We will coordinate care with the CCS Program. Physicians who are participating through an IPA should follow their IPA referral guidelines.

Table I – All Lines of Business

Codes	Description
11975, 11976	Insertion or removal of Norplant® device
* 19100, 88170, 76095	Stereotactic breast biopsy
* 56420	I & D of Bartholin’s cyst or abscess
56501	Trichloroacetic acid/cryotherapy for vulvar warts
56515	Excision of large vulvar and perirectal condyloma
57452	Vulvar colposcopy
57452 – 57454	Cervical colposcopy with & without biopsy
* 57460	LEEP
57511	Cryocautery of cervix, initial or repeat
57061	Destruction of vaginal lesion(s); simple, any method
58300, 58301	IUD insertion and removal
59025	Fetal non-stress test (NST)
59400, 80055, 76805(x1), Z1032, Z1034(x8), Z1036(x1)-Z1038(x1), 301(x24), or global code 59400	Basic obstetrical care per ACOG guidelines
* 59820	Treatment of missed abortion, completed surgically; 1st trimester
80055, 81025	Pregnancy testing and counseling
82143	AFI
86359-86361	T-cell
86592	Syphilis Test
86803	Hepatitis C Antibody
87528-87533	Herpes
87534-87539	HIV
86311, 86689, 86701 – 86703, 99202, 99203	Screening, testing, and counseling of at-risk individuals for HIV and referral for treatment
88150 – 88155	PAP
87485-87492	Chlamydia
87590-87592	Neisseria gonorrhoea
88141-88167	Cytopathology
88300-88309	Level I-Level VI surgical pathology; biopsy procedures
99201-99204, 99242, 99243	History and physical examination – OB/GYN
99211 – 99214	Follow-up care visits for OB/GYN services
99215 ----->	Requires additional documentation (E&M codes)
99201 – 99204	Diagnosis and treatment of STDs if medically indicated
99201 – 99204	Provision of contraceptive pills/devices/supplies
99401 – 99404	Health education (including education on breast feeding) and counseling necessary to make informed choices and understand contraceptive methods
99431, 99433, 99238, 99435	Normal newborn care in hospital
J1055, X6051	Depo-Provera (contraception)
X7490	Lunelle
X6098	Rhogam
99201-99204, 99242-99244, 92002-92004	Ophthalmologist consult with Dx 250.00-250.99
99201-99204, 99242-99244	Podiatrist consult with Dx 250.00-250.99
99201-99204, 99242-99244, 94760, 94375, 94060, 71020, 95004, 94010, 82803	Allergist or Pulmonologist consult with Dx 493-493.91, 496

Codes	Description
74270	Barium Enema
74455	Urethrocytography, voiding
76090 – 76092	Mammogram
76645	Echography breast
76700-76705	Echography abdominal
76770	Echography, Retroperitoneal, complete
76805	Echography OB
76810	OB Ultrasound of a multiple gestation pregnancy after 1st trimester
76815	Echography Limited OB Ultrasound (gestational age, heart beat, placental location, fetal position, or emergency in the delivery room)
76830	Echography Transvaginal
76856-76857	Echography Pelvic
76870	Echography Scrotum
76872	Echography Prostate

Table II – Medi-Cal Members Only

Codes	Description
* 55250	Vasectomy (completed sterilization consent form required)
* 56301, 58600 – 58611	Tubal ligation (completed sterilization consent form required)
* 59840, 59841, 59850, 59851	Abortion (including RU-486)
Z1032, Z6200 – Z6210, Z6300 – Z6308, Z6400 – Z6414, Z6500	Basic obstetrical, nutritional, health education, and psychosocial services as defined by CCR, Title 22, Sections 51348 and 51348.1 (CPSP services)
Z7500	OB assessment for premature labor
Z7514	Obstetrical observation, O/P (room & board, less than 24 hour stay)
GC: 87081 Chlamydia: 86631 – 86632 Chlamydia Detection: 87810 Wet Mount: 87210	Laboratory tests if medically necessary indicated as part of decision making process for choice of contraceptive methods

Table III – Commercial & Healthy Families Only

Codes	Description
90801-90802	Psychiatric evaluation/consult

Table IV – Commercial Only

Codes	Description
54150, 54160	Circumcision of newborn (up to 6 weeks of age)

Table V – All Lines of Business – DME Orthotics

Codes	Description
E0100	Canes with Dx 848
E0116	Crutches with Dx 845
E0570/K0175/K0180	Nebulizer with Dx 493/466/496
L0120	Neck Collar with Dx 847
L3908	Wrist Splint with Dx 842
L8100/L8110/L8120/L8130/L8140/L8150/L8160/L8170/L8180	Elastic Stockings with Dx 451.9, 454.9
X8168	Lumbar Support with Dx 724
X8170	Maternity Lumbar Support with Dx V22.7

*Authorization is for professional services only. Facility may require an authorization for some services.