



## Member Information Sheet

### Health Homes of Upstate New York (HHUNY) Contact Information

Main Line	1-585-613-7659
Toll Free Line	1-855-613-7659
<b>Care Management Agency</b>	
Medicaid Helpline (toll free)	1- 800-541-2831

### Complaint Resolution Alternatives:

- **Care Management Agency Complaint Line**
- Health Homes of Upstate New York Complaint Line 1-855-209-1142
- Department of Health, Health Home Provider Line 1-518-473-5569  
(To address general complaints regarding any Health Home)
- The Bureau of Consumer Affairs 1-800-206-8125  
(To address complaints regarding Managed Care Plans) [managedcarecomplaint@health.ny.gov](mailto:managedcarecomplaint@health.ny.gov)
- Office of Temporary and Disability Assistance (OTDA) 1-518- 402-3096  
(New York State’s policy is to take reasonable steps to overcome language barriers to public services and programs. To do this, OTDA goal is to: 1) Talk to you in your language and 2) Provide vital forms and documents in the most frequently used languages: English, Arabic, Chinese, Haitian-Creole, Italian, Korean, Russian and Spanish.)

### Office of Temporary and Disability Assistance:

- Language Access - Call (518) 402-3096 for free language assistance services.

How do I request a State Fair Hearing? A Fair Hearing is a chance for you to tell an Administrative Law Judge (from the NY State Office of Temporary and Disability Assistance, Office of Administrative Hearings) why you think a decision about your case made by a local social services agency is wrong.

You can ask for a fair hearing by:

- 1) Telephone: You may call the state wide toll free number: 1-800-342-3334
- 2) Fax Number: (518) 473-6735
- 3) On-Line: Complete and send the online request form at: <http://otda.ny.gov/programs/applications/>
- 4) Write: The Fair Hearing Section  
New York State Office of Temporary and Disability Assistance  
P.O. Box 1930, Albany, New York 12201

### Managed Care Plans Member Service Numbers

CDPHP	1-800-388-2994
Excellus BlueCross BlueShield	1-800-650-4359
Fidelis Care	1-888-FIDELIS/1-888-343-3547
Health Now	Central New York West 1-866-638-9011
Health Now	Central New York East 1-800-856-0480
Independent Health Association	1-800-501-3439
MVP Health Plan	1-800-852-7826
Molina Health Care	1-800-223-7242
United Healthcare Community Plan	1-800-493-4647
YourCare	1-800-683-3781
Wellcare	1-800-288-5441



## Health Home Member Rights and Responsibilities

*When you are enrolled as a participant in the Health Home Program through the HHUNY network of Care Management Agencies, we want you to know you are a partner in the care management process. As an enrolled member you have rights and responsibilities that you, HHUNY and your care team agree to support and follow to assist you in successfully following your chosen plan.*

### Your Rights:

- You have a right to be treated with dignity and respect
- You have the right to fair treatment regardless of race, ethnicity, creed, religious belief, sexual orientation, gender identity, disabilities, age and or health status
- You have a right to keep your information private; HHUNY will only release information to those parties who you authorize for care management purposes
- You have the right to speak openly and candidly with your care manager about your choices and care plan objectives and goals
- You have the right to share in developing your plan of care
- You have the right to culturally competent service provision
- You have the right to information about HHUNY, it's contracted care management providers, services available and the role of the care management provider in the care management process
- You have the right to know about advocacy and community groups and prevention services
- You have a right to freely file a complaint, grievance, or appeal, and to learn how to do so\*
- You have the right to learn about laws that relate to your rights and responsibilities
- You have a right to know your rights and responsibilities in the care management process

### Your Responsibilities:

- You have the responsibility to treat those providing you with care management services with dignity and respect
- You have the responsibility to give your care manager the information needed in order to provide you with the best options available to help you successfully meet the outcomes in your plan
- You have the responsibility to openly ask questions about your care management with your care manager
- You have the responsibility to help develop and follow the agreed upon plan of care and to speak up if you feel the plan of care is no longer working for you and needs to be changed
- You have the responsibility to tell your care manager when there are changes that impact your plan of care, including medication changes
- You have the responsibility to keep your appointments and to notify the care manager or any treatment providers ahead of time if you need to cancel an appointment
- You have the responsibility not to take actions that could harm others
- You have the responsibility to report fraud or abuse to your care manager or to HHUNY or to the New York State Department of Health\*
- You have the responsibility to openly report concerns about the quality of service you receive
- You have the responsibility to let the care manager know about any changes to your contact information, including name, address, phone number, etc. or any changes to your Medicaid coverage that you may become aware of
- You have the right and responsibility to understand and help develop plans and goals to improve your health/life status

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Member Signature

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Date

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CM Signature

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Date