



Notice of Rights and Responsibilities

As a Medicaid Recipient, you have rights and North Alabama Community Care is required to protect and promote those rights.

You have the right:

1. To be treated with respect, privacy, and dignity.
2. To be free from physical, sexual, verbal, and/or emotional abuse or threats.
3. To be informed of your rights and receive treatment options and alternatives in a language and manner you understand.
4. To be free from discrimination based on race, religion, color, creed, or sex.
5. To have your medical and personal information protected and secure.
6. To make decisions about your own health care, including refusing treatment.
7. To choose a Primary Care Provider, Delivering Health Care Provider, Care Coordinator, and a Community Health Care Worker to the extent possible and appropriate.
8. To be free from any form of restraint or action used as a means of forcing you to do something unwanted or punishing you.
9. To request and receive a copy of your Medical Records and request that they are amended or corrected.
10. To be free to exercise your rights with the assurance that you will not be treated negatively by NACC or our Participating Providers.
11. To be free to obtain emergency services outside the primary care case management system regardless of whether the Case Manager referred you to the Provider that furnished the services.
12. To request dis-enrollment. Reasons for dis-enrollment include:
 - a. Needed services are not available in this Region and your doctor states that receiving services separately would subject you to unnecessary risk;
 - b. You move out of Region;
 - c. You object to the plan on moral or religious grounds;
 - d. Poor quality of care and/or access to services covered;
 - e. Unavailability of Providers experienced in dealing with your care needs;
 - f. Intermediate sanctions imposed by the Alabama Medicaid Agency on NACC;
 - g. With cause, at any time;
 - h. Without cause, ninety (90) Calendar Days following notification of enrollment, whichever is later;
 - i. Without cause at least once every twelve (12) months; or
 - j. Without cause upon re-enrollment if a temporary loss of enrollment has caused you to miss the annual dis-enrollment period.
13. To request re-enrollment any time after you have disenrolled from NACC.