



This **official government** booklet has important information about the following:

- ★ Your rights and protections if you have Original Medicare
- ★ Your rights and protections if you have a Medicare Advantage Plan or other Medicare health plan
- ★ Your rights and protections if you have Medicare prescription drug coverage
- ★ Where to get help with your questions





## Protect Your Medicare Number!

**Y**ou should always keep your Medicare card and Medicare number as safe as you would any of your personal information. You should also keep your plan membership card safe if you're in a Medicare Advantage Plan (like an HMO or PPO) or other Medicare health plan. This will help protect against someone using your information without your knowledge.

If you lose your Medicare card or it's stolen, or if you need a new Social Security card, visit [www.socialsecurity.gov](http://www.socialsecurity.gov), or call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778. If you get benefits from the Railroad Retirement Board, visit [www.rrb.gov](http://www.rrb.gov), or call 1-877-772-5772.

Call one of the following if you suspect identity theft:

- 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- The HHS Office of the Inspector General Hotline at 1-880-447-8477. TTY users should call 1-800-377-4950.
- The Federal Trade Commission's ID Theft Hotline at 1-877-438-4338. TTY users should call 1-866-653-4261.

Visit [www.consumer.gov/idtheft](http://www.consumer.gov/idtheft) to learn more about identity theft.

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The information in this booklet was correct when it was printed. Changes may occur after printing. Call 1-800-MEDICARE (1-800-633-4227), or visit [www.medicare.gov](http://www.medicare.gov) to get the most current information. TTY users should call 1-877-486-2048.

*“Medicare Rights and Protections” isn’t a legal document. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings.*

## Medicare Basics

**W**ith Medicare, you can choose how you get your health and prescription drug coverage. For example, you might have Original Medicare and a Medicare Prescription Drug Plan. Or, you might have a Medicare Advantage Plan (like an HMO or PPO) or other Medicare health plan that includes drug coverage.

Depending on where you live, you may be able to get your Medicare health care in one of several ways:

### 1. Original Medicare

- Run by the Federal government.
- Provides your Medicare Part A (Hospital Insurance) and Medicare Part B (Medical Insurance) coverage.
- You can join a Medicare Prescription Drug Plan to add drug coverage.
- You can buy a Medigap (Medicare Supplement Insurance) policy (sold by private insurance companies) to help fill the gaps in Part A and Part B coverage.



## 2. Medicare Advantage Plans (like an HMO or PPO)

- Run by private companies approved by Medicare.
- Provides your Part A and Part B coverage but can charge different amounts for certain services.
- May offer extra coverage (such as vision, dental, and/or health and wellness programs) and prescription drug coverage for an extra cost. Costs such as premiums, copayments, and coinsurance for items and services vary by plan.
- In most cases if you want drug coverage, you must get it through your plan. This is usually called a Medicare Advantage Prescription Drug Plan (MA-PD).
- You don't need and can't use a Medigap policy if you're enrolled in a Medicare Advantage Plan.

## 3. Other Medicare Health Plans

- Medicare health plans that aren't Medicare Advantage Plans but are still part of Medicare.
- Include Medicare Cost Plans, Demonstration/Pilot Programs, and Programs of All-inclusive Care for the Elderly (PACE).
- Most plans provide Part A and Part B coverage, and some also provide prescription drug coverage.



## Rights and Protections for Everyone with Medicare

**N**o matter how you get your Medicare, you have certain rights and protections designed to do the following:

- Protect you when you get health care.
- Make sure you get the health care services that the law says you can get.
- Protect you against unethical practices.
- Protect your privacy.

All people with Medicare have certain guaranteed rights and protections, including the right to the following:

- **Be treated with dignity and respect at all times.**
- **Be protected from discrimination.**

Discrimination is against the law. Every company or agency that works with Medicare must obey the law, and can't treat you differently because of your race, color, national origin, disability, age, religion, or sex.

If you think you haven't been treated fairly for any of these reasons, visit [www.hhs.gov/ocr](http://www.hhs.gov/ocr), or call the Department of Health and Human Services, Office for Civil Rights at 1-800-368-1019. TTY users should call 1-800-537-7697.

- **Have your personal and health information kept private.**

To learn more about this right, you can do the following:

- If you have Original Medicare, see the “Notice of Privacy Practices for Original Medicare.” You can view this notice in the “Medicare and You” handbook. Visit [www.medicare.gov/Publications](http://www.medicare.gov/Publications), or call 1-800-MEDICARE (1-800-633-4227) to ask for a copy. TTY users should call 1-877-486-2048.
- If you have a Medicare Advantage Plan (like an HMO or PPO), other Medicare health plan, or a Medicare Prescription Drug Plan, read your plan materials.





- **Get information in a way you understand from Medicare, health care providers, and, under certain circumstances, contractors.**
- **Get understandable information about Medicare to help you make health care decisions, including the following:**
  - What’s covered.
  - What Medicare pays.
  - How much you have to pay.
  - What to do if you want to file a complaint or appeal.
- **Have your questions about Medicare answered.**
  - Visit [www.medicare.gov](http://www.medicare.gov).
  - Call 1-800-MEDICARE.
  - Call your State Health Insurance Assistance Program (SHIP). To get the most up-to-date SHIP phone numbers, visit [www.medicare.gov/contacts](http://www.medicare.gov/contacts), or call 1-800-MEDICARE.
  - Call your plan if you have a Medicare Advantage Plan, other Medicare health plan, or a Medicare Prescription Drug Plan.
- **Have access to doctors, specialists, and hospitals.**
- **Learn about your treatment choices in clear language that you can understand, and participate in treatment decisions.**

You have the right to participate fully in your health care decisions. If you can’t fully participate, ask a family member, friend, or anyone you trust to help you make a decision about what treatment is right for you.
- **Get health care services in a language you understand and in a culturally-sensitive way.**

For more information about getting health care services in languages other than English, visit [www.hhs.gov/ocr](http://www.hhs.gov/ocr), or call the Department of Health and Human Services, Office for Civil Rights at 1-800-368-1019. TTY users should call 1-800-537-7697.





- **Get emergency care when and where you need it.**

If your health is in danger because you have a bad injury, sudden illness, or an illness quickly gets much worse, call 911. You can get emergency care anywhere in the United States.

To learn about emergency care in Original Medicare, call 1-800-MEDICARE.

If you have a Medicare Advantage Plan or other Medicare health plan, your plan materials describe how to get emergency care. You don't need to get permission from your primary care doctor (the doctor you see first for health problems) before you get emergency care. If you're admitted to the hospital, you, a family member, or your primary care doctor should contact your plan as soon as possible. If you get emergency care, you will have to pay your regular share of the cost (copayment). Then, your plan will pay its share. If your plan doesn't pay its share for your emergency care, you have the right to appeal.

- **Get a decision about health care payment, coverage of services, or prescription drug coverage.**

When a claim is filed, you get a notice from Medicare or from your Medicare Advantage plan, other Medicare health plan, or Medicare Prescription Drug Plan letting you know what it will and won't cover. If you disagree with the decision of your claim, you have the right to appeal.

- **Request a review (appeal) of certain decisions about health care payment, coverage of services, or prescription drug coverage.**

If you disagree with a decision about your claims or services, you have the right to appeal.





For more information on appeals, you can do one of the following:

- Read the booklet “Medicare Appeals,” available at [www.medicare.gov/Publications](http://www.medicare.gov/Publications).
- Visit [www.medicare.gov/appeals](http://www.medicare.gov/appeals).
- If you have a Medicare Advantage Plan, other Medicare health plan, or a Medicare Prescription Drug Plan, read your plan materials.
- Call the SHIP in your state. To get the most up-to-date SHIP phone numbers, visit [www.medicare.gov/contacts](http://www.medicare.gov/contacts), or call 1-800-MEDICARE.

■ **File complaints (sometimes called grievances), including complaints about the quality of your care.**

You can file a complaint about services you got, other concerns or problems you have in getting health care, and the quality of the health care you got.

If you're concerned about the quality of the care you're getting, you have a right to file a complaint.

- If you have Original Medicare, call the Quality Improvement Organization (QIO) in your state to file a complaint. To get your QIO's phone number, visit [www.medicare.gov/contacts](http://www.medicare.gov/contacts), or call 1-800-MEDICARE.
- If you have a Medicare Advantage Plan or other Medicare health plan, call the QIO, your plan, or both.



**If you have End-Stage Renal Disease (ESRD) and have a complaint about your care,** call the ESRD Network for your state. ESRD is permanent kidney failure that requires a regular course of dialysis or a kidney transplant. To get this phone number, visit [www.medicare.gov/contacts](http://www.medicare.gov/contacts), or call 1-800-MEDICARE.



## Your Rights in Original Medicare

If you have Original Medicare, in addition to the rights and protections described in Section 2, you have the following rights:

- **See any doctor or specialist (including women’s health specialists), or go to any Medicare-certified hospital, that participates in Medicare.**
- **Get certain information, notices, and appeal rights that help you resolve issues when Medicare doesn’t pay for health care.**
- **Request an appeal of health care coverage and payment decisions.**

- **Buy a Medigap (Medicare Supplement Insurance) policy.**

There are certain times, including during your Medigap open enrollment period, when an insurance company must sell you a Medigap policy, even if you have health problems.

- **Have the privacy of your personal health information protected.**

For more information on your right to privacy, see the “Notice of Privacy Practices for Original Medicare.” You can view this notice in the “Medicare and You” handbook. Visit [www.medicare.gov/Publications](http://www.medicare.gov/Publications), or call 1-800-MEDICARE (1-800-633-4227) to ask for a copy. TTY users should call 1-877-486-2048.



## Your Rights in a Medicare Advantage Plan or Other Medicare Health Plan

If you're in a Medicare Advantage Plan (like an HMO or PPO) or other Medicare health plan, in addition to the rights and protections described in Section 2, you have the rights listed below.

If you want to know more about your rights and protections, including rights and protections you may have in addition to those discussed in this booklet, read your plan's membership materials, or call your plan.

You have the following rights:

- **Choose health care providers within the plan, so you can get the health care you need.**

- **Get a treatment plan from your doctor.**

If you have a complex or serious medical condition, a treatment plan lets you directly see a specialist within the plan as many times as you and your doctor think you need. Women have the right to go directly to a women's health care specialist without a referral within the plan for routine and preventive health care services.

- **Know how your doctors are paid.**

When you ask your plan how it pays its doctors, the plan must tell you. Medicare doesn't allow a plan to pay doctors in a way that could interfere with you getting the care you need.

- **Request an appeal to resolve differences with your plan.**

You have the right to ask your plan to provide or pay for a service you think should be covered, provided, or continued.



- **File a grievance about other concerns or problems with your plan.**

For example, if you believe your plan's hours of operation should be different, or there aren't enough specialists in the plan to meet your needs, you can file a grievance. Check your plan's membership materials, or call your plan to find out how to file a grievance.

- **Get a coverage decision or coverage information from your plan before getting services.**

Before you get a service or supply, you can call your plan to find out if it will be covered or get information about your coverage rules. You can also call your plan if you have questions about home health care rights and protections. Your plan must tell you if you ask.

- **Have the privacy of your personal health information protected.**

For more information about your right to privacy, look in your plan materials or call your plan.



## Your Rights in a Medicare Prescription Drug Plan or Medicare Advantage Prescription Drug Plan (MA-PD)

If you have Medicare prescription drug coverage, your plan will send you information that explains your rights. Read the information carefully, and keep it where you can find it when you need it. Call your plan if you have questions.

In addition to the rights described in Section 2, if you have a Medicare Prescription Drug Plan or Medicare Advantage Prescription Drug Plan (MA-PD), you have the following rights:

- **Request a coverage determination or appeal to resolve differences with your plan.**

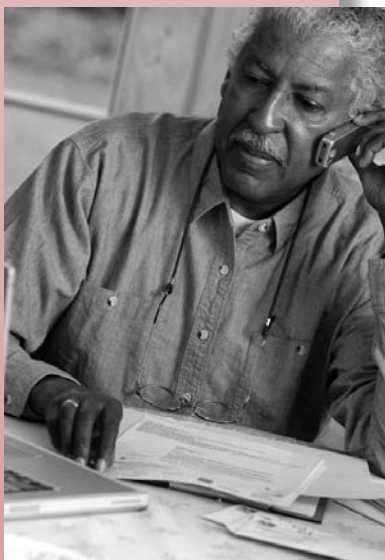
If your pharmacist tells you that your Medicare drug plan won't cover a drug you think should be covered, or it will cover the drug at a higher cost than you think you're required to pay, you can request a coverage determination. If the decision on your coverage determination isn't in your favor, you can appeal the decision. For more information on the appeals process, visit [www.medicare.gov/Publications](http://www.medicare.gov/Publications) to read the booklet "Medicare Appeals," or visit [www.medicare.gov/appeals](http://www.medicare.gov/appeals).

- **File a complaint (called a "grievance") with the plan.**

For more information on filing a grievance, visit [www.medicare.gov/Publications](http://www.medicare.gov/Publications) to read the booklet "Medicare Appeals," or visit [www.medicare.gov/appeals](http://www.medicare.gov/appeals).

- **Have the privacy of your health and prescription drug information protected.**

For more information about your right to privacy, look in your plan materials or call your plan.





## The Medicare Beneficiary Ombudsman

An “Ombudsman” is a person who reviews the performance of an organization or program, and helps to resolve problems that are found. Congress requires that Medicare have a Beneficiary Ombudsman to help people with Medicare. The Medicare Beneficiary Ombudsman shares information with the Secretary of Health and Human Services, Congress, and other organizations about what works well and what doesn’t work well to improve the quality of the services and care you get through Medicare.

### How does the Medicare Beneficiary Ombudsman help you through other organizations?

The Ombudsman also works with organizations like State Health Insurance Assistance Programs (SHIPs) and Quality Improvement Organizations (QIOs) in an effort to make sure they resolve your issues timely. These organizations provide information, counseling, and assistance to help you with the following:

- Your Medicare questions, including questions about your benefits, coverage, premiums, deductibles, and coinsurance.
- Grievances (complaints).
- Appeals (if you disagree with a coverage or payment decision made by Medicare or your Medicare plan).
- Problems joining or leaving a Medicare Advantage Plan (like an HMO or PPO), other Medicare health plan or Medicare Prescription Drug Plan.





## For More Information

- Visit [www.medicare.gov/Ombudsman/resources.asp](http://www.medicare.gov/Ombudsman/resources.asp).
- Visit the Ombudsman's Web site at [www.cms.gov/center/ombudsman.asp](http://www.cms.gov/center/ombudsman.asp).
- Call your QIO if you have a complaint about the quality of Medicare-covered services. A QIO is a group of doctors and health care experts who check on and improve the care given to people with Medicare. To get the phone number for your state's QIO, visit [www.medicare.gov/contacts](http://www.medicare.gov/contacts), or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- Call your SHIP if you have questions about appeals, buying other insurance, choosing a Medicare health or prescription drug plan, buying a Medigap policy, or Medicare rights and protections. The SHIP is a state program that provides free local health insurance counseling to people with Medicare. To get the phone number for your state's SHIP, visit [www.medicare.gov/contacts](http://www.medicare.gov/contacts), or call 1-800-MEDICARE.



**U.S. DEPARTMENT OF  
HEALTH AND HUMAN SERVICES**

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This booklet is available in Spanish. To get a free copy, call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

¿Necesita usted una copia en español?  
Para obtener su copia GRATIS, llame al  
1-800-MEDICARE (1-800-633-4227).