



Assurant Health
501 W. Michigan Street
P.O. Box 624
Milwaukee, WI 53201-0624
800-800-1212

MEMBERS' RIGHTS AND RESPONSIBILITIES

Members' Rights

- You have the right to ask questions regarding your medical plan coverage, the preadmission authorization process or claims payment.
- You have the right to receive information about the participating providers within the company's networks.
- You have the right to receive information regarding your prescription drug benefits and the Drug Formulary Program.
- You have the right to register complaints and appeals concerning your health plan or care provided to you from Time Insurance Company, John Alden Life Insurance Company or Union Security Insurance Company without penalty and/or disenrollment.
- You have the right to receive timely responses to your concerns
- You have the right to participate in decisions regarding your health care treatment options related to your condition
- You have the right to choose physicians, health care professionals and other health care facilities who will participate in your care
- You have the right to choose an Advance Directive to designate the kind of care you wish to receive should you be unable to express your wishes
- You have the right to receive a certificate outlining the coverage you, your family members are entitled, and to whom benefits are paid.
- You have the right to privacy and confidentiality for treatments, tests and procedures you receive
- You have the right to obtain information regarding Assurant Health's criteria for case closure
- You have the right to receive notification and a rationale when case management services are changed or no longer needed
- You have the right to refuse treatment or services, including case management services
- You have the right to have coverage decisions and claims processed according to regulatory and contractual standards, when applicable
- You have the right to request information on types of provider payment arrangements.
- You have the right to request the Quality Assurance Program Report.

Questions regarding the above can be submitted by writing or calling:

Customer Service Department
Time Insurance Company
501 West Michigan
Milwaukee, WI 53203
800-800-1212

Customer Service Department
John Alden Life Insurance Company
501 West Michigan
Milwaukee, WI 53203
800-800-1212

Customer Service Department
Union Security Insurance Company
501 West Michigan
Milwaukee, WI 53203
800-800-1212

See the insurance contract for complete details on plan benefits, limitations and exclusions.

Assurant Health is the brand name for products underwritten and issued by Time Insurance Company, John Alden Life Insurance Company and Union Security Insurance Company.
Form 27918-VA (Rev. 02/2016)

Members' Responsibilities:

- Read your certificate carefully.
- Know and confirm your benefits before receiving treatment
- Review the Pre-existing Conditions Limitation in your policy certificate.
- Contact an appropriate health care professional when you have a medical need or concern
- Keep scheduled appointments
- If you are covered by a PPO plan, in order to receive maximum benefits, verify the medical care and treatment you receive is through participating doctors and hospitals.
- Show your insurance ID card whenever you require medical attention.
- Present your drug ID card each time a prescription is filled.
- Pay your financial obligations under the benefit plan
- Participate in understanding your health problems and developing mutually agreed upon treatment goals
- Follow agreed upon instructions and guidelines of physicians and health care professionals
- Use emergency room services only for injury or illness that, in the judgment of a reasonable person, requires immediate treatment to avoid jeopardy of life or health
- Verify the medical care and treatment you receive is through participating doctors and hospitals if you are covered by a PPO plan and wish to receive maximum benefits. Please note that providers may move in and out of the network; also, a hospital or clinic may use both in-network and out-of-network providers. To ensure your chosen provider is in network each time you seek care, verify the provider's participation by calling the network or visiting the network's website, listed on your medical ID card.
- Obtain preauthorization for services indicated in your certificate.
- Notify Assurant Health and your providers of changes in your address or family status

Members' Rights and Responsibilities apply only to current Assurant Health customers. The relevance of each right and responsibility may vary, depending on plan benefits.

If you have any questions regarding an appeal or grievance concerning the health care services that you have been provided which have not been satisfactorily addressed by your plan, you may contact the Office of the Managed Care Ombudsman for assistance at:

PO Box 1157, Richmond, VA 23218

Toll Free: 877-310-6560

Local: 804-371-9032

Email: ombudsman@scc.virginia.gov

For issues regarding quality care, you can contact the Office of Licensure and Certification, Virginia Department of Health at: 9960 Mayland Drive, Suite 401, Henricho, VA 23233.

We accept TTY (text telephone) calls if you are hearing or speech impaired. If English is not your primary language and you do not have an interpreter available, or if you have special needs, please let us know you need assistance.

Toll Free: 800-955-1819

Local: 804-367-2106

Email: mchip@vdh.virginia.gov

Please retain this information for your records.

See the insurance contract for complete details on plan benefits, limitations and exclusions.

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