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Topeka, Kansas 66629-0001

In Topeka – (785) 291-7000  
In Kansas – (800) 432-0216

[www.bcbsks.com](http://www.bcbsks.com)

BLUE CROSS AND BLUE SHIELD SERVICE BENEFIT PLAN  
CASE MANAGEMENT  
BILL OF RIGHTS

1. You have the right to know about choices you can make regarding your health services.
2. You have the right to be treated with courtesy and respect.
3. You have a right to receive information from us that you understand. This information will help you, your doctor, and your case manager make decisions together.
4. You have a right to get information in writing about case management services covered by Blue Cross and Blue Shield of Kansas.
5. You have the right to have input into your case management plan. You have the right to ask us for details about the case management plan created for you.
6. You have the right to have input into your care needs when you move from one health care provider or setting to another.
7. You have the right to know what services will be provided and how you will work together with your case manager.
8. You have the right to say no to treatment or services, including services offered by case management. You also have the right to know what it means to your benefits or health outcomes if you say no.
9. You have the right to direct your care related to any end of life decisions and/or advance care directives.
10. You have the right for your medical records to be private. We will only share your records with health care providers assisting with your care; when required by law; or paying your claims.
11. If you cannot make your own decisions, you have the right to tell us who should make decisions for you. This person could be a family member, caregiver, or someone else that you have legally authorized. You will need to complete an authorized representative form.
12. You have the right to tell us we may share your personal information with the person you have picked to help you make decisions. You must fill out an authorized representative form to do that.

13. You and/or your authorized representative have the right to know about actions, decisions, and suggestions made by your case manager. This may include review of your care plan and coordination of care with providers or other health care team members. Communication may occur through telephone calls, letters, and/or email.
14. You have the right to be notified when and told why case management services are started, changed, or ended.
15. You have the right to understand why case management ends.
16. You have the right to express a concern or complaint. You may do so by calling the manager of the case management department or other person most appropriate to deal with your issue by calling 1-800-432-0216 ext. 6628.