



The Patients' Bill of Rights

Ensuring the right to choose your doctor

The Patient Protection and Affordable Care Act (Affordable Care Act) offers you several new protections that are known as the "Patients' Bill of Rights." This fact sheet explains how the Patients' Bill of Rights gives consumers with private insurance the right to choose primary care doctors and pediatricians and better access to obstetricians/gynecologists (OB/GYNs).

Ensuring Choice of Doctors

Under the Affordable Care Act, if you have private health insurance, whether you have a plan offered through your employer or an individual plan you purchased directly from a health insurance company, you will have greater choice of, and better access to, health care providers. The protections we outline below will be phased in beginning on September 23, 2010.¹ These protections apply to you if you buy a new individual or family health plan after March 23, 2010, or if you have coverage through a job and the employer buys a new health plan after March 23, 2010. They also apply if: (1) your plan has significantly cut the benefits it covers, (2) your plan has substantially increased the amount you must pay in cost-sharing or deductibles, or (3) your employer has decreased the amount it pays toward your premiums by more than 5 percent. (For more information, see the Families USA fact sheet, *Grandfathered Plans under the Patient Protection and Affordable Care Act*, available online at <http://www.familiesusa.org/assets/pdfs/health-reform/Grandfathered-Plans.pdf>.)

Choosing a Primary Care Provider

Under the new law, if you are enrolled in a health plan that requires you to designate a specific primary care provider, you will be guaranteed the right to choose that doctor. You will have the choice of any primary care provider in the plan's provider network, as long as he or she is accepting new patients like you. The insurance plan or the employer is required to notify you of your new right to pick your primary care provider. Until you select your primary care provider, the health plan may select one for you. The following example illustrates this new protection:



Mr. Y enrolls in Best Insurance, a new plan offered through his employer. Mr. Y receives a notification from Best Insurance that explains how, under the new law, he may select one of the 800 primary care providers in the Best Insurance provider network as his primary care provider. If Mr. Y doesn't designate a primary care provider of his choice, Best Insurance will pick one for him.

Choosing a Pediatrician

If you and your child are enrolled in a health plan that requires you to designate a primary care provider, you have the right to designate a pediatrician as your child's primary care provider, as long as there are pediatricians in your network available to take new patients. The insurance provider must notify you of your right to choose your child's pediatrician. Until you select a pediatrician as your child's primary care provider, the insurance company may choose a primary care provider for your child.

Direct Access to OB/GYNs

The new health reform law provides direct access to in-network OB/GYNs for women in health plans that require them to designate primary care providers. This means that, if you are a female, you can see an OB/GYN without prior authorization from the health plan or referral from another doctor, such as your primary care provider. The insurance company or employer must notify you of your right to see an OB/GYN within the provider network with no referral.² The following example illustrates this new protection:



Suzie Q enrolls in a new health plan from Healthy Life Insurance. Following the plan's requirements, Suzie Q selects her primary care provider from the Healthy Life Insurance provider network. Suzie Q then schedules an appointment with Dr. A, an in-network OB/GYN. Because Dr. A is in the Healthy Life Insurance network, she does not need a referral from her primary care provider or prior authorization from the insurance company.

Conclusion

The new patient protections in the Affordable Care Act, including the choice of an in-network primary care provider and pediatrician and direct access to OB/GYNs, will ensure that you can obtain quality health care that is appropriate for your specific needs.

¹ These new protections in the Patients' Bill of Rights will go into effect at different times for different plans. This is because plan years begin at different times during the year, and the patient protections take effect at the start of the new plan year. For example, if your plan year begins in October, you will be able to choose your primary care provider and your child's pediatrician and have direct access to OB/GYNs beginning in October 2010. If your plan year begins in January, these protections begin in January 2011.

² Depending on the policies of your specific insurance plan, you may need prior authorization for specific obstetric or gynecological treatments, and your OB/GYN may still be required to inform your primary care provider of treatment decisions.