
Beneficiary Protections and Responsibilities

8.101 Beneficiary Protections and Responsibilities (11/01/2024, GCR 24-086)

8.101.1 Beneficiary Protections

- (a) Vermont Medicaid will not arbitrarily deny or reduce the amount, duration, or scope of a required service to an otherwise eligible beneficiary solely because of diagnosis, type of illness, or condition of the beneficiary, and
- (b) Beneficiaries will receive Medicaid covered services with reasonable promptness, and
- (c) Vermont Medicaid will make Medicaid covered services available to all Medicaid beneficiaries regardless of the location of their residence within the state, and
- (d) Vermont Medicaid will ensure that Medicaid enrolled providers provide beneficiaries with physical access, reasonable accommodations, and accessible equipment for Medicaid beneficiaries with physical or mental disabilities, and
- (e) Vermont Medicaid will promote the delivery of services in a culturally competent matter to all Medicaid enrolled beneficiaries, including those with limited English proficiency and diverse cultural and ethnic backgrounds, disabilities, and regardless of sex, and
- (f) Beneficiaries have the right to be treated with respect and dignity, to have timely access to services, including specialists, to receive information on risks, benefits, and consequences of treatment options or nontreatment, and to participate in decisions regarding their health, including the right to refuse treatment, and
- (g) Beneficiaries have the right to receive notice, in writing and consistent with HCAR 8.100.3, of any decision regarding enrollment, disenrollment, or other changes in their services, and
- (h) Beneficiaries have the right to file a grievance, pursuant to HCAR 8.100.8, to express dissatisfaction about a matter other than an adverse benefit determination, and
- (i) Beneficiaries have the right to appeal any denial of benefits or enrollment, consistent with HCAR 8.100.

8.101.2 Beneficiary Responsibilities

- (a) To receive full Medicaid benefits, a beneficiary must inform the provider that they want the provider's services charged to Medicaid, and
- (b) Advise the provider if they have health insurance coverage in addition to Medicaid which may be liable for charges, and
- (c) Accept liability for any applicable co-payment, and
- (d) Show the provider their identification document if it has been issued.