Medical Rights and Responsibilities

RIGHT TO REQUEST A FAIR HEARING You have the right to ask for a fair hearing if you do not agree with a decision made about your case. You may ask for a hearing in writing or by phone. Your request for hearing must be received within 30 calendar days, plus 3 extra days for mailing, from the date on the notice of decision. You can represent yourself at the hearing or have someone represent you. Fair hearing decisions are most often made within 90 calendar days from the date of request. You can ask for an expedited (fast) hearing if you have an urgent medical need. You must send papers from a medical professional as proof of the urgent medical need at the time you ask for an expedited hearing. If approved, the expedited hearing will be set as soon as possible. If denied, the hearing will be set in the usual amount of time. If you ask for a hearing, you may be able to keep your coverage while you wait for your hearing decision. If your coverage continues until the hearing decision, you may have to pay back any assistance you receive if the decision is not in your favor. Continuation of benefits pending a fair hearing decision does not apply to CHIP coverage. Your hearing decision may result in a change in coverage for other members of your household. To ask for a fair hearing, you must call 1-800-792-4884 (TTY 1-800-792-4292) or mail your request to The Office of Administrative Hearings, 1020 S. Kansas Ave, Topeka, KS 66612.

CIVIL RIGHTS PROVISION If you feel you have been discriminated against on the basis of race, color, sex, age, disability, religion, political belief, or national origin in any program administered by the Kansas Department of Health and Environment, call 1-800-792-4884 (TTY 1-800-792-4292) for information on filing a complaint.

PENALTY FOR FRAUD Persons found guilty of intentionally obtaining benefits for which they are not entitled will be barred from receiving assistance in accordance with program guidelines and may also be subject to a fine or imprisonment or both.

REPORTING CHANGES You are required to report changes to us. We will tell you which changes you are required to report. If you have questions about your reporting requirements, please contact us.

HEALTH INSURANCE You must report all changes in your health insurance coverage available through your employer, and insurance settlements due to accident or injury. You must notify your medical providers of all health insurance, including KanCare medical assistance, at the time of treatment.

TOLL-FREE NUMBERS
KanCare Medical Eligibility 1-800-792-4884 (TTY 1-800-792-4292)
KanCare Managed Care Enrollment Center 1-866-305-5147

OFFICE OF ADMINISTRATIVE HEARINGS
Office of Administrative Hearings 1020 S. Kansas Avenue Topeka, KS 66612-1327