The Patient Bill of Rights

In the early 1970s, the American Hospital Association drafted a Patient Bill of Rights so people would know what they could reasonably expect when they were hospitalized. Since then, a number of similar measures have been developed. These are designed to:

- Empower people to take an active role in improving their health, including making informed decisions\(^1\) and the choice and right to have an advance directive\(^2\).
- Strengthen the relationships that patients have with their health care providers.
- Establish patients' rights in dealing with insurance companies and other specific situations related to health coverage and payment of services.

Patient rights and the Affordable Care Act

In 2010, a Patient Bill of Rights was created when the Affordable Care Act (ACA) was passed and made into a law. The bill was designed to give patient protections in dealing with health insurance companies.

Here are some of the protections that apply to health plans under the ACA law:

- Annual and lifetime dollar limits to cover essential benefits have been removed. (Essential benefits include doctor and specialist visits, home and hospice services, emergency services, hospitalization, preventive and wellness services, chronic disease management, laboratory services, prescription drugs, maternity and newborn care, pediatric services, mental health and substance use disorder services, and rehabilitative services and devices. Non-essential benefits include things like adult dental care).
- People will be able to get health insurance in spite of pre-existing medical
conditions (medical problems they have before getting or changing insurance).

- You have the right to an easy-to-understand summary of benefits and coverage.
- Young adults are able to stay on a parent’s policy until age 26 if they meet certain requirements.
- You’re entitled to certain preventive screening without paying extra fees or co-pays.
- If your plan denies payment for a medical treatment or service, you must be told why it was refused, and how to appeal (fight) that decision\(^3\).
- You have the right to appeal the payment decisions of private health plans (called an **internal appeal**). You also have the right to a review by an independent organization (called an **outside review**) if the company still doesn’t want to pay.

Still, there are exceptions to some of these rights. The rules apply to plans issued or renewed on or after September 23, 2010. You’ll need to check your plan’s materials or ask your employer or benefits person to find out if your health plan is grandfathered.

Besides the grandfathered plans, there are other ways insurance companies can bypass some of the rules, so you’ll still have to check with each plan to find out exactly what they do and don’t do.

If you have concerns about your insurance, it’s sometimes helpful to start with customer service or a case manager at your health insurance company. For information on handling insurance claims, see Managing Your Health Insurance\(^4\). If you would like to read more, you can visit www.healthcare.gov\(^5\).

### Other patient bills of rights

The Patient Bill of Rights described so far has focused on health insurance coverage, but there are others for different settings, like these:

- Mental health bill of rights
- Hospice patient bill of rights
- Rights of people in hospitals

Certain US states have their own versions of a bill of rights for patients. Insurance plans sometimes have lists of rights for subscribers.

### Hyperlinks

financial-and-legal-matters/informed-consent.html

References


Additional resources

Along with the American Cancer Society, other sources of information and support include:


- This site explains patient rights with regard to health insurance under the Affordable Care Act

**American Hospital Association** Toll-free number: 1-800-242-2626 (this is the customer service/publication order line) Website: www.aha.org (http://www.aha.org/)

- AHA’s *Patient Care Partnership* brochure teaches patients about rights and responsibilities in regard to their hospital stay. (It comes in English, Arabic, Chinese, Russian, Spanish, Tagalog, and Vietnamese.) The brochure is sold in bulk orders only and there’s a fee for non-members. You can read it online for free, in any of the languages, at www.aha.org/aha/issues/Communicating-With-Patients/pt-care-partnership.html (http://www.aha.org/aha/issues/Communicating-With-Patients/pt-care-partnership.html).


- This site has information on patient rights along with many links to other sources of related information

**Medicare Rights Center** (for those with Medicare) Toll-free number: 1-800-333-4114 Website: www.medicarerights.org (http://www.medicarerights.org/)

- This service can help you understand your rights and benefits, work through the
Medicare system, and get quality care. They have newsletters, fact sheets, and a place to submit questions. They can also help you find programs that help reduce your costs for prescription drugs and medical care, and guide you through the appeals process if Medicare denies coverage for drugs or care you need.

*Inclusion on this list does not imply endorsement by the American Cancer Society.

Last Revised: May 13, 2019

Written by


Our team is made up of doctors and oncology certified nurses with deep knowledge of cancer care as well as journalists, editors, and translators with extensive experience in medical writing.

American Cancer Society medical information is copyrighted material. For reprint requests, please see our Content Usage Policy ([www.cancer.org/about-us/policies/content-usage.html](http://www.cancer.org/about-us/policies/content-usage.html)).