SENIOR & LONG TERM CARE DIVISION
COMMUNITY SERVICES BUREAU
Home Health Policy Manual

Title: **Home Health Policy 408**
Section: **ELIGIBILITY FOR SERVICES**
Subject: **Member Rights**
Reference: **ARM 37.40.702, 42 CFR 484.50**
Supersedes: **Policy 408, Issued 05/01/1999**

MEMBER RIGHTS

Members must be informed of their rights. The Home Health Agency (HHA) must protect and promote the exercise of these rights.

NOTICE OF RIGHTS

The HHA must provide the member with a written notice of the member's rights in advance of furnishing care to the member or during the initial evaluation visit before the initiation of treatment. The HHA must maintain documentation showing that it has complied with the requirements of this section.

EXERCISE OF RIGHT AND RESPECT FOR PROPERTY AND PERSON

Members must be informed of their rights as a member of the HHA.

NOTE: The member's family or guardian may exercise the member's rights when the member has been judged incompetent.

The member has the right to have his or her property treated with respect.

The member has the right to voice grievances regarding treatment or care that is (or fails to be) furnished, or regarding the lack of respect for property by anyone who is furnishing services on behalf of the HHA and must not be subjected to discrimination or reprisal for doing so.

NOTE: The HHA must investigate complaints made by the member or the member's family or guardian regarding treatment or care that is (or fails to be) furnished, or regarding the lack of respect for the member's property by anyone furnishing services on behalf of the HHA, and must document both the existence of the complaint and the resolution of the complaint.

RIGHT TO BE INFORMED AND PARTICIPATE IN PLANNING CARE AND TREATMENT

1. The member has the right to be informed, in advance about the care to be furnished. The HHA must advise the member, in advance, of:
    a. Disciplines that will furnish care;
    b. Frequency of visits proposed to be furnished;
    c. Any changes in the care to be furnished; and
    d. HHA must advise the member in advance of any change in the plan of care before the change is made.
2. Members have the right to request a copy of any information contained in the member's clinical record, including the plan of care.
3. The member has the right to participate in the planning of care.
4. The HHA must advise the member, in advance, of the right to participate in planning the care or treatment and in planning changes in the care or treatment.
5. Members have the right to receive all of the services outlined in the plan of care.
6. The HHA must maintain written policies and procedures regarding advance directives.
7. The HHA must inform and distribute written information to the member, in advance, concerning its policies on advance directives, including a description of applicable State law.
8. The HHA may furnish advance directives information to the member at the time of the first home visit, as long as the information is furnished before care is provided.

CONFIDENTIALITY

The member has the right to confidentiality of the clinical records maintained by the HHA. The HHA must advise the member of the

agency's policies and procedures regarding disclosure of clinical records.

PAYMENT

The member has the right to be advised, before care is initiated, of the extent to which payment for the HHA service may be expected from Medicare, Medicaid or other sources, and the extent to which payment may be required from the member. Before the care is initiated, the HHA must inform the member, orally and in writing, of:

1. The extent to which payment may be expected from Medicare, Medicaid or any other Federally funded or aided program known to the HHA;
2. The charges for services that will not be covered by Medicare or Medicaid; and
3. The charges that the individual may have to pay.

CHANGES IN INFORMATION

The member has the right to be advised orally and in writing of any changes in the information provided when they occur. The HHA must advise the member of these changes orally and in writing as soon as possible, but no later than 30 calendar days from the date that the HHA becomes aware of a change.

HOME HEALTH HOT LINE

The member has the right to be advised of the availability of the toll-free number administered by the Montana State Quality Assurance Division, Montana Home Health Hotline (1-800-762-4618).

When the agency accepts the member for treatment of care, the HHA must advise the member in writing of the telephone number of the Home Health Hotline, the hours of its operation, and that the purpose of the hotline is to receive complaints or questions about local HHAs.

The member also has the right to use this Hotline to lodge complaints concerning the implementation of the advance directive requirements.

The member should also be advised of the names, addresses and telephone numbers for relevant federally and state-funded consumer information, consumer protection, and advocacy agencies.