NYS Department of Health Nursing Home Transition and Diversion (NHTD) Program

Medicaid Waiver Orientation Training: Unit 2
Participant Rights and Responsibilities
Waiver Participant Rights and Responsibilities

Every waiver participant is ensured specific rights regarding the delivery of waiver services and has specific responsibilities related for receiving waiver services and participating in the NHTD waiver program. As part of the application process, the applicant is presented with a copy of the Waiver Participant Rights and Responsibilities form by the Service Coordinator, and a signed copy is included in the application packet.

The Service Coordinator is responsible for explaining the rights and responsibilities of being a waiver participant to the individual and/or their legal guardian.

These rights and responsibilities must be reviewed during the development of the application, at any time the Service Plan is revised, and any time the Service Coordinator is aware that the participant does not understand their rights or responsibilities.
Participant Rights and Responsibilities continued

The Waiver Participant Rights and Responsibilities form must be signed and dated by the applicant and/or legal guardian during the application process, and at least annually thereafter.

The Service Coordinator maintains a copy and provides a copy of the signed form to:

- The participant;
- Their Legal Guardian/Authorized Representative, if applicable; and
- All waiver service providers as indicated on the participant’s Service Plan.
Participant’s Rights

Participants have the right to:

• Be informed of their rights prior to receiving waiver services;

• Receive services without regard to race, origin, ethnicity, religion, race, creed, gender identity/sexual orientation, marital status, or disability;

• Be treated as an individual with dignity and respect including but not limited to person, residence and possessions;

• Have services that support their health and welfare;
Participant’s Rights Continued

Participants have the right to:

• Assume reasonable risks with the opportunity to learn from these experiences;

• Be provided with an explanation of all services available in the Nursing Home and Diversion Waiver (NHTD) and other health and community resources that may be of benefit to the participant;

• Participate or designate an individual to participate on their behalf in the development, review and approval of all Service Plans, including any changes to the Service Plan;

• Select a Service Coordination Provider;

Note: Waiver participants are afforded the right to choose provider agencies, not specific provider staff.
Participant’s Rights Continued

Participants have the right to:

• Receive assistance from their Service Coordinator to select service providers from other agencies. Participants may not choose to receive most other services from the same agency where their Service Coordinator works;
  
  Note: Waiver participants are afforded the right to choose provider agencies, not specific provider staff

• Request a change in services (add, increase, decrease or discontinue) at any time;

• Be fully informed of the process for requesting a Conference with the RRDC and/or a Fair Hearing upon receipt of a Notice of Decision or at any time while a participant of the NHTD waiver

• Be informed of the name and duties of any person providing services to the participant under the participant’s Service Plan;
Participant’s Rights Continued

Participants have the right to:

• Have the freedom and support to control their own schedule and activities;

• Receive services from approved and qualified individuals;

• Receive from the Service Coordinator, in writing, a list of names, telephone numbers and email addresses, hours of operation, and supervisors for all waiver service providers, the RRDS, and the NHTD Complaint line;

• Refuse care, treatment and services after being fully informed of and understanding the potential risks and consequences of their actions;
Participant’s Rights Continued

Participants have the right to:

- Have their privacy respected, including the confidentiality of personal records, and have the right to refuse the release of the information to anyone not authorized to have such records, except in the case of their transfer to a health care facility or as required by law or Medicaid requirements;

- Submit complaints about any concerns regarding services provided;

- Receive support and direction from their Service Coordinator to resolve their concerns and complaints about services and service providers;

- Receive additional support and direction from the RRDS and DOH waiver staff as desired or in the event that their Service Coordinator is not successful in resolving concerns and complaints about services and service providers;
Participant’s Rights Continued

Participants have the right to:

• Have their complaints responded to and be informed of the outcome;

• Participate in surveys inquiring about their experiences as a waiver participant. This includes the right to refuse to participate in surveys without jeopardizing the participant’s continued participation in the waiver program; and

• Have their service providers protect and promote their ability to exercise all rights identified in the Waiver Participant Rights and Responsibilities form (and as indicated in this PowerPoint) without fear of reprisal.
Participant’s Responsibilities

Participants are responsible to:

- Work with their Service Coordinator to develop/revise their Service Plan to assure timely reauthorization of the Service Plan;

- Direct and actively participate in waiver services as identified in their Service Plan and receive Service Coordination at least monthly;

- Follow their Service Plan and notify their Service Coordinator if problems occur;

- Talk to their Service Coordinator and other waiver providers if they want to change their services or goals;
Participant’s Responsibilities Continued

Participants are responsible to:

• Provide to the best of their knowledge, complete and accurate medical history including all prescribed and over-the-counter medications they are taking and understand the risk(s) associated with their decisions about care;

• Inform their Service Coordinator about all treatments and interventions in which they are involved;

• Maintain their home in a manner which enables them to safely live in the community;

• Secure and maintain an appropriate community residence;
Participant’s Responsibilities Continued

Participants are responsible to:

• Ask questions when they do not understand their services;

• Not participate in any criminal behavior. Participants understand that, if they do, their service provider(s) may leave, the police may be called and the participant’s continuation in the waiver program may be jeopardized;

• Report any changes in their medical condition, circumstances, informal supports and formal supports to their Service Coordinator;

• Provide accurate information related to their coverage under Medicaid, including any notices from the Local Department of Social Services regarding their Medicaid, Medicare or other medically-related insurance programs to their Service Coordinator;
Participant’s Responsibilities Continued

Participants are responsible to:

• Work with their Service Coordinator to maintain active Medicaid;

• Notify all providers as soon as possible if the scheduled service visit needs to be rescheduled or changed;

• Notify appropriate person(s) should any problems occur or if the participant is dissatisfied with services provided; and

• Treat the RRDS and their service providers with consideration, dignity and respect. Participants are responsible to show respect and consideration for staff and their property and do not create an environment which is hostile for the RRDS or their service providers.