

	<b>Addictive and Mental Disorders Division</b> Severe and Disabling Mental Illness, Home and Community Based Services Waiver Manual
	<b>Date effective:</b> July 1, 2020  <b>Date revised:</b>
<b>Policy Number:</b> <i>HCBS SDMI 120</i>	<b>Subject:</b> Bill of Rights and Responsibilities

According to *Title VI of the Civil Rights Act of 1964*, Severe and Disabling Mental Illness (SDMI) Home and Community Based Services (HCBS) waiver members have the right to receive appropriate and professional quality health care services without discrimination against race, creed, color, religion, gender, national origin, sexual preferences, disability, or age (in accordance with physician orders if required). Successful care requires ongoing collaboration between members and providers. Their partnership requires both to take an active role in the healing process. Knowledgeable members control the decisions that direct their care. With that exercise of choice comes several responsibilities.

(1) SDMI HCBS waiver members must be assured of the following rights:

- (a) the right to choose to receive waiver services in the community or reside in a nursing facility;
- (b) the right to refuse services, or to request a change in caregiver without fear of reprisal or discrimination;
- (c) the right to choose among services that are available and appropriate and are delivered by the qualified provider of your choice;
- (d) the right to appeal any denial of Medicaid coverage for services;
- (e) the right to expect that all medical, psychological, and financial records will be kept confidential;
- (f) the right to be free of coercion, discrimination, or reprisal for exercising your right to file a complaint or grievance;
- (g) the right to consult with an attorney, advocate, or legal representative;
- (h) the right to be free from physical restraint or isolation (seclusion) from waiver providers;
- (i) the right to be free from abuse and neglect;

- (j) the right to be have access to all records concerning your medical and psychological condition;
  - (k) the right to receive 10-day advanced written notice of changes to your Person-Centered Recovery Plan; and
  - (l) the right to assistance and special provisions if you have a disability.
- (2) Members must contribute to the collaborative effort by:
- (a) providing the case management staff with the most accurate and complete health information, medical history, requested insurance and financial information and to inform them of any changes that may occur;
  - (b) maintain eligibility for Montana Medicaid including spend down requirements when applicable;
  - (c) treating all providers and case management staff with courtesy and respect;
  - (d) reading all documents, required consents, and releases for insurance billing before signing;
  - (e) signing the required consents and releases for insurance billing;
  - (f) cooperating in the development and amendments of the Person-Centered Recovery Plan;
  - (g) notifying case management or service provider staff if you are unable to keep a home care visit or appointment; and
  - (h) notifying case management of any changes made by a medical or behavioral health provider.