Minnesota Home Care Bill of Rights for Assisted Living Clients of Licensed Only Home Care Providers

Statement of Rights

A client who receives home care services in an Assisted Living community has these rights:

1. Receive written information in plain language about rights before receiving services, including what to do if rights are violated.

2. Receive care and services according to a suitable and up-to-date plan, and subject to accepted health care, medical or nursing standards and person-centered care, to take an active part in developing, modifying, and evaluating the plan and services.

3. Be told before receiving services the type and disciplines of staff who will be providing the services, the frequency of visits proposed to be furnished, other choices that are available for addressing home care needs, and the potential consequences of refusing these services.

4. Be told in advance of any recommended changes by the provider in the service plan and to take an active part in any decisions about changes to the service plan.

5. Refuse services or treatment.

6. Know, before receiving services or during the initial visit, any limits to the services available from a home care provider.

7. Be told before services are initiated what the provider charges for the services; to what extent payment may be expected from health insurance, public programs, or other sources if known; and what charges the client may be responsible for paying.

8. Know that there may be other services available in the community, including other home care services and providers, and to know where to find information about these services.

9. Choose freely among available providers and to change providers after services have begun, within the limits of health insurance, long-term care insurance, medical assistance, other health programs or public programs.

10. Have personal, financial, and medical information kept private, and to be advised of the provider's policies and procedures regarding disclosure of such information.

11. Access the client's own records and written information from those records in accordance with Minnesota Health Records Act, Minnesota Statute, Sections 144.291 to 144.298.

12. Be served by people who are properly trained and competent to perform their duties.
13. Be treated with courtesy and respect, and to have the client's property treated with respect.

14. Be free from physical and verbal abuse, neglect, financial exploitation, and all forms of maltreatment covered under the Vulnerable Adults Act and the Maltreatment of Minors Act.

15. Reasonable, advance notice of changes in services or charges.

16. Know the provider's reason for termination of services.

17. At least 30 days' advance notice of the termination of a service by a provider, except in cases where:
   - The recipient of services engages in conduct that alters the conditions of employment as specified in the employment contract between the home care provider and the individual providing home care services, or creates an abusive or unsafe work environment for the individual providing home care services;
   - An emergency for the informal caregiver or a significant change in the recipient’s condition has resulted in service needs that exceed the current service provider agreement and that cannot be safely met by the home care provider; or
   - The provider has not received payment for services, for which at least ten days’ advance notice of the termination of a service shall be provided.

18. A coordinated transfer when there will be a change in the provider of services.

19. Complain to staff and others of the client’s choice about services that are provided, or fail to be provided, and the lack of courtesy or respect to the client or the client's property, and the right to recommend changes in policies and services, free from retaliation, including the threat of termination of services.

20. Know how to contact an individual associated with the home care provider who is responsible for handling problems and to have the home care provider investigate and attempt to resolve the grievance or complaint.

21. Know the name and address of the state or county agency to contact for additional information or assistance.

22. Assert these rights personally, or have them asserted by the client's representative or by anyone on behalf of the client, without retaliation.

23. Place an electronic monitoring device in the client’s or resident’s space in compliance with state requirements.

You may choose to discuss any concerns with your provider. As a reminder, providers are required to work to assure your rights and other requirements are followed. When providers violate the rights in this section, they are subject to the fines and license actions.

Providers must do the following:
• Encourage and assist in the fullest possible exercise of these rights.
• Provide the names and telephone numbers of individuals and organizations that provide advocacy and legal services for clients and residents seeking to assert their rights.
• Make every effort to assist clients or residents in obtaining information regarding whether Medicare, medical assistance, other health programs, or public programs will pay for services.
• Make reasonable accommodations for people who have communication disabilities, or those who speak a language other than English.
• Provide all information and notices in plain language and in terms the client or resident can understand.

No provider may require or request a client or resident to waive any of the rights listed in this section at any time or for any reasons, including as a condition of initiating services or entering into an assisted living contract.

Provider Responsibility related to Content of Written Notice of Service Termination

If an arranged home care provider who is not also Medicare certified terminates a service agreement or service plan with an assisted living client, the home care provider shall provide the assisted living client and the legal or designated representatives of the client, if any, with a written notice of termination which includes the following information:

1. The effective date of termination;
2. The reason for termination;
3. Without extending the termination notice period, an affirmative offer to meet with the assisted living client or client representatives within no more than five business days of the date of the termination notice to discuss the termination;
4. Contact information for a reasonable number of other home care providers in the geographic area of the assisted living client;
5. A statement that the provider will participate in a coordinated transfer of the care of the client to another provider or caregiver;
6. The name and contact information of a representative of the home care provider with whom the client may discuss the notice of termination;
7. A copy of the home care bill of rights; and
8. A statement that the notice of termination of home care services by the home care provider does not constitute a notice of termination of the housing with services contract with a housing with services establishment.
Interpretation and Enforcement of Rights

These rights are established for the benefit of clients who receive home care services. All home care providers must comply with these rights. The commissioner shall enforce this. A home care provider may not request or require a client to surrender any of these rights as a condition of receiving services. This statement of rights does not replace or diminish other rights and liberties that may exist relative to clients receiving home care services, persons providing home care services, or licensed home care providers.

Resources

You may contact your licensed provider as indicated below:

Licensee Name: _________________________________________________________________
Phone: ________________________________________________________________________
Email: _________________________________________________________________________
Address: ______________________________________________________________________
Name and title of person to whom problems or complaints may be directed: ________________

______________________________________________________________________________

Report suspected abuse, neglect or financial exploitation of a vulnerable adult:

MINNESOTA ADULT ABUSE REPORTING CENTER (MAARC)
Phone: 1-844-880-1574
For more information:
Vulnerable adult protection and elder abuse (https://mn.gov/dhs/adult-protection/)

For all other complaints that are not suspected abuse, neglect or financial exploitation of a vulnerable adult, please contact the Office of Health Facility Complaints at the Minnesota Department of Health:

MINNESOTA DEPARTMENT OF HEALTH
OFFICE OF HEALTH FACILITY COMPLAINTS
PO Box 64970
St. Paul, Minnesota 55164-0970
Phone: 651-201-4201 or 1-800-369-7994
Fax: 651-281-9796
health.ohfc-complaints@state.mn.us
Office of Health Facility Complaints
(https://www.health.state.mn.us/facilities/regulation/ohfc/index.html)
To request advocacy services, please contact the Office of Ombudsman for Long-Term Care or the Office of Ombudsman for Mental Health and Developmental Disabilities:

OFFICE OF OMBUDSMAN FOR LONG-TERM CARE
PO Box 64971
St. Paul, MN 55164-0971
1-800-657-3591 or 651-431-2555
MBA.OOLTC@state.mn.us
Ombudsman for Long-Term Care (http://www.mnaging.org/Advocate/OLTC.aspx)

OFFICE OF OMBUDSMAN FOR MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES
121 7th Place East
Metro Square Building
St. Paul, MN 55101-2117
1-800-657-3506 or 651-757-1800
Ombudsman.mhdd@state.mn.us
Office of Ombudsman for Mental Health and Developmental Disabilities (https://mn.gov/omhdd/)

MID-MINNESOTA LEGAL AID/MINNESOTA DISABILITY LAW CENTER
(Protection and Advocacy Systems)
430 First Avenue North, Suite 300
Minneapolis, MN 55401-1780
1-800-292-4150
mndlc@mylegalaid.org
Legal Aid (http://mylegalaid.org/)

MINNESOTA DEPARTMENT OF HUMAN SERVICES
(Medicaid Fraud and Abuse-payment issues)
Surveillance and Integrity Review Services
PO Box 64982
St Paul, MN 55164-0982
1-800-657-3750 or 651-431-2650
DHS.SIRS@state.mn.us

SENIOR LINKAGE LINE
(Aging and Disability Resource Center/Agency on Aging)
Minnesota Board on Aging
PO Box 64976
St. Paul, MN 55155
1-800-333-2433
senior.linkage@state.mn.us
Senior LinkAge Line (www.SeniorLinkageLine.com)
For general inquiries, please contact:

Minnesota Department of Health
Health Regulation Division
85 E. 7th Place
PO Box 64970
St. Paul, MN 55164-0970
651-201-4101
health.fpc-web@health.state.mn.us

Minnesota Department of Health (www.health.state.mn.us)

Per Minnesota Statutes, section 144A.44 Subdivision 1 and 144A.441. These rights pertain to consumers receiving home care services from licensed home care providers who provide care for assisted living clients as defined by 144G.

The home care provider shall provide the client or the client's representative a written notice of the rights before the date that services are first provided to that client. The provider shall make all reasonable efforts to provide notice of the rights to the client or the client's representative in a language the client or client's representative can understand.

Minnesota Department of Health
Health Regulation Division
P.O. Box 64900
St. Paul, Minnesota 55164-0900
651-201-4101
health.fpc-licensing@state.mn.us

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To obtain this information in a different format, call: 651-201-4101.