

RIGHTS AND RESPONSIBILITIES

Recipients of New Opportunities Waiver (NOW) services are entitled to the specific rights and responsibilities that accompany eligibility and participation in the Medicaid and Medicaid waiver programs and those contained in the Louisiana Developmental Disability Law of 2005 (Louisiana R.S. 28:452.1).

Support coordinators and service providers must assist recipients to exercise their rights and responsibilities. Every effort must be made to assure that applicants or recipients understand their available choices and the consequences of those choices. Support coordinators and service providers are bound by their provider agreement with Medicaid to adhere to the following policies regarding recipient rights.

Freedom of Choice of Program

Applicants/recipients, who qualify for an Intermediate Care Facility for the Developmentally Disabled (ICF/DD) level of care, have the freedom to select institutional or community-based services. Applicants/recipients have the responsibility to participate in the evaluation process. This includes providing the medical and other pertinent information or assisting in obtaining it for use in the person-centered planning process and certification for services.

Notification of Changes

Support coordinators and service providers may not approve or deny eligibility for the waiver or approve services in the waiver program.

The Department of Health and Hospitals (DHH) - Bureau of Health Services Financing (BHSF) is responsible for determining financial eligibility for the NOW program. In order to maintain eligibility, recipients have the responsibility to inform BHSF of changes in their income, address, and living situation.

The DHH - Office for Citizens with Developmental Disabilities (OCDD) is responsible for approving level of care and medical certification per the Plan of Care. In order to maintain this certification, recipients have the responsibility to inform OCDD through their support coordinator of any significant changes which will affect their service needs.

Participation in Care

Support coordinators and service providers shall allow recipients/authorized representatives to participate in all person-centered planning meetings and any other meeting concerning their services and supports. Person-centered planning will be utilized in developing all services and supports to meet the recipient's needs. By taking an active part in planning his/her services, the recipient is better able to utilize the available supports and services.

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In order for providers to offer the level of service necessary to ensure the recipient's health, welfare, and support, the recipient must report any change in his/her service needs to the support coordinator and service provider(s).

The support coordinator must request changes in the amount of services at least seven days before taking effect, except in emergencies. Service providers may not initiate requests for change of service or modify the Plan of Care without the participation and consent of the recipient.

Freedom of Choice of Support Coordination and Service Providers

Support coordinators should be aware that at the time of admission to the waiver and every six months thereafter, recipients have the opportunity to change providers, if one is available. Recipients may request a change by contacting the OCDD regional waiver office or Human Services Authority or District.

Support coordinators will provide recipients with their choice of direct service providers and help arrange for the services included in the Plan of Care. Recipients have the opportunity to choose service providers initially and every six months thereafter unless a change is requested for good cause.

Voluntary Participation

Providers must assure that the recipient's health and welfare needs are met. As part of the planning process, methods to comply with these assurances may be negotiated to suit the recipient's needs and outcomes. Recipients have the right to refuse services, to be informed of the alternative services available to them, and to know the consequences of their decisions. Therefore, a recipient will not be required to receive services that he/she may be eligible for but does not wish to receive. The intent of the NOW program is to provide community-based services to individuals who would otherwise require institutionalization.

Compliance with Civil Rights

Providers shall operate in accordance with Titles VI and VII of the Civil Rights Act of 1964, as amended, and the Vietnam Veterans Readjustment Act of 1974 and all requirements imposed by or pursuant to the regulations of the U.S. Department of Health and Human Services. This means that all services and facilities are available to persons without regard to race, color, religion, age, sex, or national origin. Recipients have the responsibility to cooperate with providers by not requesting services, which in any way violate state or federal laws.

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Quality of Care

Providers must be competent, trained, and qualified to provide services to recipients as outlined in the Plan of Care. In cases where services are not delivered according to the Plan of Care, or there is abuse or neglect on the part of the provider, the recipient shall follow the complaint reporting procedure and cooperate in the investigation and resolution of the complaint. Recipients may not request providers to perform tasks that are illegal or inappropriate and may not violate the rights of providers.

Grievances/Fair Hearings

Each support coordination/direct service provider shall have grievance procedures through which recipients may grieve the supports or services they receive. The support coordinator shall advise recipients of this right and of their rights to appeal any denial or exclusion from the program or failure to recognize a recipient's choice of a service and of his/her right to a fair hearing through the Medicaid program. In the event of a fair hearing, a representative of the service provider and support coordination agency shall appear and participate in the proceedings.

The recipient has a responsibility to bring problems to the attention of providers or the Medicaid program and to participate in the grievance or appeal process.

Rights and Responsibilities Form

A complete list of the recipient's rights and responsibilities is included in Appendix D. The support coordinator must review these rights and responsibilities with the recipient and his/her authorized representative as part of the initial intake process into waiver services.