

## Participant Rights & Obligations


As a person requesting or receiving home and community-based services from the Division of Developmental Disabilities, I have both rights and obligations. This document outlines them.

### Rights




I have the same rights as any other person in my community:

	<p>I have the right to have a job and choose where and when I want to work.</p>
	<p>I have the right to be paid equally, no matter what my abilities are.</p>
	<p>I have the right to make my own choices and decisions about things like which provider I choose and who I see for medical care. If I can't make these choices, I have the right to have someone help me.</p>
	<p>I have the right to choose who helps me manage my money and know what my bills and expenses are.</p>

	<p>I have the right to privacy including my own space and belongings.</p>
	<p>I have the right to go where I want to go when I want to go there as long as I am safe.</p>
	<p>I have the right to eat and drink what I want and the right to choose my mealtimes.</p>
	<p>I have the right to have a key or be able to access my own home whenever I choose.</p>
	<p>I have the right to stay home when I want to.</p>
	<p>I have the right to have friends and talk or spend time with them when I want to.</p>
	<p>I have the right to use public transportation when it is available.</p>

	<p>I have the right to be free from abuse including hitting, yelling, or being touched when I do not want to be. If I think I am being abused, I can call 800-652-1999.</p>
	<p>I have the right to be free from neglect and have someone handle my care and maintain my health and safety. If I think I am being neglected, I can call 800-652-1999.</p>
	<p>I have the right to be free from exploitation. No one can take my money or my property. If I think I am being exploited, I can call 800-652-1999.</p>

I have more rights because I receive services from DHHS:

	<p>I have the right to have any complaints I have followed up on in a timely manner.</p>
	<p>I have the right to be told about any changes or decisions made to my services in writing.</p>
	<p>I have the right to appeal any changes to my plan. I must appeal those changes in writing within 90 days of the Notice of Decisions I receive.</p>



I have the right to a list of all services I can receive and all providers.

## Obligations

In order to receive home and community-based services, there are some things I have to do. These things include:



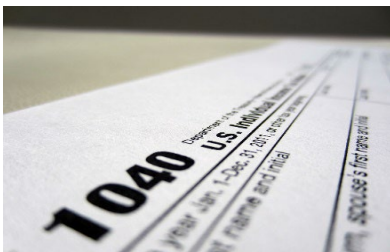
I must apply for and accept all benefits I may be eligible for. This can include Supplemental Security Income, Social Security Administration benefits, Nebraska Medicaid and Home and Community-Based waiver services.



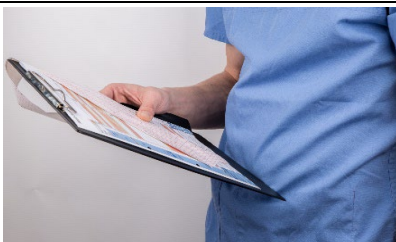
I must make sure I stay eligible for all benefits I receive.



I must pay the amount of my Medicaid share of cost if I have any.



I must complete and turn in any needed information before starting waiver services. I also need to turn this information in every year as requested. This may include benefit information or a copy of my tax return.



I must complete any assessments or evaluations needed to maintain my services. These assessments include an annual physical, other medical appointments, and Level of Care.