

PERSONAL CARE AGENCY CLIENT RIGHTS

Clients of a state-approved personal care agency (PCA) have the right to be informed of and to exercise rights specified in state regulations. If a PCA client has been judged incompetent, the client's family or guardian may exercise those rights on the client's behalf.

Prior to or at the time of accepting a person as a client, a PCA shall provide a statement of client rights, in writing, to each client/potential client or his/her representative. The client or the client's legal representative shall verify by signature that they have received a copy of these rights. A duplicate of this signed, client rights document shall be filed with the client's care records.

The PCA must investigate complaints that the client, the client's family, or the client's guardian make regarding treatment and respect for client rights by anyone furnishing services on behalf of the PCA. The PCA must document such complaints and how they are resolved.

As a personal care agency client, you have the right:

1. To be fully informed of these rights and of all the provider's rules governing client responsibilities
2. To be fully informed of services available from the provider
3. To be informed of all changes in services and charges as they occur

Note: For clients who are Medicaid recipients, personal care services are not subject to recipient cost sharing, per Wis. Stat. § 49.45(18)(b)11, and the provider is prohibited from charging the recipient for services in addition to or in lieu of obtaining Medicaid payment, per § 49.49(3m)

4. To participate in the planning of services, including referral to a health care institution or other provider, and to refuse to participate in experimental research
5. To have access to information about your health condition to the extent required by law

Note: Wis. Stat. § 146.83 and federal HIPAA regulations (45 CFR § 164.524) generally require health care providers to make health care records available for inspection by the patient.

6. To refuse service and to be informed of the consequences of that refusal
7. To confidential treatment of personal and medical records and to approve or refuse their release to any individual outside the provider, except in the case of transfer to another provider or health facility or as otherwise permitted by law
8. To be treated with consideration, respect, and full recognition of dignity and individuality, including privacy in treatment and in care for personal needs
9. To be taught how to perform the service required so that you can, to the extent possible, help yourself
10. To designate a person to be taught to perform the service required so that, to the extent possible, the person designated can understand and help you
11. To have your property treated with respect
12. To complain about the care that was provided or not provided and seek resolution of the complaint without fear of recrimination
13. To have your family or legal representative exercise your client rights when the legal representative is legally authorized to do so

Complaints about treatment or care can be submitted in writing, by phone, or online to:

1. DHS / DQA / Bureau of Health Services Toll Free: 800-642-6552
 ATTN: PCA Complaint Coordinator Phone: 608-266-8481
 PO Box 2969 <http://www.dhs.wisconsin.gov/bqaconsumer/healthcarecomplaints.htm>
 Madison, WI 53701-2969
2. The Personal Care Agency

SIGNATURE – Client or Representative

Name – Client or Representative (*Print.*)

Date Signed