

Virginia Administrative Code

Title 12. Health

Agency 5. Department of Health

Chapter 381. Regulations for the Licensure of Home Care Organizations

## Part II. Administrative Services

### 12VAC5-381-230. Client rights.

A. The organization shall establish and implement written policies and procedures regarding the rights of clients.

B. Client rights shall be reviewed with clients or client designees upon admission to the organization. The review shall be documented in the client's record.

C. Written procedures to implement the policies shall ensure that each client is:

1. Treated with courtesy, consideration and respect and is assured the right of privacy;
2. Assured confidential treatment of his medical and financial records as provided by law;
3. Free from mental and physical abuse, neglect, and property exploitation;
4. Assured the right to participate in the planning of the client's home care, including the right to refuse services;
5. Served by individuals who are properly trained and competent to perform their duties;
6. Assured the right to voice grievances and complaints related to organizational services without fear of reprisal;
7. Advised, before care is initiated, of the extent to which payment for the home care organization services may be expected from federal or state programs, and the extent to which payment may be required from the client;
8. Advised orally and in writing of any changes in fees for services that are the client's responsibility. The home care organization shall advise the client of these changes as soon as possible, but no later than 30 calendar days from the date the home care organization became aware of the change;
9. Provided with advance directive information prior to start of services; and
10. Given at least five days written notice when the organization determines to terminate services.

D. Before care is initiated, the home care organization shall inform the client, orally and in writing, of:

1. The nature and frequency of services to be delivered and the purpose of the service;
2. Any anticipated effects of treatment, as applicable:

3. A schedule of fees and charges for services;
4. The method of billing and payment for services, including the:
  - a. Services to be billed to third party payers;
  - b. Extent to which payment may be expected from third party payers known to the home care organization; and
  - c. Charges for services that will not be covered by third party payers;
5. The charges that the individual may have to pay;
6. The requirements of notice for cancellation or reduction in services by the organization and the client; and
7. The refund policies of the organization.

**Statutory Authority**

§§ 32.1-12 and 32.1-162.12 of the Code of Virginia.

**Historical Notes**

Derived from Virginia Register Volume 22, Issue 3, eff. January 1, 2006.