



---

# Important Information about Member Rights and Responsibilities

Inside:

Your Rights as a VNS Health MLTC Member	1
Patient Self-Determination Act	3
Making Decisions About Your Medical Care	5
Planning in Advance for your Medical Treatment	8
Consumer Directed Personal Assistance Statement	10

---

Anytime you have questions, we're here to help.

**1-888-867-6555 (TTY: 711)**  
Monday – Friday, 9 am – 5 pm

## **Your Rights as a VNS Health MLTC Member**

Your health, safety, and wellbeing are the main concern for the team of dedicated staff who care for you in this program. As a member, you have certain rights that are important for you to understand. Please ask your Care Team to explain these to you if you have any questions.

As a member you have the right to:

- You have the Right to receive medically necessary care.
- You have the Right to timely access to care and services.
- You have the Right to privacy about your medical record and when you get treatment.
- You have the Right to receive information on available treatment options and alternatives presented in a manner and language you understand.
- You have the Right to receive information in a language you understand; you can get oral translation services free of charge.
- You have the Right to receive information necessary to give informed consent before the start of treatment.
- You have the Right to be treated with respect and due consideration for your dignity.
- You have the Right to request and receive a copy of your medical records and ask that the records be amended or corrected.
- You have the Right to take part in decisions about your health care, including the right to refuse treatment.
- You have the Right to be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation.

- You have the Right to get care without regard to sex, (including gender identity and status of being transgender), race, health status, color, age, national origin, sexual orientation, marital status or religion.
- You have the Right to be told where, when and how to get the services you need from your managed long term care plan, including how you can get covered benefits from out-of-network providers if they are not available in the plan network.
- You have the Right to complain to the New York State Department of Health or your Local Department of Social Services; and, the Right to use the New York State Fair Hearing System and/or a New York State External Appeal, where appropriate.
- You have the Right to appoint someone to speak for you about your care and treatment.
- You have the Right to seek assistance from the Participant Ombudsman program.

## **Patient Self Determination Act for Implementing Patients' Rights to Participate in Health Care Decision Making**

This policy statement is provided by Health Plans from VNS Health in accordance with the federal Patient Self-Determination Act of 1990 and the New York State laws governing health care decision-making. These laws require home health agencies to provide written information to each adult patient being admitted to the agency for care concerning the agency's policies for implementing a patient's rights to make health care decisions and to execute advance directives. These rights are discussed in more detail in the accompanying materials.

Health Plans from VNS Health respects the rights of each adult to participate in health care decision making to the maximum extent of his or her ability and respects all rights consistent with New York State Law, and has instituted specific policies and procedures to ensure that a patient's health care decisions are followed.

- 1. Information to Patient:** The plan will provide the following written information to each adult at the time of admission to the agency for care:
  - a. Making Decisions About Your Medical Care: Information for Patients.**
  - b. Two pamphlets prepared by the New York State Department of Health. These are **Planning in Advance for Your Medical Treatment** and **Appointing Your Health Care Agent- New York State's Proxy Law.****
  - c. This document is the Health Plans from VNS Health policy regarding the right of each adult to make health decisions and formulate advance directives.**
  
- 2. Definitions:** An "advance directive" is a written instruction relating to the provision of health care when an adult becomes incapacitated, including, but not limited to, a health proxy, a living will, and consent to or request for the issuance of an order not to resuscitate.
  - a. Health Care Proxy:** A document delegating to another adult, known as a health care agent, the authority to make health care decisions on behalf of the individual in the future if he/she becomes incapable of making his or her own health care decisions.

- b. Living Will:** A document which contains specific instructions concerning an individual's wishes about the type of health care choices and treatments that he or she does or does not want to receive, but which does not designate an agent to make health care decisions.
  - c. Consent to or Request for the Issuance of an Order Not to Resuscitate (A "DNR order"):** A living will that consents to or requests a doctor's order not-to-resuscitate (a "DNR order"). Under such an order, health care providers are not to attempt cardiopulmonary resuscitation ("CPR") in the event the patient suffers cardiac or respiratory arrest. A request for such an order can be expressed in a health care proxy or living will.
- 3. Documentation:** The plan will document in the patient's medical record whether or not the patient has executed an advance directive. If made available to us, a copy of such advance directive shall be included in the patient's medical record.
  - 4. Compliance with Law:** The plan will comply with all applicable New York State law regarding advance directives, including statutes and court decisions.
  - 5. Non-Discrimination:** The plan will not condition the provision of care or otherwise discriminate against any individual based on whether or not the individual has executed an advance directive.
  - 6. Education:** The plan will provide education to staff and the community on issues regarding patient decision-making.

## **Making Decisions About Your Medical Care**

This information is distributed in compliance with a federal law called the Patient Self-Determination Act. This law is designed, along with New York State law, to protect your rights to make decisions about your own medical care, including the right to accept or refuse treatment. You also have the right to appoint someone to make decisions for you if you cannot make them yourself.

### **As An Adult, You Have These Rights:**

- You have the right to choose what medical treatment you do or do not want now or in the future.
- You have the right to appoint someone to make your medical care decisions for you if in the future you cannot make those decisions yourself.
- You can make your decisions about your care known by telling your doctor or by putting your decisions in writing.
- You can change your mind at any time.

### **How You Can Make Decisions About Your Medical Care**

#### **Why Should I be involved in decisions about my medical care?**

Your medical care affects *you* most of all, so *you* should be involved in any decisions about your medical care.

#### **How can I be involved in decisions about my medical care?**

Talk with your doctor or home health nurse about the choices you want to make. Ask questions and let those involved in your care know what your preferences are. Talk to them about what you would want now, but also talk to them about that you would want in the future if you ever became incapable of making your own health care decisions. You can protect your rights by writing down your wishes and having two witnesses sign the statement. Such a statement is called an advance directive.

## **What is an advance directive?**

An advance directive is a document in which you state what you want done if in the future you cannot make your own medical decisions. In New York State, a document that appoints another adult to make health care decisions for you is called a Health Care Proxy. A document that gives specific directions to your doctor and others involved in your treatment is called a living will. You can have a document that both appoints someone and leaves specific directions.

## **What decides that I am incapable of making health care decisions?**

By law you are assumed to be capable of making health care decisions unless your doctor, sometimes with the assistance of other doctors, decides that you are not capable of understanding the health care decisions you need to make or the risks and benefits of alternative decisions.

## **Who will make health care decisions for me?**

If you do not appoint someone, anyone involved in your care, or a court could end up making decisions for you.

## **Who must follow what I say in my advance directive?**

As long as your wishes are legal, anyone involved in your care must follow your wishes or try to find someone who will.

## **What if I disagree with my doctor or home health nurse?**

Your doctor and nurse will treat you according to what he or she believes is best for you. If you and your doctor or nurse cannot agree about your medical care, you may find another doctor or home health nurse.

## **What should I say in my advance directive?**

You can say anything you want, but it is best to appoint someone and to discuss the following questions with that person. You can also put your feelings in writing in your advance directive.

- Do you want to be resuscitated if your breathing or heart stops?
- Do you want to be put on a breathing machine (ventilator or respirator) to restore your breathing if you are unable to breathe on your own?
- Do you want to be fed by tubes (receive artificial nutrition and hydration) if you cannot be fed otherwise?

- Do you want medications, such as painkillers, even if they might make you die more quickly?
- Do you want medications, such as painkillers, even if they might make your die more slowly?

### **Must I have an advance directive?**

No, but it is good to have one so that those involved in your medical care know what you want if you ever become incapable of making health care decisions for yourself.

### **How do I write an advance directive?**

You can write your wishes on a piece of paper or ask us for a form. You should date the document and two people must sign as a witness.

### **What should I do with my advance directive?**

You would give a copy to the person you appoint to make health care decisions for you, your doctor, your family and anyone else that might be involved in making decisions about your medical care.

### **What if I want to change my advance directive?**

You can change or cancel your advance directive at any time. You can write a new advance directive, destroy the old one or tell those involved in your care that you have changed your mind. You should let anyone you told about your earlier wishes know that they have changed. It is particularly important to let your doctor or nurse know of any changes in your wishes.

### **How can I make sure my advance directive is legal?**

Our form meets the requirements of New York State law. If you follow the directions on that form, your advance directive should be legal in New York State. You can also have a lawyer help you draft your advance directive or review the one you have drafted. At this point there is no advance directive form that is valid in all 50 states.

### **What if I need more information about advance directives?**

Ask us and we will try to answer your questions or refer you to someone who can help.

This document is distributed in accordance with the Patient Self-Determination Act (42 U.S.C., Sections 1395cc and 1396a(a)). It also complies with the requirements of New York Law.

# Planning in Advance for Your Medical Treatment

## Your Right to Decide About Treatment

Adults in New York State have the right to accept or refuse medical treatment, including life-sustaining treatment. Our Constitution and state laws protect this right. This means that you have the right to request or consent to treatment, to refuse treatment before it has started, and to have treatment stopped once it has begun.

## Planning in Advance

Sometimes because of illness or injury people are unable to talk to a doctor and decide about treatment for themselves. You may wish to plan in advance to make sure that your wishes about treatment will be followed if you become unable to decide for yourself for a short or long time period. If you don't plan ahead, family members or other people close to you may not be allowed to make decisions for you and follow your wishes.

In New York State, appointing someone you can trust to decide about treatment if you become unable to decide for yourself is the best way to protect your treatment wishes and concerns. You have the right to appoint someone by filling out a form called a Health Care Proxy. A copy of the form and information about the Health Care Proxy are available from your health care provider.

If you have no one you can appoint to decide for you, or do not want to appoint someone, you can also give specific instructions about treatment in advance. Those instructions can be written, and often referred to as a Living Will.

You should understand that general instructions about refusing treatment, even if written down, may not be effective. Your instructions must clearly cover the treatment decisions that must be made. For example, if you just write down that you do not want "heroic measures", the instructions may not be specific enough. You should say the kind of treatment that you do not want, such as a respirator or chemotherapy, and describe the medical condition when you would refuse the treatment, such as when you are terminally ill or permanently unconscious with no hope of recovering. You can also give instructions orally by discussing your treatment wishes with your doctor, family members or other close to you.

Putting things in writing is safer than simply speaking to people, but neither method is as effective as appointing someone to decide for you. It is often hard for people to know in advance what will happen to them or what their medical needs will be in the future. If you choose someone to make decisions for you, that person can talk to your doctor and make decisions that they believe you would have wanted or that are best for you, when needed. If you appoint someone and also have instructions about treatment in a Living Will, in the space provided on the Health Care Proxy form itself, or some other manner, the person you select can use these instructions as guidance to make the right decision for you.

## **Deciding About Cardiopulmonary Resuscitation & DNR**

Your right to decide about treatment also includes the right to decide about cardiopulmonary resuscitation (CPR). CPR is emergency treatment to restart the heart and lungs when your breathing or circulation stop. Sometimes doctors and patients decide in advance that CPR should not be provided, and the doctor gives the medical staff an order not to resuscitate (DNR order). If your physical or mental condition prevents you from deciding about CPR, someone you appoint, your family, members, or others close to you can decide. A brochure on CPR and your rights under New York State Law is available from your health care provider.

## **Deciding About DNI**

Do not Intubate (DNI) means that no breathing tube will be placed in the throat in the event of breathing difficulties or respiratory arrest. If you stop breathing, you will not be placed on an artificial breathing machine, and the insertion of a tube or mechanical ventilation will not be initiated.

The DNI order can be a separate Advance Directive from the DNR order, but in most cases they are ordered together.

## **Consumer Directed Personal Assistance Services (CDPAS)**

On November 1, 2012, the Consumer Directed Personal Assistance Services (CDPAS) became a covered benefit.

The CDPAS provides some or all assistance with the following: personal care services, home health aide services and skilled nursing tasks. These services are led by a consumer directed personal assistant under the supervision of a member (consumer) or the member's designated representative.

There are specific eligibility standards and responsibilities associated with this service. Please ask your Care Manager for further details.

---

Anytime you have questions, we're here to help.

**1-888-867-6555 (TTY: 711)**  
Monday – Friday, 9 am – 5 pm