



RIGHTS OF INDIVIDUALS

Medicaid Home and Community-Based Services Developmental Disability Waivers

The following is a list of some of your rights under the Illinois Mental Health and Developmental Disabilities Code and other laws.

- **Keeping and Exercising Your Rights:** You have rights while receiving services. You can make a complaint or exercise any of your rights, and not lose services. If you do, you have a right to appeal using Form IL462-1202.
- **Restriction of Rights:** Your rights may be changed to make sure you and others around you are safe. This includes changes to any of the rights in this form. If your rights are changed, your service provider must tell you. Your service provider's files and your Personal Plan must explain why your rights were changed. Your service provider's human rights committee will talk regularly about these changes.
- **Reporting Rights Violations:** You have a right to report any violations of your rights. You can report to your service provider's human rights committee. You can also report to your Independent Service Coordination (ISC) agency, the Department of Human Services, the Illinois Guardianship and Advocacy Commission, or Equip for Equality. Page 3 has contact information.
- **Non-Discrimination:** You have a right to fair treatment. It does not matter how old you are, your height, or your weight. Your disability does not matter; neither does your race, religion, ethnicity, nationality, or how much money you have. Your sexual orientation, gender identity, or how you dress/groom does not matter. Your right to be treated fairly does not depend on the language you speak/understand or how you communicate.
- **Selection of Supports:** You have the right to choose your own service providers. You have the right to change providers if you want to. You should contact your Independent Service Coordination (ISC) agency for help with changing providers. You have the right to change your ISC if you want to. Talk to the head of your ISC agency if you want to change to a different person.
- **Respectful Supports:** You have the right to quality and respectful supports. You should get all the support you need in the place where you can be most independent.
- **Complaints:** You have a right to send a letter or e-mail about anything you do not like to the person in charge of your service provider. If you do not like the decisions made by the service provider (denial, reduction, suspension, termination of services) you can let the Department of Human Services and the Department of Healthcare and Family Services know.
- **Discharge:** You have the right to end services at any time. Your provider may end services under certain conditions.
- **Refusing Services:** You or your guardian have the right to refuse services. This can include refusing medication. If you do not want services, they will not be given to you unless there is an emergency or if a judge makes an order.
- **Discovery & Personal Plan Process:** You have the right to be part of leading your Discovery/Personal Plan process. You can speak up about changes in your Plan whenever you want. You have a right to choose when/where your Discovery or Personal Plan meetings happen. You can invite anyone you want to your meetings. You don't have to invite people you don't want at your meetings. You must be offered a copy of your Plan. You must be able to understand your Plan. You have a right to speak up about what you want or don't want in your Plan and your life.
- **Meetings:** You have a right to be part of any meeting about you.
- **Employment/Education/Retirement:** You have the right to work. You have the right to get support to help find a job or to work on your job skills. You have a right to get a job working at a store, an office, or from home. You have a right to get help from the Illinois Division of Rehabilitation Services (DRS) to get competitive, integrated employment. You have a right to go back to school or volunteer instead of working. If you are 60 or older, you have a right to retire if you no longer want to work.
- **Money & Banking:** You have a right to spend or save your money how you want. You can deposit your money in a bank or have your service provider help you keep it safe. Any interest earned on money deposited in a bank is yours. You or your guardian must say yes for your service provider to manage your money and benefits. If you say yes, your service provider may help you make sure that you don't lose your benefits, like Medicaid.
- **Labor:** The work that you do has value, even if someone helps you. If you do work for others at a job or community day service, you will be paid a fair wage. You may have to do personal housekeeping chores without being paid. You will not get paid to clean your room, do your laundry, or cook your own food.



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- **Abuse or Neglect:** You have a right to be safe from any kind of abuse - verbal, physical, sexual, or emotional. You have a right to be safe from neglect. If someone hurts you, you should tell someone. You also have the right to tell the agencies listed on Page 3. You have a right to services to help you heal if you are hurt.
- **Financial Exploitation:** You have the right for your money and property to be safe. You have a right to be free from exploitation, or someone taking advantage of you, your property, or your money for themselves. Talk to someone you trust if you think someone took advantage of you. Report anyone taking advantage of you to the appropriate agency listed on Page 3 for "Filing A Complaint."
- **Coercion:** You have the right to be free from bullying. It is wrong for people to bully you to do something you do not want to do by hurting you or saying they will hurt you.
- **Restraints:** Someone or something used to keep you from physically harming yourself or others. Restraints can only be used under the supervision of a properly qualified professional.
- **Seclusion:** You have a right to freedom of movement. Using seclusion or putting you in a room by yourself when you do not want to be, is not allowed.
- **Confidentiality:** Your information is private. Personal information about you and the services you receive can only be shared with someone else if the law allows it. Staff and others should not talk about your personal information.
- **Residency Agreement:** You have a right to a written agreement if you live in a provider-owned or -controlled setting. The agreement will cover your rights and responsibilities of where you live. You have a right to choose a roommate if you must share a bedroom. You have a right to choose what furnishings and decorations you want in your house. You should work with others in your house to decide how to decorate shared areas.
- **Privacy in Your Room:** You have a right to privacy in your room. You can have a lock on your bedroom door and the key to the lock or another way to lock or unlock your bedroom door. All people, including housemates, should knock and wait for a sign that it is okay to come in before coming into your room, except in emergencies. If you have a roommate, you should talk to them about how each of you will get privacy.
- **Access to Your Home:** You have a right to a key to your home or another way to get into your home. Only you and your housemates should have a key or another way to get into your home.
- **Property:** You have the right to get, keep, and use personal property unless it is decided that certain items are harmful to you or others. When you stop receiving services from a service provider, all of your personal property must be given to you.
- **Communication:** You have the right to communicate with others in private, without staff watching or listening to your conversations. You have a right to have visitors at your house. You and your housemates should talk about when it is okay to have visitors over. You have a right to open your own mail.
- **Choice in Your Schedule:** You have a right to choose your own schedule. Your schedule includes waking up, sleeping, eating, and other activities.
- **Access to Food:** You have a right to have food in your home whenever you want. Your food should not be locked up. You should not have to ask staff if it is okay to get and eat your food.
- **Intimate Relationships/Sex Education:** You have the right to have intimate relationships with people you choose. You have a right to get married. You have the right to privacy with intimate partners. You have a right to get sex education, information, and resources about healthy relationships. You have the right to safe sex supplies, like condoms and birth control. You will have to buy these items. Your service provider can help you with this.
- **Dress and Grooming Preferences:** You have a right to personal choice and decisions on your style, how you dress, and grooming preferences. This includes what clothes you want to wear and how you want to do your hair.
- **Medical or Dental Services:** You or your guardian have the right to choose your doctors, dentist, and other healthcare professionals. Your choices will be in your Personal Plan. If you have an emergency, you may not be able to choose a healthcare professional. You have a right to look at any records about your health and health care.
- **Voting:** You have the right to vote. You have a right to get help to vote in a way that works best for you. You have the right to vote for whomever you want. Staff and other people should not tell you how to vote or who to vote for.



Filing A Complaint

People receiving services, as well as their guardians, family members, or other representatives, may file complaints about their services, using one or more of the options described below.

- **Contact your Independent Service Coordination (ISC) agency:** If you do not have the ISC contact information available, you can find the agency closest to you by using the DHS Office Locator at: <https://www.dhs.state.il.us/page.aspx?module=12&officetype=3>. Under "Office Type" select "Developmental Disabilities Services". Under "County", select your county. Or you can call (888) DD-PLANS or (888) 337-5267 and enter in your zip code. You will be connected to the nearest ISC agency at no cost to you.
- **Contact the Division Directly:** Call toll free at (888) DD-PLANS or (888) 337-5267 and ask to speak to a representative in the Division of Developmental Disabilities, or call the Division at (217) 785-6171. or call (877)-657-0005. For Home and Community Based Services (HCBS) Settings Complaints specifically, please email DHS.HCBScomplaints@illinois.gov or call (877) 657-0005.
- **File a Report of Abuse, Neglect, or Exploitation:**
 - For children under the age of 18 or for anyone residing in a Child Group Home or Child Care Institution, call the Department of Children and Family Services at (800) 252-2873.
 - For adults ages 18 and over, who reside in their own home or family's home, call the Adult Protective Services Hotline at (866) 800-1409.
 - For individuals residing in a Community Integrated Living Arrangement (CILA) contact the Department of Human Services, Office of Inspector General at (800) 368-1463.
 - For reporting incidents that occur at a Community Day Service site, contact the Department of Human Services, Office of Inspector General at (800) 368-1463.
 - For individuals residing in a Community Living Facility (CLF), contact the Department of Public Health at (800) 252-4343 or email at DPH.CCR@illinois.gov.

If you contact the ISC or Division of Developmental Disabilities, you may expect an initial response within two business days. In cases of reports of abuse or neglect, the initial contact will be within 24 hours.

A Guardianship and Advocacy Commission is a state agency consisting of three divisions: Legal Advocacy Services, Human Rights Authority and the Office of the State Guardian. The Commission is located at the following addresses:

East Central Regional Office

2125 S. First Street
Champaign, IL 61820
Phone: (217) 278-5577
Fax: (217) 278-5588
TTY: (866) 333-3362

Egyptian Regional Office

#7 Cottage Drive
Anna, IL 62906-1669
Phone: (618) 833-4897
Fax: (618) 833-5219
TTY: (866) 333-3362

North Suburban Regional Office

9511 Harrison Street, Room 335
Des Plaines, IL 60016
Phone: (847) 294-4264
Fax: (847) 294-4263
TTY: (866) 333-3362

Peoria Regional Office

401 N. Main Street, Ste. 620
Peoria, IL 61602
Phone: (309) 671-3030
Fax: (309) 671-3060
TTY: (866) 333-3362

West Suburban Regional Office

Madden Mental Health Center
1200 S. First Street, P.O. Box 7009
Hines, IL 60141
Phone: (708) 338-7500
Fax: (708) 338-7505
TTY: (866) 333-3362

Chicago Regional Office

160 N. La Salle Street
Suite S500
Chicago, IL 60601
Phone: (312) 793-5900
Fax: (312) 793-4311
TTY: (866) 333-3362

Rockford Regional Office

4302 N. Main Street, Ste. 108
Rockford, IL 61103
Phone: (815) 987-7657
Fax: (815) 987-7227
TTY: (866) 333-3362

Metro East Regional Office

4500 College Avenue, Ste. 100
Alton, IL 62002
Phone: (618) 474-5503
Fax: (618) 474-5517
TTY: (866) 333-3362

Springfield Regional Office

521 Stratton Building
401 S. Spring Street
Springfield, IL 62706
Phone: (217) 785-1540
Fax: (217) 524-0088
TTY: (866) 333-3362



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Equip for Equality, Inc. is an independent, not-for-profit organization that administers the federal protection and advocacy system to people with disabilities in Illinois. Equip for Equality, Inc., provides self-advocacy assistance, legal services, education, public policy advocacy, and abuse investigations. The offices are located at:

Main/Chicago Office

20 N. Michigan, Ste 300
Chicago, Illinois 60602
(800) 537-2632 or
(312) 341-0022
TTY: (800) 610-2779
Fax: (312) 541-7544

Central Illinois

1 West Old Capitol Plaza, Suite 816
Springfield, IL 62701
(217) 544-0464
(800) 758-0464
TTY: (800) 610-2779
Fax: (217) 523-0720

Northwestern Illinois

1515 Fifth Avenue, Suite 420
Moline, IL 61265
(309) 786-6868
(800) 758-6869
TTY: (800) 610-2779
Fax: (309) 797-8710

Southern Illinois

300 E. Main Street, Suite 18
Carbondale, IL 62901
(618) 457-7930
(800) 758-0559
TTY: (800) 610-2779
Fax: (618) 457-7985

Website: www.equipforequality.org

I have explained these rights to the individual (or the guardian of the individual, if applicable) and have provided him or her a copy of it. A copy of this form has been filed in the individual's clinical record.

You have a right to agency staff assistance in contacting the above agencies. Please sign below:

Printed Name of Individual

Printed Name of Guardian (if applicable)

Signature of Individual or Guardian

Date

This summary of individual rights shall be maintained in the individual's record.