

# Department of Health and Mental Hygiene

## Rights and Responsibilities

### Of Individuals Requesting Home and Community Based Waiver Services

These are your **rights** as an individual requesting Home and Community Based waiver Services:

- To be treated with dignity and respect.
- To refuse to sign any paper that you do not understand or that is not complete.
- To appeal any decision made concerning your eligibility.
- To be assured that all information gather is confidential. Disclosure of information to anyone not authorized to receive it is a violation of State and Federal law.

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These are your **responsibilities** as an individual requesting Home and Community Based Waiver Services including the following:

- To immediately notify the Service Registry if your address or your other contact information changes at:

**Waiver Services Registry  
12051 Indian Creek Court  
Beltsville, Maryland 20705-1260**

**Waiver Services Registry Help Line: 1-866-417-3480 (toll free)**

- To cooperate in planning for all the services and supports you are requesting if you become eligible for waiver services.
- To provide DHMH with all necessary medical and financial information about yourself to help determine what services and supports you may need.
- To understand that waiver program have age, disability, and financial requirements and that you will not be offered services in a program if you do not meet the requirements of the program.
- To request to be placed on the Services Registry for a different program if you no longer meet any of the criteria as outlined on the waiver fact sheet that you received.
- To respond in a timely manner to any Service Registry correspondence. There may be an annual verification of your continued interest in waiver services.

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Student Name

\_\_\_\_\_  
Date Given to Parent

\_\_\_\_\_  
Parent Signature