

ND RYAN WHITE PROGRAM PART B CLIENT RIGHTS AND RESPONSIBILITIES DEPARTMENT OF HEALTH AND HUMAN SERVICES DISEASE CONTROL AND EORENSIC PATHOLOGY

DISEASE CONTROL AND FORENSIC PATHOLOGY SFN 62375 (7-2023)

Client's Name	RW Number	RW Agency

Client's Rights:

As a participant in the ND Ryan White Program Part B, you have the right to:

- Be treated with respect, dignity, consideration, and compassion.
- Receive Ryan White case management and other services free of discrimination on the basis of race, color, sex/gender, ethnicity, national origin, religion, age, class, sexual orientation, physical and/or mental ability.
- Participate in creating a plan for your care.
- Be informed about services and options available to you.
- Reach an agreement with your Ryan White case manager about the frequency of contact you will have, either in person or over the telephone.
- Have your Ryan White records be treated confidentially.
- File a grievance about services you are receiving or denial of services.

Client's Responsibilities:

As a participant in the North Dakota Ryan White Program Part B, you have the responsibility to:

- Treat other clients and staff of this agency with respect and courtesy.
- Protect the confidentiality of other clients you may encounter at this agency.
- Not subject case managers, staff, or other clients to physical, sexual, verbal and/or emotional abuse or threats.
- Participate as much as you are able in creating a plan for your care.
- Let your Ryan White case manager know any concerns you have about your care plan or changes in your needs.
- Make and keep appointments to the best of your ability, or if possible, call to cancel or change an appointment time.
- Stay in communication with your Ryan White case manager by informing them of changes in your address, phone number, or income, and respond to their calls or letters to the best of your ability.
- Provide your Ryan White case manager with any requests for payment of bills within **30** days of the statement date and provide the required documentation.
- Follow the Ryan White case manager's directions to get assistance from other available programs and services.
- Stay in care by visiting your doctor regularly and taking prescribed medication to ensure your health and well-being.
- Annually complete the re-enrollment documentation by **April 30**th for continued Ryan White program eligibility.

□ I understand the above information, and I have received a copy for my records.

Client/Guardian Signature	Date
Case Manager Signature	Date