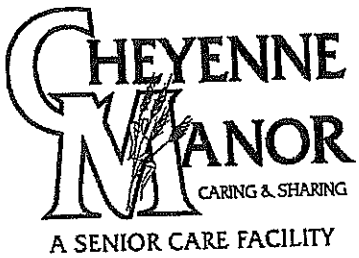


- Manage your own financial affairs, including the right to know what charges a facility may impose against your personal needs account (if applicable). An accounting of residents' personal needs funds/expenses is provided quarterly and upon request.
- The facility may not require you to set up a personal needs account, and must accommodate you if you choose to have the facility manage your personal needs accounts. This facility maintains all personal needs funds in an interest bearing account (separate from Operational Funds), and pays all balances greater than \$50 interest each month, exceeding minimum regulatory requirements.
- **483.10(g) - Information and Communication** - you have the right to:
  - Be informed of all your rights, all rules and regulations governing resident conduct and responsibilities during your stay at our facility.
  - Access personal and medical information pertaining to yourself, upon written request, within 24 hours (excluding weekends and holidays), and receive a copy of personal records for self with two (2) working days in advance notice to the facility, in a manner and format and language the resident can read and understand. The facility has the right to charge for copies, based on the current hourly rate for the employee making the copies (whether hard copy or electronic), overtime rates apply if copying exceeds 8 hours, \$0.25 per page black and white, \$1.00 per page for color copies, postage at actual cost, if requesting the files be mailed. All charges are due up front at the time of copy completion, and will not be billed.
  - Receive notices in writing and in a language you understand including: personal needs protection, procedures, eligibility for Medicaid, list of all pertinent local and state regulatory bodies governing nursing homes, advocacy groups, APS, complaint processes and when and where to file a grievance.
  - Reasonable access to a telephone and privacy where calls can be made without being overheard, as well as stationery, postage and writing implements and the ability to send and receive mail, packages and other materials.
  - Examine the most recent survey results and plan of correction, as well as receive information from state and regulatory agencies
  - Be provided with Advance Directives information and facility's policies regarding same.
  - Be informed how to apply for Medicare/Medicaid benefits, and what benefits are included.
  - Be notified of any changes when there has been an accident with injury and physician orders or treatment has changed or is needed, there is a significant change in resident condition, treatment changes are needed, a decision to transfer or discharge is needed or required.
  - Change in room assignment, change in resident rights.
- **483.10(h) - Privacy and Confidentiality** - You have the right to:
  - Personal privacy and confidentiality of your personal medical information. Personal privacy includes accommodations, medical treatment, written and telephone communications, personal care, visits and meetings of family and resident groups, but does not require the facility provide a private rooms for each resident.
  - Privacy in your oral, written and electronic communications, including the right to receive unopened mail and other letters and packages and materials.
  - Secure and confidential personal or medical records.
  - Refuse release of medical and personal records, except under legal or regulatory means



561 West 1<sup>st</sup> North  
PO Box 935  
Cheyenne Wells, CO 80810  
719-767-5602

**ADDENDUM I**  
**ACCESS TO MEDICAL INFORMATION**

Resident records are available to all residents and his or her legal representatives only. Family members not recognized by the courts as legal representative, guardian, POA or MDPOA, etc. are not permitted access to any medical or financial information without express written consent of the resident.

Access to review resident medical or financial information is granted Monday through Friday between the hours of 8:00 am and 4:00 pm after a written request has been made, not less than 24 hours in advance for viewing and 48 hours in advance if copies are needed.

There is no charge for viewing records. Copies of records are charged at a cost of \$0.25 per page.

If any resident, his or her representative wishes to file a grievance regarding medical records, he or she may do so by contacting:

Medical Care Licensing Certification Division,  
Colorado Department of Health  
4300 Cherry Creek Drive South  
Denver, CO 80222

Phone: (303) 692-2000

Nothing in this access policy will be construed to waive the responsibilities of the custodian of medical records in institutions to maintain confidentiality of those records in its possession.

_____	_____
Signature of Resident	Date
_____	_____
Signature of Legal Representative	Date
_____	_____
Signature of Facility Representative	Date