

Minnesota Bill of Rights for Assisted Living Residents

Effective 1-1-2026

Right to be Informed

Before receiving services, residents have the right to be informed by the facility of the rights granted and the recourse residents have if rights are violated. The information must be in plain language and in terms residents can understand. The facility must make reasonable accommodations for residents who have communication disabilities and those who speak a language other than English. When providers violate the rights in this section, they are subject to fines and license actions.

A written copy of the rights is being provided to you before initiation of services. All reasonable efforts will be made to provide notice of the rights in a language you can understand.

A written acknowledgement of your receipt of the Bill of Rights will be retained in your resident record. If a written acknowledgment cannot be obtained, the reason will be documented in the resident record.

Legislative intent

The rights established are for the benefit of residents and do not limit any other rights available under law. No facility may request or require that any resident waive any of these rights at any time for any reason, including as a condition of admission to the facility.

Applicability

These rights apply to residents living in assisted living facilities:

1. Appropriate care and services.

Residents have the right to care and assisted living services that are appropriate based on the resident's needs and according to an up-to-date service plan subject to accepted health care standards.

Residents have the right to receive health care and other assisted living services with continuity from people who are properly trained and competent to perform their duties and in sufficient numbers to adequately provide the services agreed to in the assisted living contract and the service plan.

2. Refusal of care or services.

Residents have the right to refuse care or assisted living services and to be informed by the facility of the medical, health-related, or psychological consequences of refusing care or services.

3. Participation in care and service planning.

Residents have the right to actively participate in the planning, modification, and evaluation of their care and services. This right includes:

- the opportunity to discuss care, services, treatment, and alternatives with the appropriate caregivers;
- the right to include the resident's legal and designated representatives and persons of the resident's choosing; and
- the right to be told in advance of, and take an active part in decisions regarding, any recommended changes in the service plan.

4. Courteous treatment.

Residents have the right to be treated with courtesy and respect, and to have the resident's property treated with respect.

5. Freedom from maltreatment.

Residents have the right to be free from physical, sexual, and emotional abuse; neglect; financial exploitation; and all forms of maltreatment covered under the Vulnerable Adults Act.

6. Right to come and go freely.

Residents have the right to enter and leave the facility as they choose. This right may be restricted only as allowed by other law and consistent with a resident's service plan.

6a. Designated support person.

(a) Subject to paragraph (c), an assisted living facility must allow, at a minimum, one designated support person chosen by the resident to be physically present with the resident at times of the resident's choosing while the resident resides at the facility.

(b) For purposes of this subdivision, "designated support person" means any person chosen by the resident to provide comfort to the resident, including but not limited to the resident's spouse, partner, family member, or another person related by affinity.

(c) A facility may restrict or prohibit the presence of a designated support person if the designated support person is acting in a violent or threatening manner toward others. A facility may restrict the presence of a resident's designated support person to the extent necessary to ensure a designated support person who is not a facility resident is not living at the facility on a short-term or long-term basis. If the facility restricts or prohibits a resident's designated support person from being present, the resident may file a complaint or inquiry with the facility according to subdivision 20, the Office of Ombudsman for Long-Term Care, or the Office of Ombudsman for Mental Health and Developmental Disabilities.

7. Individual autonomy.

Residents have the right to individual autonomy, initiative, and independence in making life choices, including establishing a daily schedule and choosing with whom to interact.

8. Right to control resources.

Residents have the right to control personal resources.

9. Visitors and social participation.

Residents have the right to meet with or receive visits at any time by the resident's family, guardian, conservator, health care agent, attorney, advocate, or religious or social work counselor, or any person of the resident's choosing. This right may be restricted in certain circumstances if necessary for the resident's health and safety and if documented in the resident's service plan.

Residents have the right to engage in community life and in activities of their choice. This includes the right to participate in commercial, religious, social, community, and political activities without interference and at their discretion if the activities do not infringe on the rights of other residents.

10. Personal and treatment privacy.

Residents have the right to consideration of their privacy, individuality, and cultural identity as related to their social, religious, and psychological well-being. Staff must respect the privacy of a resident's space by knocking on the door and seeking consent before entering, except in an emergency or unless otherwise documented in the resident's service plan.

Residents have the right to have and use a lockable door to the resident's unit. The facility shall provide locks on the resident's unit. Only a staff member with a specific need to enter the unit shall have keys. This right may be restricted in certain circumstances if necessary for a resident's health and safety and documented in the resident's service plan.

Residents have the right to respect and privacy regarding the resident's service plan. Case discussion, consultation, examination, and treatment are confidential and must be conducted discreetly. Privacy must be respected during toileting, bathing, and other activities of personal hygiene, except as needed for resident safety or assistance.

11. Communication privacy.

Residents have the right to communicate privately with persons of their choice.

If an assisted living facility is sending or receiving mail on behalf of residents, the assisted living facility must do so without interference.

Residents must be provided access to a telephone to make and receive calls.

12. Confidentiality of records.

Residents have the right to have personal, financial, health, and medical information kept private, to approve or refuse release of information to any outside party, and to be advised of the assisted living facility's policies and procedures regarding disclosure of the information. Residents must be notified when personal records are requested by any outside party.

Residents have the right to access their own records.

13. Right to furnish and decorate.

Residents have the right to furnish and decorate the resident's unit within the terms of the assisted living contract.

14. Right to choose roommate.

Residents have the right to choose a roommate if sharing a unit.

15. Right to access food.

Residents have the right to access food at any time. This right may be restricted in certain circumstances if necessary for the resident's health and safety and if documented in the resident's service plan.

16. Access to technology.

Residents have the right to access Internet service at their expense.

17. Grievances and inquiries.

Residents have the right to make and receive a timely response to a complaint or inquiry, without limitation. Residents have the right to know and every facility must provide the name and contact information of the person representing the facility who is designated to handle and resolve complaints and inquiries.

18. Access to counsel and advocacy services.

Residents have the right to the immediate access by:

- the resident's legal counsel;
- any representative of the protection and advocacy system designated by the state under Code of Federal Regulations, title 45, section 1326.21; or

- any representative of the Office of Ombudsman for Long-Term Care or the Office of Ombudsman for Mental Health and Developmental Disabilities.

19. Information about charges.

Before services are initiated, residents have the right to be notified:

- of all charges for housing and assisted living services;
- of any limits on housing and assisted living services available;
- if known, whether and what amount of payment may be expected from health insurance, public programs, or other sources; and
- what charges the resident may be responsible for paying.

20. Information about individuals providing services.

Before receiving services identified in the service plan, residents have the right to be told the type and disciplines of staff who will be providing the services, the frequency of visits proposed to be furnished, and other choices that are available for addressing the resident's needs.

21. Information about other providers and services.

Residents have the right to be informed by the assisted living facility, prior to executing an assisted living contract, that other public and private services may be available and that the resident has the right to purchase, contract for, or obtain services from a provider other than the assisted living facility.

22. Resident councils.

Residents have the right to organize and participate in resident councils as described in section [144G.41, subdivision 5.](#)

23. Family councils.

Residents have the right to participate in family councils formed by families or residents as described in section [144G.41, subdivision 6.](#)

Resources

You may contact your licensed provider as indicated below:

Licensee Name: _____

Phone: _____

Email: _____

Address: _____

Name and title of person to whom problems or complaints may be directed:

Report suspected abuse, neglect, or financial exploitation of a vulnerable adult:

If you want to report suspected abuse, neglect, or financial exploitation, you may contact the Minnesota Adult Abuse Reporting Center (MAARC). If you have a complaint about the facility or person providing your services, you may contact the Office of Health Facility Complaints, Minnesota Department of Health. You may also contact the Office of Ombudsman for Long-Term Care or the Office of Ombudsman for Mental Health and Developmental Disabilities.

The facility or agent of this facility will not retaliate against a resident or employee if the resident, employee, or any person acting on behalf of the resident:

- (1) files a good faith complaint or grievance, makes a good faith inquiry, or asserts any right;
- (2) indicates a good faith intention to file a complaint or grievance, make an inquiry, or assert any right;
- (3) files, in good faith, or indicates an intention to file a maltreatment report, whether mandatory or voluntary, under section [626.557](#);
- (4) seeks assistance from or reports a reasonable suspicion of a crime or systemic problems or concerns to the director or manager of the facility, the Office of Ombudsman for Long-Term Care, the Office of Ombudsman for Mental Health and Developmental Disabilities, a regulatory or other government agency, or a legal or advocacy organization;
- (5) advocates or seeks advocacy assistance for necessary or improved care or services or enforcement of rights under this section or other law;
- (6) takes or indicates an intention to take civil action;
- (7) participates or indicates an intention to participate in any investigation or administrative or judicial proceeding;
- (8) contracts or indicates an intention to contract to receive services from a service provider of the resident's choice other than the facility; or
- (9) places or indicates an intention to place a camera or electronic monitoring device in the resident's private space as provided under section [144.6502](#).

MINNESOTA ADULT ABUSE REPORTING CENTER (MAARC)

Phone: 1-844-880-1574

For more information: <https://mn.gov/dhs/adult-protection/>

For all other complaints that are not suspected abuse, neglect, or financial exploitation of a vulnerable adult, please contact the Office of Health Facility Complaints at the Minnesota Department of Health:

MINNESOTA DEPARTMENT OF HEALTH
OFFICE OF HEALTH FACILITY COMPLAINTS
PO Box 64970
St. Paul, MN 55164-0971
Phone: 651-201-4200 or 1-800-369-7994 Fax: 651-281-9796
Email: health.ohfc-complaints@state.mn.us
Web: <https://www.health.state.mn.us/facilities/regulation/ohfc/index.html>

You may contact the Ombudsman for Long-Term Care for questions about your rights as an assisted living facility resident and to request advocacy services. As an assisted living facility resident, you may contact the Ombudsman for Mental Health and Developmental Disabilities to request advocacy regarding your rights, concerns, or questions on issues relating to services for mental health, developmental disabilities, or chemical dependency.

OFFICE OF OMBUDSMAN FOR LONG-TERM CARE
PO Box 64971
St. Paul, MN 55164-0971
1-800-657-3591 or 651-431-2555
Email: MBA.OOLTC@state.mn.us
Web: Office Of Ombudsman for Long-Term Care (https://mn.gov/oo_ltc/)

OFFICE OF OMBUDSMAN FOR MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES
332 Minnesota Street
Suite W1410, First National Bank Building
St. Paul, Minnesota 55101-2117
1-800-657-3506 or 651-757-1800
Email: Ombudsman.mhdd@state.mn.us
Web: <https://mn.gov/omhdd/>

MID-MINNESOTA LEGAL AID/MINNESOTA DISABILITY LAW CENTER
(Protection and Advocacy Systems)
430 First Avenue North, Suite 300 Minneapolis,
MN 55401-1780
1-800-292-4150
Email: mndlc@mylegalaid.org
Web: <http://mylegalaid.org/>

MINNESOTA DEPARTMENT OF HUMAN SERVICES
(Medicaid Fraud and Abuse-payment issues)
Surveillance and Integrity Review Services
PO Box 64982 St Paul, MN 55164-0982
1-800-657-3750 or 651-431-2650
DHS.SIRS@state.mn.us

Aging Pathways (Aging and Disability Resource Center/Agency on Aging)
540 Cedar Street
St. Paul, MN 55164
(800) 333-2433
aging.pathways@state.mn.us

For assisted living inquiries at the Minnesota Department of Health, please contact:
Minnesota Department of Health, Health Regulation Division
P.O. Box 64970 St. Paul, Minnesota 55164-0970 Phone: 651-201-4200
Email: health.assistedliving@state.mn.us
Web: Assisted Living Licensure - MN Dept. of Health

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Assisted Living Bill of Rights – Acknowledgement of Receipt

Effective January 1, 2026, Minnesota's Assisted Living Bill of Rights includes new language under Minnesota Statute 144G.91, Subdivision 6a, ensuring that residents have the right to have a support person physically present at any time of their choosing.

In accordance with Minnesota Statute 144G.90, Subd. 1(d), providers must obtain a written acknowledgment from each resident or responsible party confirming receipt of the updated Assisted Living Bill of Rights.

By signing below, I acknowledge that I have received and reviewed the updated Assisted Living Bill of Rights, effective January 1, 2026.

Resident Name: _____

Resident Signature: _____ Date: _____

Responsible Party Name (if applicable): _____

Responsible Party Signature: _____ Date: _____