

# **PACE** at Hudson Headwaters

**Providing All-Inclusive Care for the Elderly** 

# **Enrollment Agreement**

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## 1. Welcome to PACE!

Welcome to PACE at Hudson Headwaters, a Program of All-inclusive Care for the Elderly (PACE). We are happy that you chose PACE at Hudson Headwaters for your healthcare.

This is your Enrollment Agreement. It will tell you what PACE is and what kind of care will be provided for you. If you choose to enroll, you will sign the Enrollment Signature Sheet, indicating that you agree to receive all services through PACE at Hudson Headwaters. When you enroll, you become a "Participant" in PACE at Hudson Headwaters.

PACE at Hudson Headwaters is a healthcare services plan designed just for people 55 and older who have ongoing healthcare needs. This health plan will arrange for doctors, nurses, or other specially trained providers to help with these care needs. It also gives PACE at Hudson Headwaters Participants a place to go to receive this care. PACE at Hudson Headwaters is a complete healthcare program that offers a more personal way of getting healthcare. All of us at PACE at Hudson Headwaters want to get to know you, work with you and your family in order to provide the care that will best serve you. Since we enroll only individuals, dependents are not covered when you enroll.

This document should be read carefully and completely. Individuals with special healthcare needs should carefully read those sections that apply to them. Please keep this booklet. Your signed copy of the PACE at Hudson Headwaters Enrollment Agreement is a legally binding contract between you and PACE at Hudson Headwaters.

In this agreement, PACE at Hudson Headwaters is sometimes called "we" and you are sometimes called the "Participant" or "member". The term "Participant" is most often used at PACE at Hudson Headwaters. Some of the terms used in this document may not be familiar to you. Please refer to the "Definitions" section for explanations of various terms used.

Our philosophy at PACE at Hudson Headwaters is to help you remain as independent as possible, while living safely in your own community and home. We offer a complete program of health and health-related services and focus on *preventive* measures to maintain your well-being.

One unique feature of PACE at Hudson Headwaters is the personalized approach to healthcare and services. We make sure that you and our healthcare staff all know each other, so we can work well together on your behalf. We collaborate with you to provide the care you need. Your suggestions and comments are encouraged and welcomed.

PACE at Hudson Headwaters provides services 24 hours a day, seven days a week, 365 days a year. Healthcare professionals will watch for changes in your condition, provide treatment, and encourage you to do things for yourself.

Medical, nursing, physical therapy, occupational therapy, nutritional, and social work services are all offered through the PACE program. In addition, services you can get in your home and specialty medical services such as hearing, dentistry, vision, psychiatry, and speech therapy can be provided by our contractors and will be coordinated through the PACE at Hudson Headwaters Interdisciplinary Team (IDT).

If you need care in a hospital, PACE at Hudson Headwaters will arrange for your care and payment of this care (excluding emergency care needs which do not require prior authorization). If your health declines and/or you are no longer safe to live in the community per team assessments, PACE at Hudson Headwaters may arrange for your care at a contracted skilled nursing facility. PACE at Hudson Headwaters is also interested in the social, cultural, and economic needs of you and your family.

Your choices for healthcare must be approved in advance by the IDT for those services to be paid for by PACE at Hudson Headwaters. If your IDT finds it necessary or you request additional services from other doctors or specialists, the IDT will assess you and will either approve or deny these services. If PACE at Hudson Headwaters approves your request, we will make the appointment for you and arrange transportation to the appointment. Your caregiver, family member, or other relatives are encouraged to attend all medical appointments with you. If you make appointments without the knowledge or approval of the IDT, you may be responsible for payment of those services.

Prior authorization is never required for Emergency Services.

There are no co-payments or co-insurance for PACE services.

PACE at Hudson Headwaters is committed to helping you be as healthy as possible for as long as possible. We want to help you to remain in your own home and community with your family for as long as possible. We will do our best to help you get better, so that you can continue to do the things you enjoy. We will focus on what you can do, instead of what you cannot do.

If you would like further information about the benefits of PACE at Hudson Headwaters, please feel free to contact us at:

## 518-886-7223

## For the hearing impaired (TTY/TDD), please call 711

Participants are enrolled in this program and are rendered services without distinction due to race, color, ethnicity, national origin, religion, sex, sexual orientation, mental or physical disability, source of payment, or age\*.

\* Note: Does not apply to enrollment eligibility age of 55 or older.

Note: PACE at Hudson Headwaters has an agreement with the federal Centers for Medicare and Medicaid Services (CMS) and the New York State Department of Health that is subject to renewal on a periodic basis and, if the agreement is not renewed, the program will be terminated.

## 2. Our Mission

The PACE at Hudson Headwaters mission is to promote and sustain the independence of older adults with significant health needs who want to continue living safely at home and in the community. PACE is designed to preserve and support the older adult's family unit while maximizing the dignity of and respect for older adults.

## 3. Definitions

- 1. PACE refers to the Program of All-inclusive Care for the Elderly. This is a special, comprehensive service plan that provides medical and health-related care to older people who are eligible for nursing home care and who live in the service area. PACE at Hudson Headwaters arranges for you to come to the PACE Day Center to receive individualized care from doctors, nurses, and other health and social service providers. The goal is to help you stay independent in the community for as long as safely possible. The words "we", "our", "us" also mean PACE at Hudson Headwaters.
- 2. Benefits and Coverage means the health and health-related services we provide after you sign the Enrollment Agreement. These services take the place of the care and medicine you would usually get through Medicare and/or Medicaid. This is done through a special arrangement between PACE, Medicare (Centers for Medicare and Medicaid Services) and Medicaid (New York State Department of Health). PACE at Hudson Headwaters gives you the same benefits you would get under Medicare/Medicaid plus other benefits. To get any benefits from PACE at Hudson Headwaters, you must meet the conditions described in this Enrollment Agreement.
- 3. Care Team means the PACE at Hudson Headwaters interdisciplinary team, which is made up of a primary care provider, social worker, registered nurse, PACE Day Center manager, home care coordinator, physical therapist, recreational therapist or activities manager, occupational therapist, Participant care associate, transportation coordinator, and a dietitian. The team may also include additional specialties as needed, such as the pharmacist or a speech therapist. They will review your medical, functional, and psychosocial conditions and develop a treatment plan to give the care you need. Many of the services are provided and monitored by this Team. All services you receive must be approved by a member of your care team. Your Team will assess you at least twice a year, will meet to talk about your needs and decide whether they have changed, and will change your care plan to meet these needs when necessary.
- **4. Eligible for Nursing Home Care** means that your health condition meets the New York State requirements for nursing home placement. The goal of PACE at Hudson Headwaters, however, is to help you stay in the community as long as possible, even if you are eligible for nursing home care.
- 5. Enrollment Agreement means this document which tells you about PACE at Hudson Headwaters, who is eligible to be a Participant, how to enroll and how to cancel enrollment, what kind of care you will receive, what your rights are, and all other rules and requirements of PACE at Hudson Headwaters. You must sign the Enrollment Agreement before you can be a PACE at Hudson Headwaters Participant. After you sign this agreement, you will get PACE services until

- you voluntarily or involuntarily end your enrollment and participation.
- **6. Emergency Medical Condition** is a medical condition that is so serious that it is life threatening and/or could cause your health or bodily functions to be in danger. Prior authorization for treatment of an emergency medical condition is not required.

# Examples of emergencies include problems breathing, chest pain, or bleeding that is hard to stop.

- 7. **Health Services** mean services such as medical care, diagnostic tests, medical equipment, appliances, drugs, prosthetic and orthotic devices, nutritional counseling, nursing, social services, therapies, dentistry, optometry, and audiology. Health Services may be provided in the PACE at Hudson Headwaters Day Center or in your home. These services may also be provided in the offices of specially trained providers, hospitals, or nursing homes that have agreements with PACE at Hudson Headwaters to give healthcare services to PACE Participants.
- **8. Health Related Services** means the services which help PACE at Hudson Headwaters provide you with health services and help you maintain your independence. Such services include personal care, homemaker/chore attendant, recreational therapy, escort, transportation, homedelivered meals, financial management, and help with housing problems.
- **9. Hospital Services** mean those services which are usually given in general medical-surgical hospitals.
- 10. Medicare Part D means the Medicare prescription drug benefit. All PACE at Hudson Headwaters eligible enrollees will have their drug benefit provided by PACE. There are no additional co-payments or deductibles necessary. PACE at Hudson Headwaters provides the entire drug benefit including any over-the-counter medications your provider prescribes. PACE does not use a drug formulary or list from which drugs are provided, rather your PACE at Hudson Headwaters providers work with you and your care team to select the medication that is best for you.
- 11. **Monthly Charge** means the amount you must pay, if you are required, on the first (1st) day of every month, to PACE at Hudson Headwaters to receive benefits as an enrolled Participant.
- **12. Nursing Home** means a health facility licensed as a Skilled Nursing Facility by the State of New York.
- 13. Participant means anyone who is eligible and has signed the Enrollment Agreement to receive healthcare benefits and services from PACE at Hudson Headwaters. The words "you", "your", or "yours" also mean Participant.
- 14. Post Stabilization Care means care provided after an emergency that your treating provider sees as medically necessary after your emergency medical condition is stable. This care must be approved by PACE at Hudson Headwaters before being provided outside the service area.
- 15. PACE at Hudson Headwaters Primary Care Provider means a doctor, nurse practitioner, or physician assistant who either works for PACE at Hudson Headwaters or has signed an agreement with PACE at Hudson Headwaters to provide medical care services.

#### **16.** Service Area:

**Saratoga County:** 12074 South of Route 29, 12148, 12835 East of Route 4/7 Split, 12850, 12822, 12859, 12019, 12020, 12027, 12065, 12118, 12151, 12170, 12803, 12831, 12833, 12828, 12863, 12866, 12871, 12884

**Warren County:** 12808, 12810 East of Route 76, 12815, 12843 Up to Park Rd and Route 72, 12853, 12878 East of Stony Creek, 12814, 12885, 12801, 12804, 12817, 12824, 12844, 12845, 12846, 12860, 12886,

**Washington County:** 12887, 12832, 12809, 12821, 12823, 12827, 12828, 12838, 12839, 12849, 12865, 12834

- 17. **Service Location -** means any location in the counties/zip codes above where you are given health or health-related services.
- 18. Urgent Care Services means care given when you are outside of the PACE at Hudson Headwaters service area and you believe that the care for your illness or injury cannot wait until you return to the service area, but the condition does not put your life or bodily functions in danger.

# 4. Special Features

There are some things in our plan that no other healthcare plan will give you.

- Care team a care team made up of people working especially for you creates a care plan with you and your family. Your team includes, at a minimum, a primary care provider, a registered nurse, a social worker, a dietitian, a physical therapist, an occupational therapist, a recreational therapist or an activity manager, a PACE Day Center manager, a homecare coordinator, a Participant Care Associate (or their representative), and a driver (or their representative). Each team member's special skills are used to find out all of your healthcare needs. The team may also call on other specialists.
- Authorization of Care You will get to know each of your team members very well. They will help you to be as healthy and independent as possible. Your choices for healthcare must be approved in advance by your team for those services to be paid for by PACE at Hudson Headwaters. At least twice a year, your team will talk about your needs. They will talk with you and your family to see if these needs have changed. They will meet more often with you and your family if your health needs require it, or at the request of you or your family.

If your care team finds it necessary for you to receive additional services from other providers or specialists, then they will approve these services before you see the outside provider. If you make appointments without the knowledge or consent of the team, you may be responsible for payment of those services.

• **PACE Day Center** - You will receive most of your healthcare services through our PACE at Hudson Headwaters Day Center that is a multi-purpose Day Center that provides you with healthcare, nutritious meals, activities, and opportunities to socialize and make new friends.

- Primary Care Provider Your PACE at Hudson Headwaters primary care provider is a doctor, nurse practitioner, or physician assistant, and together with the other Team members who will provide your care make up your care team.
- Appropriate Place and Days for Your Care The reason PACE at Hudson Headwaters was developed is to provide care where it is needed. Your care team will decide the best way of caring for you and the best location after talking with you and your family. The Team also will decide what kind of care you may receive in your home and at the PACE at Hudson Headwaters Day Center. Services that are authorized by your care team are paid for by PACE at Hudson Headwaters.
- "Lock-In" Provisions Once you are a PACE at Hudson Headwaters Participant, your healthcare services must be provided through PACE at Hudson Headwaters. These services must be approved by the members of your care team. You may be fully and personally liable for the cost of unauthorized or out-of-PACE-network services.
- Special Payment If you are eligible for Medicare and/or Medicaid, PACE at Hudson Headwaters takes the place of the standard Medicare and/or Medicaid programs. The only payment made by Medicare and/or Medicaid for the care you need will be one payment each month to PACE at Hudson Headwaters. PACE at Hudson Headwaters will provide all of your care. You will receive all the services you normally receive through Medicare and Medicaid and may, in fact, even receive more services. This includes the prescription drug benefit you would be eligible for if you have elected to participate in Medicare Part D or are dually eligible for Medicare and Medicaid. There are no additional co-payments or deductibles charged to you for any of the services provided by PACE at Hudson Headwaters.
- **Financial Consent Form** If you are eligible for Medicare and <u>not</u> Medicaid, you will be asked to pay what is equal to the payment PACE at Hudson Headwaters gets from Medicaid each month. You will be asked to sign a financial consent form acknowledging your agreement to pay the monthly premium.

## 5. Eligibility

### To be eligible for enrollment in PACE at Hudson Headwaters you must:

- Be at least 55 years old;
- Live in the PACE at Hudson Headwaters service area which includes the following zip codes:

**Saratoga County:** 12074 South of Route 29, 12148, 12835 East of Route 4/7 Split, 12850, 12822, 12859, 12019, 12020, 12027, 12065, 12118, 12151, 12170, 12803, 12831, 12833, 12828, 12863, 12866, 12871, 12884

**Warren County:** 12808, 12810 East of Route 76, 12815, 12843 Up to Park Rd and Route 72, 12853, 12878 East of Stony Creek, 12814, 12885, 12801, 12804, 12817, 12824, 12844, 12845, 12846, 12860, 12886,

**Washington County:** 12887, 12832, 12809, 12821, 12823, 12827, 12828, 12838, 12839, 12849, 12865, 12834

- Be certified as having met the nursing home requirements by the New York State Department of Health; and
- Be able to live in the community at the time of enrollment without jeopardizing your health or safety.

# 6. Accessing Services-Intake and Enrollment

There are four (4) steps to enrolling in PACE at Hudson Headwaters. As soon as you have completed all four steps, your medications, care from a provider, and other services described in this agreement are covered. The four steps are:

#### 1. Intake

Intake usually starts when you, someone in your family, a caregiver, or even someone from a community agency calls PACE at Hudson Headwaters to talk about your care needs. This call tells us that you may be eligible to be a PACE at Hudson Headwaters Participant. We will either come to your home or have you come to the PACE Day Center to talk to you and explain our program. We will look at your medical and other care needs and decide the best way to meet them. During this visit, we will:

- Review the PACE at Hudson Headwaters Enrollment Agreement.
- Explain how the PACE at Hudson Headwaters program works, the services we offer, and answer any questions you may have. Explain how if you enroll, you must agree to get all of your healthcare services from PACE at Hudson Headwaters. We will also provide the list of providers in our network.
- Check to see if you are enrolled in Medicare and/or Medicaid. If you do not have Medicaid, PACE at Hudson Headwaters will talk with you or your caregiver about your willingness to seek eligibility for Medicaid or to pay privately to join the program.
- Give you the name and phone number of the Enrollment Specialist who can be contacted for additional information or to answer any follow-up questions.

After this visit, if you are interested in becoming a Participant in PACE at Hudson Headwaters, a member of the care team will discuss the next steps to determine your eligibility.

#### 2. Assessment

There are two ways you can choose to have your assessment:

• Direct Eligibility: You can have PACE at Hudson Headwaters complete your assessment, which will see if you are eligible to join our plan. If you select Direct Eligibility, PACE at Hudson Headwaters will conduct your assessment. We will let you know if you are eligible for PACE. If you are found eligible, we can work with you to join our Plan. All Direct Eligibility assessments will be reviewed by the New York Independent Assessor (NYIA) to see if you can remain in the Plan. You should note that our Direct Eligibility assessment only applies towards enrollment into PACE at Hudson Headwaters.

OR

• New York Independent Assessor (NYIA): You can contact NYIA to schedule an assessment. NYIA is the state-contracted independent assessor, that oversees and conducts assessments for individuals seeking personal care services, consumer directed personal assistance services, or Managed Long-Term Care (MLTC), including PACE. If you choose to have a NYIA assessment and you are found eligible for PACE enrollment, there will be no further review. If you are not eligible for PACE enrollment, the NYIA assessment can also be used to see if you are eligible for other MLTC programs.

### Do Direct Eligibility and NYIA use the same assessment?

Yes, Direct Eligibility and NYIA use the same assessment tool to help see if you are eligible for PACE. Our staff can assist you with both Direct Eligibility and contacting NYIA.

## What if Direct Eligibility finds I am not eligible for PACE?

If our Plan's Direct Eligibility assessment finds that you are NOT eligible for PACE, you may contact NYIA to have another assessment completed to see if you are eligible for PACE or other services. NYIA will provide you the results of their assessment and let you know your available options.

## How does NYIA review my Direct Eligibility assessment?

If you choose a Direct Eligibility assessment, within 30 days of PACE enrollment, NYIA will conduct a quality review of the Direct Eligibility assessment. In most cases, you will not be involved in this review, and you will not need to take any action. In a small number of cases, NYIA may contact you to repeat the assessment. If you are contacted by NYIA, you are required to have another assessment by NYIA.

## What happens if the NYIA repeat assessment finds that I am not eligible for PACE?

If NYIA's repeat assessment finds that you are not eligible for PACE, you will receive a notice from our Plan and a Disenrollment Notice from New York Medicaid Choice (NYMC). If you receive a Disenrollment Notice, contact a New York Medicaid Choice counselor immediately to go over your next steps and tell you your options. The Disenrollment Notice will also include information about your rights to a Conference and Fair Hearing if the assessment finds that you are not eligible for PACE.

## What happens if I am disenrolled from PACE?

PACE at Hudson Headwaters will work with you to ensure a safe and smooth transition. You may contact New York Medicaid Choice, the New York State Enrollment Broker, at the phone number below to assist you with next steps.

### How do I choose between NYIA and Direct Eligibility?

Choosing between the two ways is up to you. Both ways will use the same assessment tool to help see if you are eligible for PACE. You may select whichever one works best for you and our staff is available to assist you.

#### **Questions?**

Please feel free to reach out to Social Work Services at PACE at Hudson Headwaters from 8:00 a.m. until 5:00 p.m., Monday through Friday, at: 518-886-7223.

TTY/TDD for the hearing impaired: 711

You can also call, New York Independent Assessor at 1-855-222-8350 (TTY: 1-888-329-1541). You can call Monday - Friday, from 8:30 a.m.-8:00 p.m. and Saturday, from 10:00 a.m. - 6:00 p.m.

You may also contact the Independent Consumer Advocacy Network. The Independent Consumer Advocacy Network (ICAN) is the ombudsman program for health plan members. ICAN can answer your questions and give you free, independent advice about your coverage, complaints, and appeal options. To learn more about ICAN, go to www.icannys.org or call 1-844-614-8800. TTY: 711. All services are free.

#### 3. Final Approval

Once the assessment is complete and it is determined you are eligible to receive services from PACE at Hudson Headwaters, a member of the care team will schedule for you and your family/caregiver to come to the PACE at Hudson Headwaters Day Center. At the Day Center, you will meet with the care team to talk about your health, your care needs, your preferences, and your goals. The care team will start assessing your needs and develop a care plan for you, based on the information you provided and their professional assessment.

We will also ask you to sign a form(s) that gives us permission to get your medical records from providers you have seen so we can get a complete picture of your health condition, your financial information, and your eligibility status for Medicare and Medicaid.

PACE at Hudson Headwaters serves only people who are determined as meeting the need for nursing home level of care. Therefore, the New York State Department of Health must agree that your health situation makes it necessary for you to have the kind of care PACE at Hudson Headwaters provides. The New York State Department of Health appointed partner, New York Medicaid Choice, will review the assessment that was completed by New York Independent Assessor Program and PACE at Hudson Headwaters to make sure they agree that you need care from

PACE at Hudson Headwaters to remain safely in your home or the community. If you do not qualify for the services PACE at Hudson Headwaters provides, you will not be eligible to enroll. Additionally, if we find during our assessment that you are not able to live safely in the community, your enrollment may be denied. If either of these should happen, you may appeal the decision to the New York State Department of Health.

If you do not qualify to enroll in PACE, your eligibility for Medicare and/or Medicaid will not be affected.

#### 4. Enrollment

A care team member will meet with you to talk about enrolling in PACE at Hudson Headwaters. You can have your family, or a caregiver attend this meeting. We will discuss:

- The plan of care the care team feels you need and how PACE at Hudson Headwaters intends to meet your care needs.
- Your monthly costs, if any.
- The "Lock-in" feature when you are a PACE at Hudson Headwaters Participant, you will be cared for by your care team. This means that once you are a PACE at Hudson Headwaters Participant your healthcare services will be provided only through PACE at Hudson Headwaters. These services will be approved by members of your care team. If you are eligible for Medicare and/or Medicaid, PACE at Hudson Headwaters takes the place of the standard Medicare and/or Medicaid programs. The only payment each month Medicare and/or Medicaid pays is directly to PACE at Hudson Headwaters. They will not pay other providers, because you may only be enrolled in one Medicare or Medicaid program at a time; and
- What to do if you are unhappy with the care you receive from PACE at Hudson Headwaters.

We will ask you to sign the Enrollment Agreement signature sheet. This must be signed before you can receive PACE services. Your enrollment will be effective on the first day of the month following the date we receive your signed Enrollment Agreement. After you sign it, you will receive:

- A PACE at Hudson Headwaters membership card. You will use this card in place of your Medicare and/or Medicaid cards.
- The Emergency Magnet. This brightly colored magnet identifies you as a PACE at Hudson Headwaters Participant and explains how to access emergency services and should be placed on your refrigerator. This keeps it handy when you need it most.
- Your copy of the signed **Enrollment Agreement**.

- Your signed Acknowledgement of the Care Plan that your care team designed for you.
- Your care team information and list of network providers.
- A Confidentiality Statement.
- A photo/media release form.

## **Important Notice:**

If you are eligible for Medicare or Medicaid, the services or benefits you get once you become a Participant in PACE at Hudson Headwaters are made possible through a special agreement that we have with Medicare (The Centers for Medicare and Medicaid Services (CMS) of the United States Department of Health and Human Services) and Medicaid (the New York State Department of Health). When you become a PACE at Hudson Headwaters Participant, you agree to accept benefits ONLY from PACE at Hudson Headwaters in place of your usual Medicare and Medicaid benefits. PACE at Hudson Headwaters will provide the same basic benefits and may provide more. Enrolling in PACE at Hudson Headwaters will result in disenrollment from any other Medicare and/or Medicaid program or benefit.

Before you sign the Enrollment Agreement, please read it carefully and be sure that it has been fully explained to you. Ask PACE at Hudson Headwaters staff questions to make sure you understand everything. If you enroll with us, you may cancel your enrollment if you change your mind. Please see section 16 – Termination of Benefits for more information on how to disenroll from PACE at Hudson Headwaters.

Note: You may not enroll in PACE by going to the Social Security Office.

## 7. Healthcare Advanced Directives

It is important to PACE at Hudson Headwaters and your care team to understand how you want your healthcare to be provided. A time may come when you are too sick to talk to your PACE at Hudson Headwaters care team, your family, or your friends. It is the policy of PACE at Hudson Headwaters to discuss with you and your family, before you get too sick, what kinds of care you want provided. There are several ways for PACE at Hudson Headwaters to do this.

PACE at Hudson Headwaters will keep a written and signed copy of the kind of care instructions that you want. No matter what you decide, PACE at Hudson Headwaters must give you the care you want. Here are ways for you to let PACE at Hudson Headwaters understand and honor your wishes:

- You may give written instructions. An "advance directive" is a document by which you prepare for future health care decisions in the event that you are unable to make such decisions for yourself. There are three types of advance directives: health care proxy form, living will, and do not resuscitate order (DNR).
- You may ask someone else to decide your care for you. Completing a "health care proxy" form lets you select a health care agent; someone you trust to make health care decisions for you if you are unable to make decisions for yourself.

- You may have a conversation with your provider to talk about your preferences regarding endof-life care using the "medical orders for life-sustaining treatment (MOLST)" form, which tells
  providers about your wishes for life-sustaining treatment in the event of a medical emergency; or
- If you do not want to do either an advanced healthcare directive or MOLST, then all you have to do is talk to your PACE at Hudson Headwaters provider. Your PACE at Hudson Headwaters provider will write down what you want, as part of your medical record.

If you already have an advance directive or MOLST, please share a copy with PACE at Hudson Headwaters.

# 8. Benefits and Coverage

## **General Description**

There are many kinds of care provided by PACE at Hudson Headwaters. As a Participant in the PACE program, all necessary health services will be provided through PACE at Hudson Headwaters. Most care is delivered at the PACE at Hudson Headwaters Day Center. Your care team knows about every kind of service offered and will decide with you on what best meets your needs. Services you may get from PACE at Hudson Headwaters are:

## A. Outpatient Health Services

- **1.** Adult Day Healthcare.
- 2. Physician, clinic and specialist services, which may include advanced practice nurses and physician assistants. Female Participants are entitled to choose a qualified specialist for women's health services from the PACE at Hudson Headwaters provider network to furnish routine and preventive care. Specialty services may include:
  - Anesthesiology
  - Audiology
  - Behavioral Health services/mental health and substance abuse services including community psychiatric rehabilitation services
  - Cardiology
  - Dermatology
  - Gastroenterology
  - Gynecology
  - Internal Medicine
  - Nephrology
  - Neurology
  - Neurosurgery

- Oncology
- Ophthalmology
- Oral Surgery
- Orthopedic Surgery
- Otorhinolaryngology (ear, nose and throat)
- Pulmonary Disease
- Radiology
- Rheumatology
- General Surgery and Ambulatory Surgery
- Thoracic and Vascular Surgery
- Urology

- **3.** Nursing Care
- 4. Social Services
- 5. Physical, Occupational and Speech Therapy
- **6.** Podiatry
- 7. Help for you and your family on how to choose and cook healthy foods
- **8.** Lab tests, X-rays and other tests used to find out what health problems you may have
- **9.** Artificial limbs and durable medical equipment (such as hospital beds, wheelchairs, and walkers)
- 10. Vision care, including examinations, treatment, and items to help you see better, such as eyeglasses
- 11. Psychiatric Care including evaluation, consultation, diagnosis, and treatment
- 12. Hearing Services, including evaluation, hearing aids, repairs, and maintenance
- 13. Prescribed drugs and medicines, including over-the-counter medications that are prescribed by your provider. If you have Medicare Part D, PACE now becomes your Prescription Drug Plan and takes the place of your existing Part D plan.

## B. Hospital Inpatient Care

- Room and meals
- General medical and Nursing services
- Medical/Surgical, Intensive Care, Coronary Care units, as necessary
- Laboratory tests, X-rays and other tests used to find out what health problems you have
- Prescribed drugs and medicines
- Giving you blood or some of the different parts of blood
- C. Long-Term Care Facility
  - Room and meals
  - Doctor and nursing services
  - Custodial care
  - Personal care and assistance

- Surgical care including use of medicine that puts you to sleep during surgery
- Use of Oxygen
- Physical, Speech,
   Occupational and Respiratory
   Therapies
- Medical Social Services
- Emergency Department Care
- Ambulance Service
- Treatment Room Services
  - Physical, Speech and Occupational Therapies
  - Medical Social Services
  - Medical supplies and appliances

#### D. Home Healthcare

- Skilled nursing services.
- Doctor's visits
- Physical, Speech, and/or Occupational Therapies
- Social Services
- Home Health Aide Services

- Homemaker/Chore services
- Home delivered meals, including special diets
- Respite Care
- Personal care and assistance

## E. End of Life Care

End of Life Care services are available to care for you if you are terminally ill. If needed, your care team will work with you and your family to provide these services directly or through our contracted providers. The services may be provided in your home or in a contracted facility, such as a nursing home, hospital, or hospice facility. If you decide that you would prefer to receive the Medicare hospice benefit instead, you will need to disenroll from our program and enroll in a Medicare-certified hospice provider.

#### F. Health Related Services

Health related services include transportation, homemaker/chore services, home delivered meals, help in getting around your community, and help in handling your money and paying your bills.

#### **Dental Care**

Dental care will be given to you according to your needs. Your care team must approve of the dentist who will care for your teeth and gums. You will be given a checkup as needed. The most important thing to us is to care for any painful or infected teeth or gums. We want to keep your mouth healthy so you can eat and drink without any problems.

#### Dental services may include, but are not limited to:

- Diagnostic services examinations and tests, or X-rays, to see what your needs are
- Preventative services cleaning and instruction in keeping your teeth and gums as healthy as possible
- Restorative dentistry fillings, temporary or permanent crown(s).

- Prosthetic appliances complete or partial dentures
- Oral surgery pulling teeth (called "extracting") or the removal or repair of soft and hard gum tissue

PACE at Hudson Headwaters staff provide all primary care services through the PACE Day Center and in-home service programs. Sometimes, the care team feels a special type of care is needed for a

Participant. If none of the Team members is trained to give this care, PACE at Hudson Headwaters can make special arrangements with hospitals and other providers in the community who are trained to provide it.

## **Second Medical Opinion**

You may want an opinion from a different healthcare provider. In such cases you must ask PACE at Hudson Headwaters to get this second opinion. If you do this, PACE at Hudson Headwaters will arrange for this and pay for it.

#### **Exclusions and Limitations**

Except for emergency services, all care must be approved in advance by your care team. The staff of PACE at Hudson Headwaters promises to give you the best care possible, but there are some things we cannot do for you. Services that PACE at Hudson Headwaters cannot pay for include:

- Cosmetic surgery **unless** it is required for improved functioning of a malformed part of the body resulting from an accidental injury or for reconstruction following mastectomy.
- Experimental medical, surgical, or other health procedures/treatments\*.
- Any services provided outside of the United States, except as may be permitted by Medicare under the state's approved Medicaid plan. (The United States includes the 50 states and the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands.)
- \* PACE at Hudson Headwaters understands that there may be a medical or healthcare treatment or service that may be helpful in preventing or correcting a health problem and may not be covered under this program. If this service or treatment is not covered by PACE, your care team will look at what else they can do and let you know about your available choices.

### **Long Term Care Facilities**

Our goal is to provide services that enable you to remain in the community. However, there may be times when the interdisciplinary care team, in consultation with you and your family, will determine that short-or long-term placement in a nursing home facility is the most appropriate plan of care for your situation. If this happens, it will be because your health and/or social situation is such that community living is not appropriate at that time. This placement will be carefully supervised by the PACE at Hudson Headwaters team and your participation in the program will continue.

### Money Follows the Person (MFP/Open Doors)

MFP/Open Doors is a program that can help enrollees move from a nursing home back into their home or residence in the community. Enrollees may qualify for MFP if they:

- Have lived in a nursing home for three months or longer
- Have health needs that can be met through services in their community

MFP/Open Doors' Transition Specialists and Peers will meet with enrollees in the nursing home and talk with them about moving back to the community. Transition Specialists and Peers are different from Care Managers and Discharge Planners. They can help enrollees by:

- Giving them information about services and support in the community
- Finding services offered in the community to help enrollees be independent
- Visiting or calling enrollees after they move to make sure that they have what they need at home

For more information about MFP/Open Doors, or to set up a visit from a Transition Specialist or Peer, please call the New York Association on Independent Living at 1.844.454.7108, or email <a href="mailto:mfp@health.ny.gov">mfp@health.ny.gov</a>. You can also visit MFP/Open Doors on the web at <a href="www.health.ny.gov/mfp">www.health.ny.gov/mfp</a> or <a href="www.health.ny.gov/mfp">www.ilny.org</a>.

## The PACE at Hudson Headwaters Day Center

You will receive most of your healthcare services in the PACE at Hudson Headwaters Day Center. The name and location of the Day Center is:

PACE at Hudson Headwaters 38 Larose Street Glens Falls, NY 12801

## "What are the hours of operation?"

Our regular Day Center hours are from 8:00 a.m. until 5:00 p.m., Monday through Friday. If you need help after hours, you may call us. Always feel free to call if you have questions or concerns.

Use this number if you need to speak with someone at night, on weekends, or during holidays: 518-886-7223. For the hearing impaired (TTY/TDD), please call 711

It is important that you attend the PACE at Hudson Headwaters Day Center on your scheduled day(s) each week. If you are not able to attend on your scheduled day, you need to do the following:

Contact us BEFORE 8:00 a.m., or as soon as possible, so your driver and the rest of your care **team will know you will not be attending.** 

### "What about holidays?"

PACE at Hudson Headwaters is closed on legal and city holidays. We will let you know when we will be closed due to a holiday. Here is a list of the days during the year that PACE at Hudson Headwaters closes and Day Center services are not provided:

New Year's Day Memorial Day Fourth of July Labor Day Thanksgiving Day Christmas Day

## "What will happen if the weather is bad?"

We may be closed on snow and bad weather days. Generally, if Glens Falls area public schools are closed, your PACE at Hudson Headwaters Day Center will also be closed. Local TV and radio stations will announce public school closings.

# You may call this number to hear about emergency updates: 518-886-7223. For the hearing impaired (TTY/TDD), please call 711

If the weather becomes bad while you are at the Day Center, we will try to send everyone home early. If we close early, we will notify family and/or caregivers as needed.

If your walkways and stairs are clear of ice and snow, this makes it easier for your PACE at Hudson Headwaters drivers to do their job getting you to and from your home safely. If you are not able to have the ice or snow cleared from your walks and stairs, please let us know. We may be able to help you.

#### The PACE at Hudson Headwaters Care Team

Your care team will be assigned to you at the enrollment conference. Your PACE at Hudson Headwaters Day Center has its own Care Team which consists of the following people:

- The **Center Manager** is responsible for the day-to-day operations of the PACE at Hudson Headwaters Day Center.
- The **Primary Care Provider** is the doctor, nurse practitioner, or physician assistant responsible for overseeing the primary medical care you will receive.
- **Registered Nurses** are responsible for overall nursing care needs. They work closely with your primary care provider to provide your medical care.
- Participant Care Associates, CNAs are responsible for the patient care activities such as helping you with your personal needs.
- **Home Care Coordinators** are responsible for the coordination of services offered in the home, including personal care aides and equipment.
- The **Dietician** is responsible for making sure your food and nutritional needs are met.

- **Social Workers** are responsible for social support services. They may help you find outside social resources, answer questions about your money management or Medicaid, and be a resource for help with family and emotional issues.
- The **Activities Manager** encourage you to meet other Participants, teach you new crafts, play games, and take you on field trips. In other words, they are the wonderful people who dream up fun things for you to do. You may suggest new or different activities that you would also enjoy while at the PACE Day Center.
- The **Physical Therapist** helps you do things that keep your muscles strong. This helps you move around better. The physical therapist also makes sure that any equipment you get, like a wheelchair or a walker, fits your needs and is easy for you to operate.
- The **Occupational Therapist** helps you exercise your arms and hands so that you can do some of the things you enjoy. This includes being able to comb or brush your hair, feed yourself, or write your name.
- The **Transportation Coordinator** is responsible for managing the transportation needs of the PACE at Hudson Headwaters Day Center. The Transportation Coordinator schedules your travel time and the drivers' routes so that you don't spend too much time in the vans. The Transportation Coordinator will also let you know if your driver is running late, or if there is a problem.
- **Driver/Aides** are the people who pick you up in the morning and bring you home at night. They may also drive you to field trip outings with other Participants or take you to a medical specialist appointment.

#### **Contract Providers**

PACE at Hudson Headwaters partners with other providers in order to better meet your needs. Included as an insert in your enrollment/family conference packet is a list of contract providers. New lists are sent to you each year.

This list is kept updated and any changes will be provided to you throughout the year as needed. You may request a copy of the contract provider list at any time, but remember, all services, including contract services, must be pre-approved by your care team.

As an example, providers on this list may include specialists, such as eye doctors, dentists, and others. Transportation services other than PACE at Hudson Headwaters staff may sometimes be used. Also included on this list are hospitals, and home care providers, among others.

# 9. Financing

## **Financing-Monthly Payment Information**

Your payment each month will depend on your eligibility for Medicare and Medicaid.

The information below can help you understand your premium based upon your payer source.

<b>A.</b>	<b>Dually Eligible (Medicare and Medicaid)</b> You have no premium payment for the PACE program. However, you may be liable for any applicable spend down liability and any amount due under the post-eligibility treatment of income process depending on the New York Medicaid rules. If applicable, your approximate monthly payment of \$ starts on (date).			
B.	Medicaid Only			
	You have no premium payment for the PACE program. However, you may be liable for any applicable spend down liability and any amount due under the post-eligibility treatment of income process depending on the New York Medicaid rules. If applicable, your approximate monthly payment of \$ starts on (date).			
C. Medicare only				
	If you have Medicare and are not eligible for Medicaid, then you will pay a monthly premium to PACE at Hudson Headwaters. Your care team will help determine what the monthly premium will be.			
	Your monthly premium of \$starts on(date).  Because this fee does not include the cost of Medicare prescription drug coverage, you will be responsible for an additional monthly premium for Medicare prescription drug coverage in the amount of \$ * You may pay both fees together or you may contact your social worker for additional payment options.			
Private pay (Neither Medicare nor Medicaid eligible)				
	If you are not eligible for Medicare or Medicaid, you will pay a monthly premium to PACE at Hudson Headwaters that includes the cost of all benefits and services, and prescription drugs. Your monthly premium of \$ starts on(date).			
Cei You	ne monthly Medicare Prescription drug coverage fee will be the rate that is approved by the inters for Medicare and Medicaid Services (CMS). This rate is calculated on an annual basis. It will be notified of the current approved prescription drug rate at enrollment and annually reafter.			
Pres	cription Drug Coverage Late Enrollment Penalty			
Pleas	Please be aware that if you are eligible for Medicare prescription drug coverage and are enrolling in PACE			

at Hudson Headwaters after going without Medicare prescription coverage or coverage that was at least as good as Medicare drug coverage for 63 or more consecutive days, you may have to pay a higher monthly amount for Medicare prescription drug coverage. You may contact your PACE at Hudson Headwaters social worker for more information about whether this applies to you.

If you are required to pay a monthly premium or a premium for prescription drug coverage, you will receive an invoice.

If you have to pay a monthly charge to PACE at Hudson Headwaters, you must pay the money by the first day of the month after you sign the Enrollment Agreement. The monthly charge then has to be paid by the first day of every month.

Payment can be made by check or money order to:

PACE at Hudson Headwaters 38 Larose Street Glens Falls, NY 12801

"What happens if I pay late?"

Your monthly charge is due to PACE at Hudson Headwaters by the first day of every month. If you have not paid your monthly bill by the 10<sup>th</sup> of the month, the Vice President of Finance & Contracts will follow up with you. If payment still isn't received by the end of a 30-day grace period, the involuntary disenrollment process will be initiated as described below:

If you still have not paid your bill by the end of the grace period, PACE at Hudson Headwaters may send you notification that you will be involuntarily disenrolled. If this occurs, PACE at Hudson Headwaters will send you a written notice thirty (30) calendar days in advance, informing you that you will be disenrolled if you still have not paid the amount due by the disenrollment date given in the notice. The disenrollment date will be the first day of the next month that begins thirty (30) days after the date that PACE at Hudson Headwaters sends you the notification. The notice will also inform you that, if you pay the required amount before the effective date of your disenrollment, you will remain enrolled with no break in coverage. You are obligated to pay your monthly charge, if any, for any month that you use PACE at Hudson Headwaters services.

If you are disenrolled, a discharge plan will be developed by your care team in order to determine your ongoing care needs.

PACE at Hudson Headwaters sets its monthly charges once a year and has the right to change its charges with thirty (30) days' notice.

## 10. Emergency and Urgent Care

PACE at Hudson Headwaters provides for your care around the clock, twenty-four (24) hours a day, every day of the year. When you enroll in PACE at Hudson Headwaters, you will receive an Emergency Magnet to place on your refrigerator. This magnet will clearly identify that you are a PACE at Hudson Headwaters Participant and explain how to access emergency services.

If you feel you have an urgent medical condition, you should contact PACE immediately. If you feel your condition is an emergency and requires immediate attention, please call 911. You must notify PACE as soon as you are able if you use 911 emergency services.

**Urgently Needed Care** is a covered service provided to you when:

- A. You are out of the PACE service area; and
- B. You believe that your illness or injury is too serious to wait until you return to the PACE service area, but the condition does not put your life or bodily function in danger.

A response to a request for approval for urgent care is given within one hour after PACE at Hudson Headwaters is notified. If we have not taken action after one hour, or if we cannot be reached for approval, then approval is given by default.

If you are in the service area and feel that you need healthcare services quickly, but it is not an emergency, PACE will arrange for you to receive the care and services you need.

If you call after normal working hours (8:00 a.m. to 5:00 p.m.), the PACE at Hudson Headwaters On-Call Service will immediately call one of its providers who will tell you what to do and help you get the care you need. A provider is available 24 hours a day.

# The PACE at Hudson Headwaters On-Call Phone Number is 518-886-7223. For the hearing impaired (TTY/TDD), please call 711.

If you need to be taken to the hospital, the provider on-call will make arrangements to send an ambulance to you.

Emergency Medical Condition means a life-threatening medical condition. If not diagnosed and treated immediately, emergency medical conditions could result in serious and permanent damage to your health. Examples of emergencies include problems breathing, chest pain, or bleeding that is hard to stop.

Because of the emergency, you may need to get this care from the closest and fastest source possible. You will not be required to pay for any services that are required to treat emergencies, even if the services are provided outside of the PACE at Hudson Headwaters service area and/or by a source other than PACE at Hudson Headwaters or its contracted providers. You will know that your problem requires Emergency Care by asking yourself the following questions:

1. Do I need help on-the-spot because of an injury or sudden illness?

- 2. Does the time required to reach PACE staff mean I could risk permanent damage to my health?
- **3.** Could I die as a result?

## If you believe your problem is a matter of life or death, requiring much faster help, please call:

## **Emergency Telephone Number 911**

### You do not need prior approval for emergency services.

Please answer all questions as carefully as you can. Do exactly what you are told by the operator. If your problem is an emergency, you will be taken to the nearest Emergency Room of a hospital. Again, you must notify PACE at Hudson Headwaters as soon as possible if you have called 911 for service.

**Post Stabilization Care** – means services provided after an emergency that your treating provider sees as medically necessary after your emergency medical condition is stable. These services must be approved by PACE before they are provided outside the service area.

A response to a request for approval for post stabilization care is given within one hour after PACE at Hudson Headwaters is notified. If we have not taken action after one hour, or if we cannot be reached for approval, then approval is given by default.

If you are away from your home and out of your service area, PACE at Hudson Headwaters will cover your emergency or approved urgently needed care. If you were given emergency medical care while you were away from the service area, you must tell someone at PACE as soon as possible. You must give PACE at Hudson Headwaters information about the emergency and the care you received. If you are in a hospital or are still getting care, we have the right to arrange to move you to another hospital within our network. We will also change your provider to a PACE at Hudson Headwaters provider.

If you are in a hospital when you are out of town, you have to tell PACE within one (1) full day, or twenty-four (24) hours, or as soon as your medical condition gets better and you are able to tell us.

If you have paid for the urgent or emergency medical service you received when you could not get care from someone at PACE at Hudson Headwaters, you should ask for a receipt from the hospital or provider who treated you.

## The receipt must show:

- The provider's name;
- Your health problem;
- The treatment you received;
- The date of treatment and when you were able to leave; and
- How much you had to pay for the service.

You will be paid back for this care if you send your receipt to:

## PACE at Hudson Headwaters 38 Larose Street Glens Falls, NY 12801

However, if you get any medical care outside of the United States, except as may be permitted by Medicare or under the state's approved Medicaid plan, PACE at Hudson Headwaters will not pay for it.

# 11. Accidental Injury

If you are injured by someone else's actions, such as being involved in an automobile accident, and you require additional medical care, PACE at Hudson Headwaters will provide that additional care.

However, if you recover any money from the party who injured you, or someone paying on behalf of that person, such as an insurance company, Medicare, Medicaid, and/or PACE at Hudson Headwaters has a claim upon that recovery in the amount of the costs PACE at Hudson Headwaters had to spend to provide you with the additional medical care you received because you were hurt. These are the same kinds of rules and regulations that would apply under your usual Medicare and/or Medicaid service if you are eligible.

Remember, you must notify PACE at Hudson Headwaters if you are involved in an accident.

# 12. Your Rights in the Programs of All-Inclusive Care for the Elderly

When you join a PACE program, you have certain rights and protections. PACE at Hudson Headwaters, as your PACE program, must fully explain and provide your rights to you or someone acting on your behalf in a way you can understand at the time you join.

At PACE at Hudson Headwaters, we are dedicated to providing you with quality healthcare services so that you may remain as independent as possible. This includes providing all Medicaid and Medicare-covered items and services, and other services determined to be necessary by the interdisciplinary team across all care settings, 24 hours a day,7 days a week.

Our staff and contractors seek to affirm the dignity and worth of each Participant by assuring the following rights:

## You have the right to treatment.

You have the right to treatment that is both appropriate for your health conditions and provided in a timely manner. You have the right:

• To receive all the care and services you need to improve or maintain your overall health condition, and to achieve the best possible physical, emotional, and social well-being.

• To get emergency services when and where you need them without the PACE program's approval. A medical emergency is when you think your health is in serious danger—when every second counts. You may have a bad injury, sudden illness or an illness quickly getting much worse. You can get emergency care anywhere in the United States and you do not need to get permission from PACE at Hudson Headwaters prior to seeking emergency services.

## You have the right to be treated with respect.

You have the right to be treated with dignity and respect at all times, to have all of your care kept private and confidential, and to get compassionate, considerate care. You have the right:

- To get all of your healthcare in a safe, clean environment and in an accessible manner.
- To be free from harm. This includes excessive medication, physical or mental abuse, neglect, physical punishment, being placed by yourself against your will, and any physical or chemical restraint that is used on you for discipline or convenience of staff and that you do not need to treat your medical symptoms.
- To be encouraged and helped to use your rights in the PACE program.
- To get help, if you need it, to use the Medicare and Medicaid complaint and appeal processes, and your civil and other legal rights.
- To be encouraged and helped in talking to PACE staff about changes in policy and services you think should be made.
- To use a telephone while at the PACE Day Center.
- To not have to do work or services for the PACE program.
- To have all information about your choices for PACE services and treatment explained to you in a language you understand, and in a way that takes into account and respects your cultural beliefs, values, and customs.

## You have a right to protection against discrimination.

Discrimination is against the law. Every company or agency that works with Medicare and Medicaid must obey the law. They cannot discriminate against you because of your:

#### Race

- Ethnicity
- National Origin
- Religion
- Age
- Sex
- Mental or physical disability
- Sexual Orientation
- Source of payment for your healthcare (For example, Medicare or Medicaid)

If you think you have been discriminated against for any of these reasons, contact a staff member at the PACE program to help you resolve your problem.

If you have any questions, you can call the Office for Civil Rights at 1-800-368-1019. TTY users should call 1-800-537-7697.

#### You have a right to information and assistance.

You have the right to get accurate, easy-to-understand information, to have this information shared with your designated representative, who is the person you choose to act on your behalf, and to have someone help you make informed healthcare decisions. You have the right:

- To have someone help you if you have a language or communication barrier so you can understand all information given to you.
- To have the PACE program interpret the information into your preferred language in a culturally competent manner, if your first language is not English and you can't speak English well enough to understand the information being given to you.
- To get marketing materials and PACE Participant rights in English and in any other frequently used language in your community. You can also get these materials in Braille, if necessary.
- To have the enrollment agreement fully explained to you in a manner understood by you.
- To get a written copy of your rights from the PACE program. The PACE program must also post these rights in a public place in the PACE Day Center where it is easy to see them.
- To be fully informed, in writing, of the services offered by the PACE program. This includes telling you which services are provided by contractors instead of the PACE staff. You must be given this information before you join, at the time you join, and when you need to make a choice about what services to receive.
- To be provided with a copy of individuals who provide care-related services not provided directly by PACE at Hudson Headwaters upon request.
- To look at, or get help to look at, the results of the most recent review of your PACE program. Federal and State agencies review all PACE programs. You also have a right to review how the PACE program plans to correct any problems that are found at inspection.

Before PACE at Hudson Headwaters starts providing palliative care, comfort care, and end-of-life care services, you have the right to have information about these services fully explained to you. This includes your right to be given, in writing, a complete description of these services and how they are different from the care you have been receiving, and whether these services are in addition to, or instead of, your current services. The information must also explain, in detail, how your current services will be affected if you choose to begin palliative care, comfort care, or end-of-life services. Specifically, it must explain any impact to:

- Physician services, including specialist services.
- Hospital services
- Long-term care services
- Nursing services
- Social services
- Dietary services
- Transportation
- Home care
- Therapy, including physical, occupational, and speech therapy
- Behavioral health
- Diagnostic testing, including imaging and laboratory services
- Medications
- Preventative healthcare services
- PACE Day Center attendance

You have the right to change your mind and take back your consent to receive palliative care, comfort care, or end-of-life care services at any time and for any reason by letting PACE at Hudson Headwaters know either verbally or in writing.

## You have a right to a choice of providers.

You have the right to choose a healthcare provider, including your primary care provider and specialists, from within the PACE program's network and to get quality healthcare. Women have the right to get services from a qualified women's healthcare specialist for routine or preventive women's healthcare services.

You have the right to have reasonable and timely access to specialists as indicated by your health condition.

You also have the right to receive care across all care settings, up to and including placement in a long-term care facility when PACE at Hudson Headwaters can no longer maintain you safely in the community.

### You have a right to participate in treatment decisions.

You have the right to fully participate in all decisions related to your healthcare. If you cannot fully participate in your treatment decisions or you want to have someone you trust help you, you have the right to choose that person to act on your behalf as your designated representative.

You have the right:

- To be fully informed of your health status and how well you are doing, to make healthcare decisions, and to have all treatment options fully explained to you. This includes the right not to get treatment or take medications. If you choose not to get treatment, you must be told how this may affect your physical and mental health.
- To fully understand PACE at Hudson Headwaters' palliative care, comfort care, and end-of-life care services. Before PACE at Hudson Headwaters can start providing you with palliative care, comfort care, and end-of-life care services, the PACE program must explain all of your treatment options, give you written information about these options, and get written consent from you or your designated representative.
- To have the PACE program help you create an advance directive, if you choose. An advance directive is a written document that says how you want medical decisions to be made in case you cannot speak for yourself. You should give it to the person who will carry out your instructions and make healthcare decisions for you.
- To participate in making and carrying out your plan of care. You can ask for your plan of care to be reviewed at any time.
- To be given advance notice, in writing, of any plan to move you to another treatment setting and the reason you are being moved.

#### You have a right to have your health information kept private.

- You have the right to talk with healthcare providers in private and to have your personal healthcare information kept private and confidential, including health data that is collected and kept electronically, as protected under State and Federal laws.
- You have the right to look at and receive copies of your medical records and request amendments.
- You have the right to be assured that your written consent will be obtained for the release of information to persons not otherwise authorized under law to receive it.

• You have the right to provide written consent that limits the degree of information and the persons to whom information may be given.

There is a patient privacy rule that gives you more access to your own medical records and more control over how your personal health information is used. If you have any questions about this privacy rule, call the Office for Civil Rights at 1-800-368-1019. TTY users should call 1-800-537-7697.

## You have a right to make a complaint.

You have a right to complain about the services you receive or that you need and don't receive, the quality of your care, or any other concerns or problems you have with your PACE program. You have the right to a fair and timely process for resolving concerns with your PACE program. You have the right:

- To a full explanation of the complaint process.
- To be encouraged and helped to freely explain your complaints to PACE staff and outside representatives of your choice. You must not be harmed in any way for telling someone your concerns. This includes being punished, threatened, or discriminated against.
- To contact 1-800-Medicare for information and assistance, including to make a complaint related to the quality of care or the delivery of a service.

## You have the right to request additional services or file an appeal.

You have the right to request services from PACE at Hudson Headwaters, its employees, or contractors, that you believe are necessary. You have the right to a comprehensive and timely process for determining whether those services should be provided.

You also have the right to appeal any denial of a service or treatment decision by the PACE program, staff, or contractors.

### You have a right to leave the program.

If, for any reason, you do not feel that the PACE program is what you want, you have the right to leave the program at any time and have such disenrollment be effective the first day of the month following the date PACE at Hudson Headwaters receives your notice of voluntary disenrollment.

**Additional Help:** If you have complaints about your PACE program, think your rights have been violated, or want to talk with someone outside your PACE program about your concerns, call 1-800-MEDICARE (1-800-633-4227) to get the name and phone number of someone in your State Administering Agency.

# 13. Participant and Caregiver Responsibilities

The services of PACE at Hudson Headwaters depend on the involvement of you, the Participant. Your care team will work closely with you to be sure that your healthcare needs are met to the greatest degree possible. In order for you to stay as healthy and independent as you can, you and your caregiver(s) have the following responsibilities:

- To be involved with the planning of your care, if you are able.
- To cooperate with the care plan developed especially for you.

- To use only the services authorized by PACE at Hudson Headwaters.
- If you have an emergency, to follow the specific emergency plan developed for you.
- To use the hospitals chosen by PACE at Hudson Headwaters for all hospital care, except for emergency services.
- If you are away from home and an emergency arises, to notify PACE at Hudson Headwaters within 24 hours or as soon as you possibly can.
- If you wish to disenroll from PACE at Hudson Headwaters, to provide a written or verbal notice of your wish to leave the program.
- To pay any monthly fees on time.
- To notify PACE at Hudson Headwaters if you are injured by someone else's actions, such as being involved in an automobile accident.
- To let PACE at Hudson Headwaters know as soon as possible if you have a complaint, including when you are not satisfied with the care or services provided to you.
- To exhibit conduct and behavior that does not endanger you, other Participants, or PACE at Hudson Headwaters staff.
- To notify PACE at Hudson Headwaters if you move out of our service area or have a lengthy absence from our service area.

# 14. Consumer Support and Advocacy

## **Participant Council**

At PACE at Hudson Headwaters, Participants meet on a regular basis with a staff representative to offer suggestions about what they like about PACE and what they feel can be better. Participants have the right to make suggestions to the staff about their care, the Day Center, and the program, and are encouraged to do so.

### **Participant Advisory Committee**

PACE at Hudson Headwaters has a Participant Advisory Committee (PAC) where information is shared and the opportunity for Participants and/or their representatives to provide feedback is available. The committee includes participants enrolled in PACE at Hudson Headwaters and/or their representatives as members, and a participant representative who is a liaison to the board, and who reports to the board every quarter.

At quarterly meetings, the PAC discusses such items as Participant rights and responsibilities, quality of care, changes in regulations, outside medical providers, PACE Day Center activities, program policies, and

program structure. PAC meeting minutes are shared with the PACE at Hudson Headwaters Board of Directors and the PACE at Hudson Headwaters Management Team. Through the liaison, the PAC advises the Board on issues related to the actions of PACE at Hudson Headwaters and our staff to assure participant comfort, dignity, and convenience.

If you or your caregiver are interested in participating in the PAC, please let your Center Manager know.

## 15. Your Satisfaction

#### Grievances

We want to be sure that all PACE Participants are satisfied with the care they receive. Please let us know right away if there is a problem or concern about care or if you feel you are not receiving services that you need.

A **Grievance** is a complaint, either written or oral, expressing dissatisfaction with service delivery or the quality of care furnished, regardless of whether remedial action is requested. Grievances may be between participants and PACE at Hudson Headwaters or between you and one of your other service providers through the PACE program.

YOU HAVE THE RIGHT TO SUBMIT A GRIEVANCE ABOUT ANYTHING. HERE ARE A FEW EXAMPLES:

- The quality of services you receive in the home, at the PACE at Hudson Headwaters Day Center, or in any inpatient stay (hospital, skilled nursing facility, or nursing home)
- Mistakes you feel have been made
- Waiting times on the phone or in the waiting/exam room
- Behavior of any of your care providers or program staff
- Adequacy of Day Center facilities
- Quality of food provided
- Transportation services

Information on how to submit a grievance will be reviewed with you when you enroll, at least annually, and upon request. A grievance can be made by you, your family member or caregiver, or your designated representative.

If you submit a grievance, you will continue to receive all of your required services the same as before you submitted the grievance. PACE at Hudson Headwaters will keep information about your grievance strictly confidential, and only authorized individuals will receive your grievance information.

You will never be discriminated or retaliated against, nor be made to be afraid of discrimination or retaliation, because you have made a grievance.

#### **Overview of the PACE at Hudson Headwaters Grievance Process:**

You may submit a grievance with any staff member, either verbally or in writing, at any time or with any PACE at Hudson Headwaters contracted provider. This includes your driver, and the providers who care for you in your home. If you discuss your grievance with a contracted provider, they will let a PACE at Hudson Headwaters staff person know the details of your complaint. The staff person will make sure that your grievance is thoroughly documented. You will need to provide complete information of your grievance so the appropriate staff person can respond and help to resolve your grievance in a timely and efficient manner. If you wish to submit your grievance in writing, please send your written grievance to:

## PACE at Hudson Headwaters 38 Larose Street Glens Falls, NY 12801

You can also telephone the Day Center during the hours of 8:00 a.m. - 5:00 p.m. or call 518-886-7223/TTY Dial 711 after hours to receive assistance in submitting a grievance. For the hearing impaired (TTY/TDD), please call 711. We will assist you with your grievance submission.

The staff member who receives your grievance will alert the Director of Operations and the Director of Quality and Compliance and will provide them with documentation of your grievance. It is the responsibility of our Director of Operations and the Director of Quality and Compliance to coordinate the investigation when the cause of your issue needs to be looked into, and investigation of your grievance will begin immediately to find solutions and take appropriate action. The grievance and the proposed resolution will be discussed by the care team during our morning staff meetings, as appropriate. All information related to your grievance will be kept strictly confidential, including from other PACE at Hudson Headwaters staff and contracted providers when appropriate. Please note, if you do not wish to be notified of the grievance resolution, let us know at the time you make your grievance. We will still investigate, but we will note your wishes and will not send you any further notifications.

PACE at Hudson Headwaters staff will take action to resolve your grievance as quickly as your case requires, but no later than thirty (30) calendar days after receipt of your grievance. All efforts will be made by the team to pursue a resolution to its utmost ability, so that problems with service delivery do not go unresolved. PACE at Hudson Headwaters will notify you of the resolution as quickly as your case requires, but no later than three (3) calendar days after the date we resolve your grievance. We will notify you either verbally or in writing based on your preference. The exception is for grievances related to quality of care, for which we will always provide written notification of the grievance resolution. The notification we provide will include a summary of your grievance, what we found as a result of our investigation, what actions we have taken or are going to take to resolve the issue, and when you can expect those actions to occur.

If you have Medicare and your grievance is related to Medicare covered services, you, your family or caregiver, or your designated representative have the right to file a written complaint with the quality improvement organization (QIO). If you submit a complaint to the QIO, PACE at Hudson Headwaters must cooperate with them to resolve the complaint. This information will also be included in the resolution notification you receive if you have submitted your grievance to PACE at Hudson Headwaters as an additional option available to you.

If you or your family member, caregiver, or designated representative are not satisfied with the resolution proposed by the team, please let us know so that we can give you information on how to request further review and/or an alternate resolution.

You always have the right to call 1-800-MEDICARE (1-800-633-4227) to submit a complaint, or to contact the New York State Department of Health by calling 1-866-712-7197 at any time. Complaints may also be submitted in writing to:

NYS Department of Health One Commerce Plaza 99 Washington Avenue, Room 1621 Albany, New York, 12210

#### **Appeals**

If PACE at Hudson Headwaters denies your request for a service or for payment of a service and if you disagree you may take action to ask that we change our decision. The action you take, whether verbally or in writing, is called an "appeal." You have the right to appeal any decision we have made to deny, reduce, or stop what you believe are covered services or to pay for services that you believe we are required to pay. You will be given written information on how to file an appeal at enrollment, at least annually thereafter, and whenever we deny your request for services or payment. Also, you or your family may request information on our appeal process at any time.

If you file an appeal, you will continue to receive all of your required services the same as before you filed the appeal. If you have Medicaid and your appeal is for a service you have been receiving that PACE at Hudson Headwaters is proposing to reduce or stop, you may request to continue receiving the disputed service during the appeal process. However, if the appeal decision does not favor you, then you may be responsible for payment of the services in question. PACE at Hudson Headwaters employees will not discuss your appeal with anyone else not involved in investigating your appeal.

### **Overview of the PACE at Hudson Headwaters Appeal Process:**

Once PACE at Hudson Headwaters denies a service or payment for a service that you or your representative have requested or denies a request to modify or continue a service you were already receiving, you may appeal the decision. A written notification will be provided to you and/or your representative that will explain the reason for the denial of your service request or request for payment, and you will also receive verbal notification. You can file your appeal either verbally, in person or by telephone, or in writing. You or your family may file an appeal by calling the PACE at Hudson Headwaters Day Center between the hours of 8:00 a.m. - 5:00 p.m. at 518-886-7223. For the hearing impaired (TTY/TDD), please call 711.

You may also file an appeal in writing at the following address:

PACE at Hudson Headwaters 38 Larose Street Glens Falls, NY 12801 A person not involved in our initial decision and who does not have a stake in the outcome of your appeal will evaluate your appeal. This third party will be both impartial and appropriately credentialed to make a decision on your appeal. You and your caregiver or authorized representative will be given a reasonable opportunity to present evidence related to the dispute, in person as well as in writing, for consideration during the appeal process.

We will decide on your appeal as quickly as your health condition requires, but no later than 30 calendar days after receiving your request for an appeal.

If you believe that your life, health, or ability to regain or maintain maximum function could be in serious danger if the disputed service is not provided, you may request an expedited appeal. The PACE at Hudson Headwaters Director of Quality and Compliance and the objective third party will review your case immediately and respond back to you as quickly as your health condition requires, but no later than 72 hours from when we receive your request for an expedited appeal. This timeframe may be extended by up to 14 calendar days if you request the extension, or if we are able to justify to the New York State Department of Health the need for more information and how the delay benefits you.

## The Decision on Your Appeal

In either case, whether a standard appeal or an expedited appeal, all parties involved in the appeal will be given written notification of the decision to approve or deny the appeal. If the appeal is fully in your favor, the service or payment will be fulfilled as quickly as your health condition requires.

If the decision is not fully in your favor, we will provide you with written notification that will include the specific reason(s) for the denial, why the service would not improve or maintain your overall health, your right to appeal the decision, and a description of your external appeal rights through either the Medicare or Medicaid program (see External Appeals, below). We also are required to notify the federal Centers for Medicare and Medicaid Services and the New York State Department of Health.

### **External Appeals**

If we do not decide in your favor for a service or payment of a service, you have additional appeal rights, called external appeal rights. The next level of appeal involves a new and impartial review of your case through either the Medicare or Medicaid program.

If you are enrolled in both Medicare and Medicaid, you may choose which appeals process you wish to follow. If you are not sure which program applies to you, ask us. You must choose either Medicare or Medicaid process. The External Appeal may only be made to one or the other, (Medicare or Medicaid) but not both. PACE can help you with whatever appeal process you choose, and you must contact the Director of Quality and Compliance within 14 calendar days to notify them of the decision to appeal externally.

If you have both **Medicare and Medicaid or Medicaid-only**, you can choose to use the Medicaid external appeal process. Medicaid external appeal requests use the Medicaid Fair Hearing process, and your request must be made to the New York Medicaid program within 120 days of the date we sent you the notice about our decision on your appeal. The notice that you receive from us at the end of your appeal will provide you with information about your fair hearing rights, including how to obtain a Fair Hearing,

who can appear at the Fair Hearing on your behalf, and in some cases, your right to request to receive services while the Hearing is pending. Please ask a member of your Care Team if you have questions about the fair hearing process.

PACE at Hudson Headwaters will send your appeal to the New York State Office of Hearing and Appeals. If you prefer to file your appeal yourself, you can submit your appeal request to:

Fair Hearing Section NYS Office of Temporary and Disability Assistance Fair Hearings P.O. Box 22023 Albany, NY 12201-2023 1-800-432-3334

If the external appeal decision is in your favor, PACE at Hudson Headwaters will provide or pay for the service(s) in question as quickly as your health requires, but no later than 30 calendar days after the decision. If the decision is not in your favor, you will be notified verbally and in writing of the decision and that the decision is final.

If you have both **Medicare and Medicaid or Medicare-only**, you may choose to appeal using Medicare's external appeal process. The federal Medicare program contracts with an Independent Review Entity (IRE) to provide external review on appeals involving PACE organizations. The review organization is completely independent of PACE at Hudson Headwaters. We will send your appeal to the Medicare IRE for you. A written request for reconsideration must be filed with the current contracted Medicare appeals entity within sixty (60) calendar days from the date of the decision by the impartial third-party reviewer of the internal appeal. The current contracted Medicare appeals entity will contact us with the results of their review. The current contracted Medicare appeals entity will either maintain our original decision or change our decision and rule in your favor.

## 16. Termination of Benefits

Your benefits from PACE at Hudson Headwaters can be stopped if you choose to give up your enrollment in the program (voluntary), or if you no longer meet the conditions of enrollment (involuntary).

You must still use PACE at Hudson Headwaters services and pay the monthly charge, if there is any, until your time of being a Participant is over, and we will continue to provide all of your services until your disenrollment from our program is effective. PACE at Hudson Headwaters will work to transition you back into other Medicaid and/or Medicare programs for which you are eligible as quickly as possible. Medical records will be forwarded to your new providers within 30 days, and referrals to other resources in the community will be made to assure continuity of care.

If you are hospitalized or undergoing a course of treatment at the time your disenrollment becomes effective, PACE at Hudson Headwaters has the responsibility to continue to provide and pay for services until you are reinstated with Medicare and Medicaid benefits (according to your entitlement and

eligibility).

We will coordinate the disenrollment date between Medicare and Medicaid if you are eligible for both programs. If you had additional healthcare coverage through a Medigap policy, you may be eligible to reapply for that policy when you disenroll from PACE. PACE at Hudson Headwaters will help you with this process.

PACE at Hudson Headwaters will provide you with information explaining that you may not receive all the same services and benefits in other optional Medicare and Medicaid programs following disensellment from PACE.

NOTE: You cannot disenroll from PACE at Hudson Headwaters at a Social Security office. You must tell PACE at Hudson Headwaters you want to leave the program.

Voluntarily Leaving PACE – If you want to cancel your benefits by leaving PACE at Hudson Headwaters, you should talk about it with a Team member at the PACE Day Center. You may leave for any reason at any time. However, please let us know either verbally or in writing. If you tell us verbally of your wish to disenroll, you will be asked to sign a disenrollment form. PACE at Hudson Headwaters will disenroll you effective the first day of the month following the date we received your request.

**Involuntarily Leaving PACE** – PACE can stop your benefits by giving you thirty (30) days' notice in writing if:

- You move out of the PACE at Hudson Headwaters service area or are out of the service area for more than thirty (30) consecutive days, unless we agree to a longer absence due to extenuating circumstances.
- You have decision making capacity and consistently refuse to follow your individual plan of care or the terms of your Enrollment Agreement.
- Your or your caregiver's behavior threatens the health and safety of yourself or others.
- You do not pay or have not worked out some way to pay any premium due PACE at Hudson Headwaters, any applicable Medicaid spend down liability, or any amount due under the post-eligibility treatment of income process, after a thirty (30) day grace period.
- You no longer meet nursing home level of care eligibility and are not deemed eligible.
- The agreement between PACE at Hudson Headwaters, CMS, and the New York State Department of Health is not renewed or is terminated; or
- PACE at Hudson Headwaters loses the State licenses or contracts with outside providers which make it possible to provide healthcare services.

Involuntary disenrollments are effective on the first day of the next month that begins 30 days after the day we send you notice of your disenrollment.

Once New York Medicaid Choice (Maximus) has approved involuntary disenrollment, you will receive written notification. If you are a Medicaid recipient, you will be advised of the Fair Hearing process available to you. If you are a Medicare recipient and are not in agreement with the decision to involuntarily disenroll you, PACE at Hudson Headwaters will assist you in appealing the decision with the appropriate review entity.

## 17. Renewal Provisions

If you leave PACE at Hudson Headwaters you may reapply to enroll; however, you must still meet the eligibility requirements. If you receive notice that you will be involuntarily disenrolled because you did not pay your monthly bill, you may remain enrolled simply by paying the bill before the effective date of your disenrollment. Once you are disenrolled from PACE at Hudson Headwaters, you will have to begin the application process over again.

# 18. Confidentiality Statement

At PACE at Hudson Headwaters, we will respect your privacy concerning information about your health and will protect information that identifies you along with your medical condition. Any contract providers who care for you must also protect and respect your privacy concerning your health information as part of their agreement with us.

Your medical records will only be given to those who are authorized to receive them. This will include court orders and any state or federal laws.

Because PACE at Hudson Headwaters recognizes your privacy rights, we also ask that you and your caregivers be sensitive to the privacy rights of other Participants and caregivers.

# 19. Electronic Notice Option

PACE at Hudson Headwaters and our contracted providers can send you notices about service authorizations, appeals, and grievances (complaints) electronically, instead of by phone or mail. We can also send you communications about any changes to your Enrollment Agreement, our provider directory, and any changes to services offered by PACE at Hudson Headwaters electronically, instead of by mail.

We can send you these notices to you by email.

If you want to get these notices electronically, you must ask us. To ask for electronic notices contact us by phone, fax, or mail:

**Phone:** 518-886-7223/ For the hearing impaired (TTY/TDD), please call 711

Fax: 518-886-7232

Mail: 38 Larose Street, Glens Falls, NY 12801

#### When you contact us, you must:

- Tell us how you want to get notices that are normally sent by mail,
- Tell us how you want to get notices that are normally made by phone call, and
- Give us your contact information (mobile phone number, email address, fax number, etc.).

PACE at Hudson Headwaters will let you know by mail that you have asked to get notices electronically.

# 20. Enrollment Agreement Signature Sheet

Name of applicant:	Date of birth:				
Sex at birth: Female					
Gender identity:ManV	WomanTranswomanTransman				
Nonbinary _	Another unlisted				
What are your pronouns?He/	HimShe/HerThey/ThemAnother:				
Permanent address:					
Mailing address (if different from permanent address): Same					
Medicare beneficiary status:					
Part A Part B Part D Both None					
Medicare number:					
Medicaid recipient status: enrolled					
Medicaid number:					
Other health insurance information (if applicable):					
Primary language: English	Secondary language:				

BY SIGNING THIS DOCUMENT, I agree to enroll in the services of PACE at Hudson Headwaters. I have received a copy of the Participant Enrollment Agreement and talked with a PACE at Hudson Headwaters staff member about my enrollment benefits. I understand that once I enroll in PACE at Hudson Headwaters, I am to receive all my healthcare benefits from PACE at Hudson Headwaters and that they will be my sole service provider.

A PACE at Hudson Headwaters staff member has reviewed the following information with me and my caregiver:

- Introduction and program description
- Mission statement of PACE at Hudson Headwaters
- Eligibility requirements for participation in PACE at Hudson Headwaters
- Process of enrolling in PACE at Hudson Headwaters
- Healthcare power of attorney and advanced directives

### Benefits and coverage information, which includes:

- Effective dates of enrollment and a sample of the Enrollment Conference Checklist.
- Description of the kind of benefits and coverage I receive with PACE at Hudson Headwaters.
- Information about the PACE at Hudson Headwaters Day Center that I will attend, including location, hours and what to do when the weather is bad.
- Information about the PACE at Hudson Headwaters Care Team who will care for me.
- PACE at Hudson Headwaters employees.
- PACE at Hudson Headwaters contract providers.
- Financing monthly payment information, including what I may have to pay, if anything. Also, I understand what PACE at Hudson Headwaters will not pay for.
- Information about long-term care facilities and how they may be used for my care.
- Emergency and urgent care coverage.
- Information about what should be done if I am hurt in an accident.
- Copy of the Participant Bill of Rights.
- My responsibilities as a Participant of PACE at Hudson Headwaters and the responsibilities of my caregiver.
- Information about the PACE at Hudson Headwaters Participant Council and the Participant Advisory Committee.
- Information about the PACE at Hudson Headwaters grievance process.
- Information about the PACE at Hudson Headwaters appeals process.
- Information about the Medicaid and Medicare appeals processes.
- Information about stopping my PACE at Hudson Headwaters benefits.
- Information about re-applying to PACE at Hudson Headwaters.
- Confidentiality Statement.
- Definitions of terms in the Enrollment Agreement booklet.
- Notice that I may not enroll or disenroll from PACE at Hudson Headwaters at a Social Security
  office.
- I have been allowed to ask questions and my questions have been answered.
- I understand the PACE at Hudson Headwaters program and wish to become a Participant.
- I understand that enrollment in PACE at Hudson Headwaters will result in disenrollment from any other Medicare or Medicaid prepayment plan or optional benefit.

- I understand that enrollment in any other Medicare or Medicaid prepayment plan or optional benefit, including the hospice benefit, after enrolling in PACE at Hudson Headwaters will result in my voluntary disensollment from PACE.
- I understand that, if I do not have Medicare when I enroll in PACE at Hudson Headwaters and become eligible after enrolling, electing to obtain my Medicare coverage other than from PACE at Hudson Headwaters will result in my disenrollment from the PACE program.
- I understand that if I move out of the PACE at Hudson Headwaters service area or am absent from PACE service area for a long period of time, I must notify PACE at Hudson Headwaters.
- I agree to accept my health services from PACE at Hudson Headwaters instead of other programs sponsored by Medicare and/or Medicaid and that my effective date of enrollment is:
- I understand that I am authorizing the disclosure and exchange of my personal information between the Centers for Medicare & Medicaid Services (CMS) and its agents, New York State Department of Health, and PACE at Hudson Headwaters.

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Signature of Participant:	Date:
Name of witness:	
Signature of witness:	Date:
Name of family member or guardian:	
Signature of family member/guardian*:	Date:
Name of authorized PACE representative:	
Signature of authorized PACE representative:	Date:

Name of Participant:

<sup>\*</sup> Signature other than that of the Participant or immediate family member will be accompanied by the appropriate documentation in accordance with New York law and PACE at Hudson Headwaters policies and procedures.