

HOPE

Your Rights in the Program of All-Inclusive Care for the Elderly

The Program of All-Inclusive Care for the Elderly, also called PACE, is a special program that combines medical and long-term care services in a community setting.

When you join a PACE program, you have certain rights and protections. **Ascension Living HOPE** 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.

To be eligible, you must:

- Be age 55 or older.
- Live in the service area of the PACE program.
- Be certified as eligible for nursing home care by the State of Kansas
- Be able to live safely in the community at the time of enrollment with PACE services

The goals of PACE are:

- To maximize the independence, dignity, and respect of PACE members;
 - To help make PACE members more independent and improve their quality of life;
 - To provide coordinated quality health care to PACE members;
 - To keep PACE members living safely in their homes and communities as long as possible;
 - To help support and keep PACE members together with their family.
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At **Ascension Living HOPE** we are dedicated to providing you with quality health care services so that you may remain as independent as possible. This includes providing all Medicare covered items and services and Medicaid services, and other services determined to be necessary by the interdisciplinary team across all care settings, twenty-four (24) hours a day, seven (7) days a week. Our associates and contractors seek to affirm the dignity and worth of each participant by assuring the following rights:

1. 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 your care kept private and confidential, and to get compassionate, considerate care. You have the right:

- To get all of your health care 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 Ascension Living HOPE associates about changes in policy and services you think should be made.
- To use a telephone while at the PACE center.
- To not have to do work or services for the PACE program.

2. You have the 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 health care (for example, Medicare or Medicaid)

If you think you have been discriminated against for any of these reasons, contact an associate 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.

3. You have the right to information and assistance

You have the right to get accurate, easy-to-understand information and to have someone help you make informed health care 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 Ascension Living HOPE 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 Ascension Living HOPE. Ascension Living HOPE must also post these rights in a public place in the PACE center where it is easy to see them.
- To be fully informed, in writing, of the services offered by Ascension Living HOPE. This includes telling you which services are provided by contractors instead of Ascension Living HOPE associates. 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 Ascension Living HOPE 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 Ascension Living HOPE plans to correct any problems that are found at inspection.

4. You have the right to a choice of providers

You have the right to choose a health care provider, including your primary care provider and specialists, from within the Ascension Living HOPE program's network, and to get quality health care. Women have the right to get services from a qualified women's health care specialist for routine or preventive women's health care 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 Ascension Living HOPE can no longer maintain you safely in the community.

5. You have the right to access emergency services

You have the right to get emergency services when and where you need them without the approval of Ascension Living HOPE. 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 Ascension Living HOPE prior to seeking emergency services.

6. You have the right to participate in treatment decisions

You have the right to fully participate in all decisions related to your health care. 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. You have the right:

- To have all treatment options explained to you in a language you understand, to be fully informed of your health status and how well you are doing, and to make health care decisions. This includes the right not to get treatment or take medications. If you choose not to get treatment, you must be told how this will affect your health.
- To have Ascension Living HOPE 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 health care 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.

7. You have the right to have your health information kept private

- You have the right to talk with health care providers in private and to have your personal health care 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.

8. You have the right to file a complaint, request additional service, or make an appeal

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 Ascension Living HOPE. You have the right to a fair and timely process for resolving concerns with Ascension Living HOPE. You have the right:

- To a full explanation of the complaint process.
- To be encouraged and helped to freely explain your complaints to Ascension Living HOPE associates 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 services from Ascension Living HOPE 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 Ascension Living HOPE, associates, or contractors.

9. You have a right to leave the program

If, for any reason, you do not feel that the Ascension Living HOPE 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 Ascension Living HOPE receives the participant's notice of voluntary disenrollment.

ADDITIONAL HELP

If you have complaints about your Ascension Living HOPE program, think your rights have been violated, or want to talk with someone outside Ascension Living HOPE about your concerns, call 1-800-MEDICARE or 1-800-633-4227 to get the name and phone number of someone in your State Administering Agency.