

YOUR RIGHTS AND RESPONSIBILITIES AS A PARTICIPANT

PARTICIPANT BILL OF RIGHTS

As a Sutter SeniorCare PACE participant you are entitled to the following rights:

Respect and Nondiscrimination

1. As a SeniorCare participant you have the right to considerate, respectful care from all SeniorCare employees and contractors at all times and under all circumstances.
2. As a SeniorCare participant you have the right not to be discriminated against in the delivery of required SeniorCare services based on race, ethnicity, national origin, religion, sex, age, mental or physical disability, or source of payment.
3. Specifically, as a SeniorCare participant you have the right to the following:
 - a. To receive comprehensive health care in a safe, clean environment in an accessible manner and to be protected from hazardous situations.
 - b. To be treated with dignity and respect, be afforded privacy and confidentiality in all respects of care, and be provided humane care.
 - c. To have your property treated with respect.
 - d. To not be required to perform services for SeniorCare.
 - e. To have reasonable access to a telephone while at SeniorCare's Adult Day Health Center.
 - f. To be free from harm, including physical or mental abuse, neglect, corporal punishment, involuntary seclusion, excessive medication, and any physical or chemical restraint imposed for purposes of discipline or convenience and that are not required to treat the participant's medical symptoms.

- g. To be encouraged and assisted to exercise rights as a participant, including the Medicare and Medicaid (Medi-Cal) appeals processes as well as civil and other legal rights. This may include voicing grievances, including requesting a fair hearing, and recommending changes in policies and services to staff and/or outside representatives of choice. There will be no restraint, interference, coercion, discrimination or reprisal by SeniorCare.
- h. To be assured that personnel who provide care are qualified through education, on-going training and experience to carry out the services for which they are responsible.
- i. To have interpreter services for medically-related information/communication if English is not your primary language.

Information Disclosure

1. As a SeniorCare participant you have the right to receive accurate, easily understood information and to receive assistance in making informed health care decisions.
2. Specifically, as a SeniorCare participant you have the following rights:
 - a. To be fully informed, in writing, of the services available from SeniorCare, including identification of all services that are delivered through contracts, rather than furnished directly by SeniorCare, at the following times:
 - (1) Before enrollment
 - (2) At enrollment
 - (3) When there is a change in services
 - b. To be fully informed (in writing) prior to, or at the time of, enrollment (and during participation), of any service excluded from coverage.
 - c. To have the Enrollment Agreement fully explained in a manner that you can understand.
 - d. To examine, or upon reasonable request, to be assisted to examine, the results of the most recent review of SeniorCare conducted by federal and/or state administrating agencies and any plan of correction in effect.

- e. To be fully informed at the time of enrollment of the rights and responsibilities of participants and of all rules and regulations governing participation in SeniorCare, as evidenced by an acknowledgement signed by the participant.
- f. To be fully informed by the Interdisciplinary Team of your health and functional status.

Choice of Providers

As a SeniorCare participant you have the right to a choice of health care providers from within the SeniorCare network. Specifically, as a participant you have the right to the following:

1. To choose your primary care physician (if SeniorCare employs more than one primary care physician) and specialists from within the SeniorCare network.
2. To request that a qualified specialist for women's health services furnish routine or preventive women's health services.
3. To have access to (American) Indian Health services without prior authorization by the Interdisciplinary Team.
4. To have access to Sexually Transmitted Disease (STD) services and confidential HIV counseling and testing without prior authorization by the Interdisciplinary Team.
5. To notify a SeniorCare Physician or Social Worker when a second medical opinion is desired.
6. To disenroll from the program without cause at any time.

Access to Emergency Services

As a SeniorCare participant you have the right to access emergency health care services when and where the need arises, within and outside the contractor's network pursuant to the federal law, without prior authorization by the SeniorCare Interdisciplinary Team.

Participation in Treatment Decisions

As a SeniorCare participant you have the right to participate fully in all decisions related to your treatment. If you are unable to participate fully in

treatment decisions, you have the right to designate a representative. Specifically, as a participant you have the following rights:

1. To have all treatment options explained in a culturally competent manner and to make health care decisions, including the right to refuse treatment, and to be informed of the consequences of the decisions.
2. To have SeniorCare explain Advance Health Care Directives and to establish them, if so desired.
3. To be fully informed of your health and functional status by the Interdisciplinary Team.
4. To participate in the development and implementation of the plan of care.
5. To request a reassessment by the Interdisciplinary Team.
6. To be given reasonable advance notice, in writing, of any transfer to another treatment setting and the justification for the transfer that is due to medical reasons, or for your welfare, or the welfare of other participants.
7. To refuse treatment and to be informed of the consequences of such refusal.

Confidentiality of Health Information:

1. As a SeniorCare participant you have the right to communicate with health care providers in confidence and to have the confidentiality of your individually identifiable health care information protected.
2. As a SeniorCare participant you also have the right to review and copy your own medical records and request amendments to those records. Specifically, as a participant you have the following rights:
 - a. To be assured of confidential treatment of all information contained in the health record, including information contained in an automated data bank.
 - b. To be assured that written consent will be obtained for the release of information to persons not otherwise authorized under law to receive it. Persons representing news or other media shall not be given any information that identifies or leads to identification of a participant

including photographs, unless the participant has given written consent.

- c. To provide written consent that limits the degree of information and the persons to whom information may be given.

Grievances and Appeals:

As a SeniorCare participant you have the right to a fair and efficient process for resolving differences with SeniorCare employees or contractors including a rigorous system for internal review by the organization and an independent system of external review. Specifically, as a participant you have the following rights:

1. To be encouraged and assisted to voice complaints and to initiate a formal grievance to SeniorCare staff and outside representatives of your choice, free of any restraint, interference, coercion, discrimination, or reprisal by the SeniorCare staff. (Written information about the procedure for grievances is provided to you on enrollment, annually and if a grievance is presented.)
2. To appeal any treatment decision of SeniorCare organization, its employees or contractors through the process as described in Section XIV of the Sutter SeniorCare Enrollment Agreement. (Also, written information about the appeals process is provided to you on enrollment, annually and at the time they submit a request for an appeal.)

Participant responsibilities:

Here is what Sutter SeniorCare PACE expects from you:

1. You must come to the Center on the days specified in your treatment plan so that you can receive the services available here. These services may include your showers, doctor visits, medication management, rehabilitation therapy (if you need it) recreation, and social services, etc.
2. You must agree to receive all your medical care from SeniorCare physicians or one of the specialists to whom you are referred by us. We will notify your current physician of your enrollment in the SeniorCare program and request your medical records for our files.
3. If you are traveling out of our area, please let someone at SeniorCare (your SeniorCare Social Worker or Nurse) know as soon as possible so we can instruct you on how to receive emergency and urgent care if you

should become ill while you are away and provide you with medication, if necessary.

4. If you are moving out of SeniorCare's service area you must inform us (your Social Worker or nurse or the Center Manager) as soon as you are aware of the move. This will allow us to coordinate your disenrollment, including referral to needed health care providers, ensuring medical records are made available to new providers in a timely manner and ensuring continued coverage through Medicare and/or Medi-Cal.
5. If you are unable to come to the Center on your appointed day, please let us know as far in advance as possible. Our telephone answering service is available to take messages 24 hours a day, 7 days a week.
6. You must provide accurate information to our medical and other professional staff, follow instructions and cooperate with care providers.
7. You must take appropriate care of any medical equipment provided by SeniorCare, including dentures, hearing aids and glasses.
8. Please remember that each treatment plan is developed to meet the specific needs of a particular participant. As a result, you may receive different types of services than another participant because your needs are different. As your needs change, your treatment plan will also change, increasing or decreasing days of attendance at the Adult Day Health Center and other services, as necessary.

If you have any questions, problems or concerns with the care you receive, please talk with the SeniorCare administrator, social worker, nurse or SeniorCare physician. We want to know what's on your mind.