

Participant Rights

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

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 to get compassionate, considerate care. You have the right:

- To get all of your health care in a safe, clean environment
- To be free from harm. This includes physical or mental abuse, neglect, physical punishment, being placed by your 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 or to prevent injury.

- To be encouraged to use your rights in the PACE program
- To get help, if you need it, to use the Medicare and/or 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 center
- To not have to do work or services for the PACE program

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/Ethnic Origin
- Religion
- Age
- Sex
- Mental or physical ability
- Sexual orientation
- Source of payment for your health care (i.e. Medicare or Medicaid)

If you think you have been discriminated against for any of these reasons, contact a staff member at PACE of Northeast Indiana at xxx.xxx.xxxx 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 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 PACE of Northeast Indiana 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 rights in English and in any other frequently used language in your community. You can also get these materials in Braille, if necessary.

• To get a written copy of your rights from PACE of Northeast Indiana. PACE of Northeast Indiana 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 PACE of Northeast Indiana. 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 look at, or get help to look at, the results of the most recent review of PACE of Northeast Indiana. Federal and State agencies review all PACE programs. You also have a right to review how PACE of Northeast Indiana plans to correct any problems that are found at inspection.

You have the right to a choice of providers.

You have a right to choose a health care provider within PACE of Northeast Indiana's network and to get quality health care. Women have the right to get services from a qualified woman's health care specialist for routine or preventative women's health care services.

You have a right to access emergency services.

You have the right 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.

You have a 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 that you understand, and 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 to this will affect your health.

• To have PACE of Northeast Indiana help you create an advance directive. An advance directive is a written document that says how you want medical decisions to be made in care you cannot speak for yourself. You should give in 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.

You have a 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 as protected under State and Federal laws.

You also have the right to look at and receive copies of your medical records.

If you have any questions about privacy rules, call the Office for Civil Rights at 1-800-368-1019.

TTY users should call 1-800-537-7697

You have a right to file 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 PACE of Northeast Indiana. You have the right to a fair and timely process for resolving concerns with PACE of Northeast Indiana.

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 appeal any 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 PACE of Northeast Indiana is what you want, you have the right to leave the program at any time.

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 or 1-800-633-4227 to get the name and phone number of someone in your State Administering Agency.

