

LifeCircles PACE Enrollment Agreement
Your Guide to Services



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1. Introduction

Welcome to LifeCircles, a Program of All-inclusive Care for the Elderly (PACE). We are happy that you have chosen LifeCircles for your health care.

In this enrollment agreement, you will learn about the LifeCircles PACE program. LifeCircles is committed to helping you be as healthy as possible for as long as possible. We want to help you to remain in your home and community. We will do our best to help you maintain or improve your health so that you can continue to do the things you enjoy.

If you have any questions after you have read this Enrollment Agreement, please call or contact our intake staff at:

LifeCircles 560 Seminole Rd Muskegon, MI 49444 231-733-8686	LifeCircles 12330 James St Ste H-10 Holland, MI 49424 616-582-3100
Toll Free: 1-888-204-8626	
TTY/TDD users: Michigan Relay 711 or 1-800-649-3777	

Center Hours: 8:00am-4:30pm, Monday-Friday

2. Mission & Values

Mission

LifeCircles supports vulnerable individuals and their care partners by providing compassionate, comprehensive, team based care that honors their health preferences and their desire to remain living in the community.

Values

LifeCircles seeks to build an interpersonal culture where our participants, their families and care partners, our staff and all those with whom we interact experience:

- **Respect:** Showing acceptance for the diverse experiences, values, and beliefs of all whose lives we touch. Affirming the inherent worth of each with dignity, kindness, empathy, and compassion.
- **Person-centered Care:** Creating and delivering services based on what matters most to the individual person.
- **Integrity:** Demonstrating authentic, truthful and ethical behavior in all interactions.
- **Effective Communication:** Freely exchanging ideas and information with transparency and timeliness in ways that invite conversation, encourage feedback, strengthen relationships and support success.
- **Empowerment:** Continuously strengthening the skills and experiences of staff so they take initiative in solving problems, making decisions and improving service delivery.
- **Innovative Spirit:** Encouraging creativity, flexibility and diversity leading to new and inspiring solutions to enhance our community impact.

3. Program Description

“What is LifeCircles?”

LifeCircles is a Program of All-inclusive Care for the Elderly (PACE). PACE is based upon the successful long-term care model in San Francisco known as “On Lok.” PACE was developed as a health plan for senior citizens. Older people often have medical problems that last for longer periods of time. LifeCircles will arrange for doctors, nurses, or other specially-trained professionals to help with these problems. LifeCircles gives participants a place to receive the care they need.

LifeCircles is a complete health care program, offering a more personal approach of delivering healthcare. At LifeCircles, our staff want to get to know you so they can work with you and your family to provide the care that you need. Our desire is to help you stay as independent as possible by offering a complete program of health care and supportive services.

LifeCircles’ services are designed to keep you living in your own home and community. LifeCircles provides a range of services 24 hours a day, 7 days a

week, 365 days a year. LifeCircles employs and contracts with people who specialize in health care to watch for changes in your condition, provide treatment, and encourage you to do things for yourself. Services provided at the LifeCircles PACE Center include but are not limited to: medical and nursing, physical, occupational, and recreational therapies, nutritional services, social work services, medications, and home care services. Medical services such as hearing, dentistry, vision, psychiatry, and speech therapy are included.

If you need care in a hospital, LifeCircles will work closely with the hospital staff to coordinate your care. If you need nursing home services, LifeCircles will assess your needs and arrange for care at a nursing home as approved by your personal care team. In addition, LifeCircles is interested in the social, cultural, and economic needs of you and your family.

4. Special Features

LifeCircles is different from other long-term care programs. LifeCircles offers the following:

- **Your Personal Care Team.** A Personal Care Team is made up of people working especially for you. They create a plan of care with you and your family. Your team includes, at a minimum, a primary care provider, a registered nurse, a social worker, a registered dietitian, a physical therapist, an occupational therapist, a recreational therapist, the LifeCircles Center manager, a home care coordinator, a personal care attendant, and a driver. Each member of your personal care team has skills that will be used to identify your specific care needs. It is important that the team knows what is most important to you so that your plan of care can help you live the life you want to live.
- **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. In order for services to be paid for by LifeCircles, your team must approve all health care and supportive services in advance. At least twice a year, members from your team will talk to you and your family and review your individual needs to see if your needs have changed. The team is available to meet more often with you and your family if your health needs require it

or if you or your family requests it.

- **Additional Services.** If your Personal Care Team finds it necessary for you to receive additional services from other doctors or specialists, 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.
- **LifeCircles Center.** You will receive most of your health care services at the LifeCircles Center. It is a multi-purpose center that provides you with health care, nutritious meals, activities, and opportunities to socialize and make new friends.
- **Appropriate Place and Days for Your Care.** LifeCircles was developed to provide you with “all-inclusive care.” Your Personal Care Team will decide the best methods and location(s) to deliver your care after talking with you and your family. Your Team will also decide what kind of care will be provided by LifeCircles and what services you can receive in your home.
- **“Lock-In” Provisions.** Once you are a LifeCircles participant, your health care services must be authorized by your Personal Care Team, with the exception of Emergency Services.
- **Method of Payment.** If you are eligible for Medicare and/or Medicaid, LifeCircles takes the place of the standard Medicare and/or Medicaid programs. Medicare and/or Medicaid will make payments each month to LifeCircles to cover your care. You will be eligible to receive all covered services you would normally receive through Medicare and Medicaid and, in fact, you may receive more services.

5. Eligibility

“Am I eligible for LifeCircles?”

To be eligible for enrollment in LifeCircles you must:

- Be at least 55 years old;
- Live in the LifeCircles approved service area, which is currently:
All of Muskegon County
Portions of Ottawa and Allegan counties

-
- Be able to live in the community without jeopardizing your health or safety, and;
 - Meet the Nursing Facility Level of Care Eligibility for long-term care placement in Michigan.

6. Accessing Services

“How do I enroll in LifeCircles?”

There are four steps to enrolling in LifeCircles. As soon as you have completed all four steps, your medical care, medications, transportation to and from the Day Center, medical transportation, and other services described in this booklet will be covered. The four steps are:

1. **Intake.** Intake starts when you or someone in your family, or even someone from an agency, calls LifeCircles to talk about your medical needs. This call tells us that you might be eligible to participate. We will come to your home to talk to you and explain our program. We will also look at your medical needs and decide the best way to meet them. At this time, we will also evaluate whether or not you qualify for nursing home level of care, an issue decided by the State of Michigan. During this visit, you will learn:
 - How LifeCircles works, the kinds of services we offer, and the answers to any questions you have;
 - That if you enroll, you must agree to get all your health care from LifeCircles, and;
 - What your monthly cost, if any, will be.

If you are interested in becoming a participant of LifeCircles, we will ask you to sign a paper giving us permission to get all of your medical records from doctors you have seen. This will help us get a better and more complete picture of your health condition(s).

After the intake visit, a Home Care Coordinator and Social Worker will make a home visit. These visits will provide the Team a more complete picture of your home life and may identify ways to make everyday life easier for you and your caregiver.

2. **Assessment.** At the home visit with the Social Worker a visit to the Center will be scheduled with you. LifeCircles will provide transportation if needed. At this visit you will have the opportunity to meet your Personal Care Team and observe the activities in the Day Center. Members of your Personal Care Team will meet with you and ask some questions about what kind of care you need. This visit will help you understand the program and ask more questions.
3. **Enrollment.** A Personal Care Team member will meet with you and your family and/or caregiver. We will discuss with you:
 - Enrollment Agreement review and explanation
 - Your monthly costs, if any
 - The “Lock-in” feature which includes the following:
 - ◇ When you are LifeCircles participant, all of your health care services will be provided **only** through LifeCircles with the exception of emergency care.
 - ◇ Members of your Personal Care Team must approve all health care services with the exception of emergency care.
 - If you are eligible for Medicare and/or Medicaid, LifeCircles will take the place of other Medicare and/or Medicaid programs.
 - The only payment each month Medicare and/or Medicaid pays is to LifeCircles. They will not pay other providers because you may only be enrolled in one Medicare or Medicaid program at a time.
 - What you can do if you are unhappy with the care you receive from LifeCircles.
 - If you decide to be a LifeCircles Participant, we will ask you to sign the Enrollment Agreement Signature Sheet. After you sign it, you will receive:
 - ◇ Your LifeCircles Card. This identifies you as a participant in LifeCircles. Present this card when asked for your insurance card.
 - ◇ Your Emergency Plan. The detailed sheet you sign has instructions on “what to do” in case of a medical emergency.
 - ◇ Your copy of the Enrollment Agreement and the Enrollment

Agreement Signature Sheet. This must be signed before you can receive any LifeCircles services.

- ◇ Your LifeCircles PACE Center information, which includes attendance at the Center.
 - ◇ Your Personal Care Team information.
 - ◇ LifeCircles contract provider list.
 - ◇ A confidentiality statement.
 - ◇ A photo release consent form.
4. Within 30 days after your enrollment date, you or someone close to you will be contacted by a member of your Personal Care Team to develop and approve your individual care plan.

LifeCircles serves only people who need long-term care. This determination is made using the Michigan Medicaid Nursing Facility Level of Care Determination Tool. If it is decided you do not qualify for the kind of care provided by LifeCircles, you will not be able to enroll. If that should happen, you may **appeal** that decision to the State of Michigan at the following address:

State Office of Administrative Hearings and Rules
Department of Community Health
Administrative Tribunal
PO Box 30763
Lansing, MI 48909
(877) 833-0870

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

Important Notice

If you are eligible for Medicare or Medicaid, the services or benefits you get once you become a participant in LifeCircles are made possible through an 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 State of Michigan)). When you become a Participant, you are

agreeing to accept benefits **ONLY** from LifeCircles in place of your usual Medicare and Medicaid benefits. LifeCircles will provide or cover the same basic benefits.

Before you sign the Enrollment Agreement Signature Sheet, please read it carefully. Ask LifeCircles staff any questions and make sure you understand everything.

If you enroll with us, you may cancel your enrollment (disenroll) at any time. The disenrollment will take effect as soon the 1st day of the following month. If you disenroll from LifeCircles, your Personal Care Team will work with you and your family to plan for your future care needs. LifeCircles will notify Medicare and/or Medicaid of your decision to leave LifeCircles.

Lock-In Provision

You may be fully liable for the costs of medical services from an out-of-network provider or without prior authorization (with the exception of emergency services).

7. Healthcare Power of Attorney and Advance Directives

It is important that your Personal Care Team understands how you want your health care to be provided. A time may come when you are too sick to talk to your LifeCircles Personal Care Team, your family, or your friends. It is very important that your personal care team talks to you and your family before you become too sick, so that we know what kind of care you want and don't want provided. There are several ways for LifeCircles to do this. No matter what you decide, LifeCircles must follow your wishes. LifeCircles will keep a written and signed copy of your health care wishes. Here are ways for you to let LifeCircles understand and honor your wishes:

- You may give written instructions. This is called an “advance directive.” Your social worker can help create an advance directive.
- You may ask someone else to decide your care for you. This request must be in writing. This is called “durable power of attorney for health care.” You will need to make sure they understand your wishes. Your social worker can help you understand how to do this.

8. Benefits and Coverage

a. Effective Dates of Enrollment

Your enrollment is effective on the first day of the calendar month, following the date that we receive your signed Enrollment Agreement. The effective dates of your enrollment are listed on your Enrollment Agreement.

The name of your PACE Center is:

LifeCircles 560 Seminole Rd Muskegon, MI 49444 231-733-8686	LifeCircles 12330 James St Ste H-10 Holland, MI 49424 616-582-3100
Toll Free: 1-888-204-8626	
TTY/TDD users: Michigan Relay 711 or 800-649-3777	

Center Hours: 8:00am–4:30pm, Monday-Friday

You will attend your PACE center on the following days:

Your driver will pick you up at approximately: _____

(While we plan to be on time, we will do our best to let you know if we will be more than 15 minutes later than scheduled)

Your driver will take you home at approximately: _____

Your Enrollment Agreement Signature Sheet and a copy of your enrollment conference checklist appear in **Section 8b**.

b. Enrollment Conference Checklist

A LifeCircles staff member has reviewed the following information with me and/or my caregiver:

- Introduction and Program Description
- The Mission Statement of LifeCircles
- Eligibility requirements for participation in LifeCircles
- The process for enrollment in LifeCircles
- Health Care Durable Power of Attorney, Advanced Directives
- Benefits and Coverage information, which include:
 - Effective Dates of Enrollment
 - A sample of the Enrollment Conference Checklist
 - A description of the benefits and coverage I receive with LifeCircles
- LifeCircles PACE Center location, hours, and what to do when the weather is bad
- Information about the Personal Care Team that will care for me
- LifeCircles Contract Providers
- Financing information which includes:
 - Monthly Payment Information, including what I may have to pay, if anything
 - What LifeCircles 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

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- ❑ A copy of the Participant Rights
 - ❑ My responsibilities as a Participant of LifeCircles
 - ❑ The responsibilities of my family member/caregiver
 - ❑ Information about the Participant Advisory Committee
 - ❑ Information about the LifeCircles Grievance and Appeals processes
 - ❑ Information about the Medicare and Medicaid Appeals processes
 - ❑ Information about ending my LifeCircles benefits
 - ❑ Information about re-applying to LifeCircles
 - ❑ A Confidentiality Statement
 - ❑ Definitions of terms in the Enrollment Agreement
 - ❑ Notice that you may not dis-enroll from LifeCircles at a Social Security office

Enrollment Signature Sheet: (2 pages)

IN WITNESS WHEREOF, I, _____, agree to enroll in the services of LifeCircles. I have received a copy of the member Enrollment Agreement and have spoken with a LifeCircles staff member about my enrollment benefits. I understand that once I enroll in LifeCircles, I am to receive all my health care benefits from LifeCircles.

I have been allowed to ask questions and all my questions have been answered.

I understand LifeCircles and wish to become a Participant.

I understand that enrollment in LifeCircles will result in automatic disenrollment from any other Medicare or Medicaid prepayment plan.

I understand that enrollment in any other Medicare or Medicaid prepayment plan or optional benefit subsequent to enrolling in LifeCircles will subject me to voluntary disenrollment from LifeCircles.

If I obtain Medicare benefits after my LifeCircles enrollment, I understand that the Medicare benefits (Part A and/or B and Part D) will be assigned to LifeCircles.

I understand that if I have Medicaid when I enroll in LifeCircles and later become eligible for Medicare, but do not select PACE Medicare, then I will be disenrolled from LifeCircles.

I understand that if I move out of the LifeCircles Service Area or if I am absent from the LifeCircles Service Area for a period of time longer than 30 consecutive days, I must notify LifeCircles.

I agree to accept my health services from LifeCircles 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 and Medicaid Services (CMS) and its agents, the State of Michigan, and LifeCircles.

I certify that the information furnished by me in applying for skilled nursing facility, other long-term care, or hospital services under Michigan Public Acts 321 of

1966, 280 of 1939, and 368 of 1978 is correct. Further, I declare and hereby affirm that I have disclosed to the facility named in the Admission Information Section above, the names and addresses of all parties liable or who may be liable, in whole or in part, for payment of care received in the named facility. By accepting services, I hereby authorize the named facility to release all information and records for the purposes of determining the respective liability and or liabilities of all parties responsible, in whole or in part for the payment of services received in this facility. I hereby authorize and assign directly to the named facility any or all benefits I may be entitled to and otherwise payable to me for the period of service in this facility.

_____ Participant Signature	_____ Print Name	_____ Date
_____ Family Member/Guardian Signature*	_____ Print Name	_____ Date
_____ LifeCircles Representative Signature	_____ Print Name	_____ Date

*Signature other than that of the participant or immediate family member will be accompanied by the appropriate documentation in accordance with Michigan law and LifeCircles policies and procedures.

c. Your Enrollment/Family Conference Packet Checklist

Enclosed in this packet, are important items you will receive as a LifeCircles Participant. Please read and follow these directions carefully so that if an emergency happens, you, your family, and any health care facility will know exactly what to do.

- Your **LifeCircles Card** is a small white card. It identifies you as a Participant of LifeCircles and must be shown if you go to the hospital. Keep this card with your Medicare and Medicaid cards.
- The **Emergency Plan** is the detailed sheet that you sign which has instructions on “what to do” in case of an emergency.
- Your copy of the **Enrollment Agreement and Signature Sheet**. This must be signed before you can receive LifeCircles services.
- **Your PACE Center** and attendance information.
- **Your Personal Care Team** information (updated regularly).
- **LifeCircles Contract Providers** list (changes will be included in the LifeCircles newsletter and a new list will be distributed annually).
- Information about the **Participant Advisory Committee**.
- A **Confidentiality Statement**.

d. General Description

There are many kinds of care provided by LifeCircles. As a participant of LifeCircles, all necessary health services will be provided through LifeCircles. Most care is delivered at the LifeCircles Day Center. Your Personal Care Team knows about every kind of service offered and will decide with you on what is best for your needs. Services you can get from LifeCircles include:

Outpatient Health Services

- All Medicare/Medicaid covered services
- Interdisciplinary assessment and treatment planning
- General medical and specialist care, including a woman’s health specialist, as requested

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- Nursing care
 - Social services
 - Prescribed medications and pharmacy services when prescribed by a LifeCircles physician or nurse practitioner and dispensed by a LifeCircles contracted pharmacy
 - Over the counter medications that are part of your Plan of Care
 - Physical, occupational, speech, and respiratory therapies
 - Laboratory tests, x-rays, and other diagnostic tests
 - Vision care, including examinations and treatments (eyeglasses and repairs)
 - Hearing services, including evaluation, hearing aids, repairs, and regular care
 - Podiatry services, including routine foot care
 - Psychiatric care including evaluation, consultation, diagnosis, and treatment
 - Prosthetics, orthotics, durable medical equipment (hospital beds, wheelchairs, walkers), corrective vision devices (eyeglasses, lenses), hearing aids, dentures, and repair and maintenance of these items
 - Nutritional counseling and special diet assistance
 - Alcohol and other drug treatment
 - Chiropractic services
 - Recreational therapy

Inpatient Health Services

- Semi-private room and board
- General medical and nursing services
- Medical and surgical care including anesthesia, intensive care, and coronary care units as necessary
- Laboratory tests, X-rays, and other diagnostic procedures

- Receiving blood or blood products
- Prescribed drugs and medicines
- Use of oxygen
- Occupational, Physical, Respiratory, and Speech therapies
- Psychiatric care
- Social services and planning for discharge from the hospital
- Alcohol and other drug treatment services
- Ambulance services
- Emergency treatment

Nursing Home Care (as approved by the Interdisciplinary Team when it is determined you can no longer live safely in your home)

- Semi-private room and board*
- Doctor and skilled nursing services
- Custodial care
- Personal care and assistance
- Prescribed drugs and medicines
- Occupational, Physical, Respiratory, and Speech therapies
- Social services and planning for discharge from the nursing home
- Medical supplies and equipment
- Other services approved by the Personal Care Team

LifeCircles **will not** pay for private rooms or private duty nurses unless medically necessary. LifeCircles **will not** pay for non-medical charges, such as telephone, radio, or television rentals unless medically necessary. LifeCircles **will** pay for these extra services **only** if they have prior authorization and determined medically necessary by your Personal Care Team.

Other Health-Related and Community-Based Services of LifeCircles

- Diagnostic services

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- Preventive services
 - Restorative dentistry
 - Prosthetics
 - Oral surgery
 - Personal care supportive services
 - Transportation
 - Meals

Other specialty services not listed above will be covered as needed.

End of Life

You will most likely develop a close and trusting relationship with your personal care team. As your health conditions change, there may come a time when you will need end of life care. Your team will work with you to make sure that your care is focused on a high quality of life, symptom management, and staying in your own residence as long as possible. If you need end of life care, you may choose to have that care provided by the team.

Second Medical Opinion

You may want an opinion from a different health care provider. If so, please ask LifeCircles. Your request will then be reviewed by your Personal Care Team; and if approved LifeCircles will pay for it.

Exclusions: Items and Services Not Covered

LifeCircles is required to provide all Medicare and Medicaid services as approved by your Personal Care Team. The staff at LifeCircles will give you the best care possible; however, there are some things that are not covered.

The following is a list of things we **cannot** pay for:

- Any services that **do not** have prior authorization by the Personal Care Team (except for Emergency Services)
- Cosmetic surgery, unless it is determined by LifeCircles Personal Care Team to be medically necessary

- Personal convenience items, such as a telephone or television in your room at a hospital or skilled nursing facility, unless specifically authorized by the Personal Care Team as part of your Plan of Care
- Private duty nursing, unless medically necessary
- Private room in a hospital, unless medically necessary
- Experimental or investigational medical and surgical procedures, equipment and medications, that are otherwise not covered by Medicare or Medicaid or covered under clinical trials
- Any services provided outside of the United States, except as may be permitted under the Federal regulations and 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)

e. The Personal Care Team

“Who are the members of my Personal Care Team?”

Your Personal Care Team at LifeCircles will be assigned to you at your enrollment conference. Your Team will consist of the following:

- The **LifeCircles Center Manager** is responsible for the day-to-day operations of the PACE Center.
- The **Primary Care Physician, Nurse Practitioner and/or Physician Assistant** is responsible for overseeing the primary medical care you will receive.
- The **Registered Nurse** is responsible for overall nursing care needs. Your registered nurse work closely with the team to provide your medical care.
- The **Personal Care Attendants (PCA)** are responsible for helping you with your personal care needs in the PACE Center and in your home.
- **Home Care Coordinators** are responsible for the coordination of services offered in the home, including personal care attendants and durable medical equipment.
- The **Registered Dietitian** is responsible for making sure your food and

nutritional needs are met.

- The **Social Worker** is responsible for social support services. The social worker may help you find outside resources, answer questions about your Medicaid (if applicable), and be a resource for help with family and emotional issues.
- The **Recreation Team** encourages you to meet other participants and engage in meaningful activities. You may suggest new or different activities that you would also enjoy while at the LifeCircles Center.
- The **Physical Therapist** helps keep you moving and your muscles strong. The physical therapist will also make sure that any equipment fits your needs and is easy for you to operate.
- The **Occupational Therapist** helps you work on skills you need to complete every day activities. Examples include being able to comb or brush your hair, feed yourself, and write your name.
- The **Transportation Coordinator** is responsible for managing the transportation needs of the LifeCircles PACE Center. The Transportation Coordinator schedules your travel time and the driver's daily routes. The Transportation Coordinator will let you know if your driver is running late or if there is a problem.
- The **Drivers** are the people who pick you up and take you home on days you attend the LifeCircles PACE Center. They will also drive you to field trip outings with other participants or take you to medical specialist appointments as needed.
- The **Pharmacy Team** is responsible for ensuring you have the correct medications and dosage. They work closely with the healthcare providers to make sure you have the medications that will be most helpful to you with the fewest side effects. The Pharmacy Team will package the medications in a way that works for best you.

f. Contract Providers

“Does LifeCircles use contracts for some of its services?”

LifeCircles contracts with community providers for many services. Included as an

insert in your enrollment/family conference packet is a list of contracted community providers. This is referred to as the LifeCircles network.

This list is updated regularly. You may request a copy of the contracted community provider list at any time. All contract services **must** be pre-approved by your Personal Care Team.

An example of community providers on this list include medical specialists such as eye doctors, dentists, cardiologists, and urologists. Also included on this list are hospitals, nursing homes, assisted living facilities, and home care providers.

g. Financing – Monthly Payment Information

Your Monthly Bill: How much will you have to pay?

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

If you are eligible for:

MEDICARE AND MEDICAID or MEDICAID ONLY

If you are eligible for both Medicare and Medicaid, or Medicaid only, you will make no monthly premium payment to LifeCircles and you will continue to receive all PACE services, including prescription drugs.

Please note: If you use Medicaid as the source of payment for LifeCircles and do not intend to pay any portion of the fee privately, you must reapply for Medicaid every year. Your social worker can assist you with the PACE Medicaid recertification process.

MEDICARE ONLY

If you have Medicare and are not eligible for Medicaid, then you will pay a monthly premium to LifeCircles. Your monthly premium of \$ _____ starts on _____ (date). Because this premium 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

\$_____ upon enrollment. You will be notified of this Medicare prescription drug coverage amount on an annual basis thereafter. You may pay both premiums together or you may contact your social worker for additional payment options.

PRIVATE PAY (Neither Medicare or Medicaid)

If you are not eligible for Medicare or Medicaid, you will pay a monthly premium to LifeCircles in the amount of \$_____. Because this premium does not include the cost of prescription drugs, you will be responsible for an additional premium for prescription drug coverage in the amount of \$_____ upon enrollment. You will be notified of this Medicare prescription drug coverage amount on an annual basis thereafter. You may pay both premiums together or you may contact your social worker for additional payment options.

Prescription Drug Coverage Late Enrollment Penalty

Please be aware that if you are eligible for Medicare prescription drug coverage and are enrolling in LifeCircles after going without Medicare prescription drug 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 can contact your LifeCircles social worker for more information about whether this applies to you.

Instructions for Making Payments to LifeCircles

If you have to pay a monthly charge to LifeCircles, 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 on the first day of every month.

Payment can be made by check or money order to:

**LifeCircles
560 Seminole Rd
Muskegon, MI 49444**

h. Long Term Care Facilities

“What happens if I am placed in a Nursing Home or any other kind of Long-Term Care facility?”

If at any time your Personal Care Team decides with you and your family that you can no longer be cared for in your home, you may need to be placed in another health care setting. This can be for a short period of time, or if necessary, it may be a permanent placement.

If you remain in a long-term care facility for 30 days in a row, the State of Michigan requires that you pay the money you have been receiving when you were at home to LifeCircles to help pay for your room and board in the long-term care facility. LifeCircles will then pay for your room and board. LifeCircles will continue to provide all your medical care and supervise all of your needs.

As part of the process of placing you in a long-term care facility, LifeCircles will notify the State of Michigan to determine what amount of money, if any, you will be required to pay LifeCircles.

Your circumstances will determine whether you have a patient pay amount. These circumstances include: a community spouse income allowance, a family allowance, a children’s allowance, a health insurance premium, and guardianship/conservator expenses. Currently, the State of Michigan allows a person in a nursing facility a patient allowance of \$60 per month.

If you do not pay the amount of money that the State of Michigan determines you owe LifeCircles monthly, this could affect your eligibility for Medicaid and your continued enrollment in LifeCircles. These rules apply to everyone who receives Medicaid and is placed in a long-term care facility.

9. Emergency and Urgent Care

“What about urgent or emergency care services?”

IN AN EMERGENCY, CALL 911

a. Getting Emergency Services

An emergency is an injury or sudden illness that a prudent layperson would believe requires immediate medical attention. In an emergency, you can reasonably expect that if you do not get immediate medical attention, you may seriously jeopardize your health, risk serious damage to organs or impairment to bodily functions.

Prior authorization for treatment of an emergency medical condition is **not** required. LifeCircles will always pay for emergency services whether you are in or out of the service area. If in doubt about whether a problem is an emergency please call the LifeCircles PACE Center at **(231) 733-8686, (616) 582-3100 or Toll Free 1-888-204-8626**.

b. After Getting Emergency Services

Whether you are in or out of the service area, **please call** LifeCircles as soon as possible after receiving emergency services at an emergency room so that your Personal Care Team can manage your follow-up care. If you are out of the area and a physician certifies that you may travel safely, your Personal Care Team may ask that you come back to the service area to receive follow-up care.

c. Getting Urgent Care

If you feel that you need health services quickly, but it is not an emergency, LifeCircles will arrange for these urgently needed services.

Urgent care is care provided to you when you are out of the PACE service area and if you believe your illness or injury is too severe to postpone treatment until you return to the service area, but your life or function is not in severe jeopardy.

If you are in or out of the service area and need urgent care, please call LifeCircles at **(231) 733-8686, (616) 582-3100 or Toll Free 1-888-204-8626**.

Approval for urgent care services will be given within one (1) hour after LifeCircles is notified. If we have not taken action after one (1) hour, then approval is given by default.

If you call after PACE Center hours, the LifeCircles answering service will immediately contact the LifeCircles on-call team member who will tell you what to do and help you get the care you need. A medical provider is available 24 hours a day, 365 days a year.

If you receive urgent care out of the service area, please contact LifeCircles as soon as possible at (231) 733-8686, (616) 582-3100 or Toll Free (888) 204-8626.

d. If You Receive a Bill

If you receive a bill or pay for any Emergency Services, Urgent Care, Out-of-Area Services, or prior authorized services, submit the bill or receipt to LifeCircles for payment consideration. Receipts should be submitted to your Personal Care Team.

If you have questions about any bills, contact your Personal Care Team at (231) 733-8686, (616) 582-3100 or Toll Free 1-888-204-8626 anytime during business hours Monday-Friday 8:00 a.m. – 4:30 p.m.

10. Accidental Injury

“What happens if I am hurt as a result of someone else’s actions?”

If you are injured by someone else’s actions, such as being involved in an automobile accident, and you require additional medical care, LifeCircles 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, LifeCircles has a claim upon that recovery in the amount of the costs LifeCircles had to spend to provide you with the additional medical care you received because you were hurt. These rules and regulations would apply under your usual Medicare and/or Medicaid benefits. Remember, you **must** notify LifeCircles if you are involved in an accident.

11. Participant Rights

At LifeCircles we are dedicated to providing you with quality health care services so you may remain as independent as possible. Our staff is committed to treating each and every participant with dignity and respect and ensuring that all participants are involved in planning for their care and treatment.

As a LifeCircles participant, you have the following rights:

YOU HAVE THE RIGHT TO BE TREATED WITH RESPECT

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

- Receive all of your health care in an accessible manner and in a safe, clean environment.
- Be free from harm, including physical or mental abuse, neglect, corporal punishment, excessive medications, physical punishment or being placed by yourself against your will.
- Be free from any physical or chemical restraint used on you for discipline or for the convenience of LifeCircles staff that are not necessary to treat your medical symptoms or prevent injury.
- Be free from hazardous procedures.
- Receive treatment and rehabilitation services designed to promote your functional ability to the optimal level and encourage your independence.
- Receive care from professionally-trained staff that has the education and experience to deliver the services for which they are responsible.
- Be ensured of auditory and visual privacy during all health care examinations or treatments.
- Be encouraged and assisted to use your rights in LifeCircles.
- Get help, if you need it, using the Medicare and Medicaid appeal processes and your civil and legal rights.

- Be encouraged and assisted in talking to LifeCircles staff about changes in policy and services you think should be made.
- Use a telephone while at the PACE center, make and receive confidential calls, and/or have such calls made for you, if necessary.
- Not have to do work or perform services for LifeCircles.

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. You cannot be discriminated against by LifeCircles or any of their contractors because of your:

- Race
- Ethnicity
- National origin
- Religion
- Sex
- Age
- Sexual orientation
- Mental or physical ability
- 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 a staff member at LifeCircles to help you resolve your problem.

If you have any questions, you can call or write to:

Office for Civil Rights
U.S. Department of Health and Human Services
233 N Michigan Ave Suite 240
Chicago, IL 60601
(800) 368-1019
(312) 886-2359 or (312) 353-5693 (TDD)

Office of Recipient Rights
Michigan Department of Health and Human Services
Lewis Cass Building
320 South Walnut St
Lansing, MI 48913
517-373-2319 or 1-800-854-9090

YOU HAVE A RIGHT TO INFORMATION AND ASSISTANCE

You have the right to get accurate, easy to understand information and have someone help you make informed health care decisions. You also 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.
- Have someone interpret all information given to you into your preferred language in a culturally competent manner if your first language is not English or you cannot speak English well enough to understand the information being given to you.
- Have the Enrollment Agreement and your participant rights discussed fully and explained to you in a manner you understand.
- Receive marketing material in English and any other frequently used language in your community. You also can get these materials in Braille, if necessary.
- Get a written copy of your participant rights from LifeCircles. LifeCircles will also post these rights in a public place in the PACE Center where it is easy to see them.
- Be fully informed, in writing, of the services offered by LifeCircles. This includes telling you which services are provided by contractors instead of the PACE staff. You will be given this information before you join LifeCircles, at the time you join and when there is a change in services.
- Review the results of the most recent state and/or federal inspection of LifeCircles. Federal and state agencies review all PACE programs. You also have a right to review how LifeCircles plans to correct any problems that are found at inspection.

YOU HAVE A RIGHT TO A CHOICE OF PROVIDERS

- You have the right to choose a health care provider within the LifeCircles 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 A RIGHT TO ACCESS EMERGENCY SERVICES

You have the right to access emergency services when and where you need them without LifeCircles approval. You have the right to access emergency health care services when and where the need arises without prior authorization from your interdisciplinary team or any LifeCircles staff member. 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 you understand, be fully informed of your health status, and make health care decisions.
- Be informed of all treatment prescribed by the interdisciplinary team prior to being treated, when and how services will be provided, and the names and functions of people providing your care.
- Refuse treatment or medications. If you choose not to get treatment, you must be told how this will affect your health.
- Be assured that decisions regarding your care will be made in an ethical manner.
- Be assured that you and your family will be taught about an illness affecting you so that you can help yourself, and your family can understand your illness and help you.
- Receive information on advance directives and have LifeCircles help you create an advance directive. An advance directive is a written document

that says how you want medical decisions to be made in case you cannot speak or act for yourself.

- Participate in making and carrying out your plan of care, which will be designed to promote your functional ability to the highest level and encourage your independence. You can ask for your plan of care to be reviewed at any time. You can also request a reassessment by the interdisciplinary team at any time.
- 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

There is a new 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 you may call the Office for Civil Rights toll-free at 1-800-368-1019. TTY users should call Michigan Relay 711 or 1-800-649-3777.

You have the right to:

- Talk with health care providers in private and have your personal health care information kept private as protected under state and federal laws.
- Be assured that your written consent will be obtained for the release of information to persons not otherwise authorized under law to receive your information.
- Review and receive copies of your medical records and request amendments to those records.
- Be assured that all information contained in your health record will be held in confidence, including information contained in any automated data bank. LifeCircles will require your written consent for the release of information to persons not otherwise authorized under law to receive it. You may provide written consent, which limits the degree of information and the persons to whom information may be given.

YOU HAVE A RIGHT TO FILE A COMPLAINT

You have a right to complain about the services you receive, or that you need and do not receive, about the quality of care, or any other concerns or problems you have with LifeCircles. You have the right to a fair and timely process for resolving concerns with LifeCircles. You have the right to:

- A full explanation of the grievance and appeals process.
- 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.
- Appeal any treatment decision by LifeCircles, staff, or contractors.

YOU HAVE A RIGHT TO LEAVE THE PROGRAM

You have the right to leave the program (dis-enroll) at any time for any reason. Please notify any LifeCircles staff member if you wish to dis-enroll from LifeCircles.

If you feel any of your rights have been violated, please report them immediately to your social worker or call our office during regular business hours at **(231)733-8686, (616) 582-3100 or Toll Free 1-888-204-8626.**

If you want to talk with someone outside of LifeCircles about your concerns, you may call:

1-800-MEDICARE (1-800-633-4227), or

The **State of Michigan** at 1-517-241-4293

12. Non-Discrimination Notice

LifeCircles complies with applicable Federal civil rights laws and does not discriminate on the basis of race, ethnicity, national origin, religion, age, sex, mental or physical disability, sexual orientation, or source of payment for your health care. LifeCircles does not exclude people or treat them differently because of race, ethnicity, national origin, religion, age, sex, mental or physical disability, sexual orientation, or source of payment.

LifeCircles:

- Provides free aids and services to people with disabilities to communicate effectively with LifeCircles, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Erin Whitney, Privacy Officer.

If you believe that LifeCircles has failed to provide these services or discriminated in another way on the basis of race, ethnicity, national origin, religion, age, sex, mental or physical disability, sexual orientation or source of payment, you can file a grievance with: Erin Whitney, Privacy Officer, 12330 James St. H-10, Holland, MI 49424, 1-616-582-3115, TTY: 1-800-649-3777, Fax: 1-616-582-3149, Email: ewhitney@lifecircles-pace.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Erin Whitney, Privacy Officer, is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

US Department of Health and Human Services
200 Independence Ave SW
Room 509F HHH Bldg
Washington DC 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

If you speak any language other than English, language assistance services, free of charge, are available to you. Call 1-888-204-8626 (TTY: 1-800-649-3777).

Spanish:

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-204-8626 (TTY: 1-800-649-3777).

Arabic:

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-888-204-8626 (رقم هاتف الصم والبكم: 1-800-649-3777).

Chinese:

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-888-204-8626 (TTY : 1-800-649-3777)。

Assyrian:

ܠܘܥܒܝܢܐ: ܝܢܐ ܕܥܠܡܐ ܕܥܝܪܐܢܐ، ܝܢܐ ܕܥܠܡܐ ܕܥܝܪܐܢܐ، ܝܢܐ ܕܥܠܡܐ ܕܥܝܪܐܢܐ ܕܥܝܪܐܢܐ ܕܥܝܪܐܢܐ ܕܥܝܪܐܢܐ ܕܥܝܪܐܢܐ. ܕܥܝܪܐܢܐ ܕܥܝܪܐܢܐ ܕܥܝܪܐܢܐ ܕܥܝܪܐܢܐ ܕܥܝܪܐܢܐ. 1-888-204-8626 (TTY: 1-800-649-3777)

Vietnamese:

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-204-8626 (TTY: 1-800-649-3777).

Albanian:

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-888-204-8626 (TTY: 1-800-649-3777).

Korean:

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-204-8626 (TTY: 1-800-649-3777) 번으로 전화해 주십시오.

Bengali:

লক্ষ্য করুন: যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। ফোন করুন 1-888-204-8626 (TTY: 1-800-649-3777)।

Polish:

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-888-204-8626 (TTY: 1-800-649-3777).

German:

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-888-204-8626 (TTY: 1-800-649-3777).

Italian:

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-888-204-8626 (TTY: 1-800-649-3777).

Japanese:

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-888-204-8626 (TTY:1-800-649-3777) まで、お電話にてご連絡ください。

Russian:

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-204-8626 (телетайп: 1-800-649-3777).

Serbo-Croatian:

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-888-204-8626 (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 1-800-649-3777).

Tagalog:

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-204-8626 (TTY: 1-800-649-3777).

13. Participant and Caregiver Responsibilities

“What does LifeCircles expect from me?”

The services of LifeCircles depend upon the partnership with you and/or your caregivers. Along with the rights you have when you enroll in LifeCircles, you also have some responsibilities, which include the following:

- To become familiar with the information in this Enrollment Agreement and the rules you must follow when enrolled in LifeCircles.
- To be involved in planning your care.
- To talk with your team if you have any questions, and to give your team information they need to care for you.
- To follow treatment plan instructions and care that is agreed upon by you and your team.
- To act in a way that supports the care given to other patients and helps the smooth running of the LifeCircles Center, other locations where you receive services.
- To take care of any durable medical equipment, such as dentures, eyeglasses, and hearing aids, provided to you by LifeCircles.
- To pay any monthly costs on time.
- To let LifeCircles know as soon as possible when you have questions, suggestions or problems with your care or payment for your care.
- To use LifeCircles contracted hospitals and services, except for emergency care.

14. Consumer Support and Advocacy

“How do I get involved?”

At LifeCircles, we value your suggestions and opinions. There is an opportunity for you to get involved. It is called the Participant Advisory Committee (PAC). This committee consists of participants, caregivers, and community representatives. The main function of the LifeCircles Participant Advisory Committee is to provide advice to the governing body on matters of concern to participants.

The purpose of the PAC is to provide a mechanism for participant feedback and recommendations within the Quality Improvement structure.

The goals are as follows:

1. To improve service delivery within LifeCircles through increased participant feedback.
2. To make recommendations to LifeCircles administration regarding program policies.
3. To enhance the participant and caregiver perspective within the participant plan of care.
4. To receive information regarding any changes in the LifeCircles organizational structure that has been approved by the Centers for Medicare and Medicaid Services and the State of Michigan.

Meetings will be held quarterly at a date and time to be determined that is convenient for the members. The LifeCircles Center Manager or other designee will serve as staff liaison and facilitator.

Factors for committee membership include availability, interest, and willingness to participate, and ability to participate in the committee's discussions. If a member experiences a significant change in condition, they are invited to continue as a committee member as long as they feel they are able. Caregiver members are invited to stay on the committee after the person they are caring for has passed away. Meeting minutes are forwarded to the Board of Directors, the Quality Assurance Committee, the Center Manager, and the Executive Director. Meeting minutes will also be kept on file.

If you are interested in participating in the Participant Advisory Committee, please notify a member of your Personal Care Team or call the Center at **(231) 733-8686, (616) 582-3100 or Toll Free 1-888-204-8626.**

15. Your Satisfaction

a. Participant Grievance Process

What is a Grievance?

A grievance is defined as a complaint, either written or oral, expressing dissatisfaction with the services provided or the quality of your care that is provided by LifeCircles.

You have the right to file a grievance about anything. Examples are:

- The quality of services you receive in the home, at the LifeCircles PACE Center, or in any inpatient or housing facility (hospital, nursing home, or assisted living facility);
- Mistakes you feel have been made by LifeCircles;
- Waiting times on the phone or in the waiting/exam room;
- Behavior of any of your care providers or program staff;
- Adequacy of LifeCircles PACE Center facilities;
- Quality of food provided by LifeCircles; and
- Transportation provided by LifeCircles.

You may file a grievance with any LifeCircles staff member at any time, either verbally or in writing. If you have a grievance after hours, you may telephone the on-call team member at (231) 733-8686, (616) 582-3100 or Toll Free 1-888-204-8626. Once you or your representative has filed a grievance, we will place your grievance in our grievance log at the LifeCircles PACE Center.

Our goal is to resolve participant grievances within one (1) day, however it may take longer. If we need more time to investigate your concerns, we will let you know how long we think it may take. It is the responsibility of our Center Manager to investigate and seek a resolution of the grievance as soon as possible but no later than thirty (30) business days from the date the grievance is received by LifeCircles. The grievance and the resolution to the grievance will be discussed with you and a final decision will be sent to you in writing.

During the grievance process we will continue to furnish you with PACE services at the frequency provided in your current plan of care. Your grievance will be kept confidential by all LifeCircles staff.

b. Participant Appeal Process

What is an Appeal?

If LifeCircles refuses to provide or pay for a service that you feel is necessary for your health, you or your representative have the right to request an appeal of LifeCircles decision. If your Personal Care Team denies a request for services or payment or reduces your services, your team will provide you written information about the denial and about how to file an appeal.

You may request an appeal if LifeCircles:

- Denies a Service: refuses to provide a service you have requested
- Reduces a Service: reduces a previously approved service you are presently receiving
- Denies Payment for a Service: refuses to pay for a service you have already received
- Does Not Act Promptly: fails to respond in the required time to a request for services or payment
- Disenroll you on an involuntary basis
- Refuses to enroll you in the program

There are two types of appeal systems available to you:

1. The LifeCircles Internal Appeal process
2. The external Medicare or Medicaid Appeals process

ALL APPEALS ARE KEPT CONFIDENTIAL

When an appeal is filed, LifeCircles staff will keep the matter private and only involve those persons directly responsible for resolving the appeal.

i. Internal Appeal Process with LifeCircles

If LifeCircles denies a request for a service or payment for a service, you have the right to file an internal appeal either verbally or in writing to LifeCircles. You may request this type of an appeal within 30 days of the day LifeCircles notifies you that your request for service(s) has been discontinued, reduced, or denied. A person not involved in the Personal Care Teams initial decision to discontinue, reduce, or deny any service(s) in question will evaluate the appeal. You or your authorized representative may present or submit relevant facts and/or evidence for review to LifeCircles.

Until you receive notice of a final decision, you may choose to continue to receive any service(s) in question. You may have to pay for these services if the final decision is not in your favor. You also have a right to file an appeal with the State of Michigan at the same time you have filed an appeal with LifeCircles.

LifeCircles will make a decision on the appeal as promptly as your health condition requires but no later than thirty (30) calendar days after receiving the request for an appeal.

ii. Requesting an Expedited Appeal

If you feel a discontinued, reduced, or denied service is urgently needed in order to avoid serious harm to your health, you may request an expedited appeal. You may submit the appeal yourself or ask for assistance from any member of your Personal Care Team.

By requesting this type of appeal, LifeCircles will automatically expedite its review of your appeal. LifeCircles must give you a decision on your appeal as quickly as your health condition requires but no later than 72 hours after your request for an expedited appeal.

iii. Extending the Expedited Review Time Period

The 72-hour timeframe in an expedited appeals review may be extended up to 14 calendar days for either of the following reasons:

- if you or your caregiver requests the extension, or

-
- if LifeCircles justifies to the State of Michigan the need for additional information and the delay is in your interest.

iv. External Appeal Process with Medicare and/or Medicaid

If LifeCircles discontinues, reduces, or denies your request for a service or payment of a service, you may choose to file an external appeal. The external appeals process provides a review through either the Medicare or Medicaid program. Until you receive notice of a final decision, you may choose to continue to receive the service(s) in question. **PLEASE NOTE:** You may have to pay for these services if the final decision is NOT in your favor.

You may choose to file an external appeal to either Medicare or Medicaid (but not both) depending on your eligibility. Please talk with a Personal Care Team member or call LifeCircles at (231) 733-8686, (616) 582-3100 or Toll Free 1-888-204-8626. (TTY/TDD users: Call Michigan Relay 711 or 800-649-3777), if you would like help in filing an external appeal. LifeCircles will assist you in choosing either the Medicare or Medicaid external appeal process and will forward information accordingly.

a) Medicaid External Appeals Process

If you are eligible for Medicaid, you may choose to use the Medicaid external appeal process. Even if you begin with the LifeCircles appeal process, you have the right at any time to go directly to the State of Michigan.

For assistance in completing this process, you may contact any of the following resources:

- **LifeCircles:** LifeCircles can help you complete this process. You may request help from any LifeCircles staff member or you may contact LifeCircles directly at:

LifeCircles
560 Seminole Rd
Muskegon, MI 49444
(231) 733-8686, (616) 582-3100
Toll Free: 1-888-204-8626
TTY/TDD: Call Michigan Relay 711 or 1-800-649-3777

- **State of Michigan:** You may contact the State of Michigan and request an external appeal within ninety (90) days of LifeCircles decision. To request an external appeal, please contact the State of Michigan in writing at:

Michigan Administrative Hearing System
Department of Community Health
Administrative Tribunal
PO Box 30763
Lansing, MI 48909
(877) 833-0870

Important Note

LifeCircles will continue to provide the service(s) in question until a final decision on the appeal has been made. You might have to pay for the services if the appeal decision is not in your favor. LifeCircles or its contracted provider can bill you for the costs of the appealed services, but only if you signed a form in advance saying that you understand you may have to pay for the services. LifeCircles will continue to provide you with all of the other services that have been authorized by your Personal Care Team.

b) Medicare External Appeals Process

If you are eligible for Medicare and wish to use the Medicare appeal process, you must go through the LifeCircles appeal process **before** your appeal can go to an outside appeals organization.

Medicare contracts with an independent review entity to review appeals for PACE programs like LifeCircles. The independent review entity will contact LifeCircles with the results of their review.

16. Termination of Benefits

“Why would my LifeCircles benefits be stopped?”

Whether your disenrollment is voluntary or involuntary, LifeCircles will make sure you receive care for services in other Medicare and Medicaid programs that you are eligible for. We will work with the Medicare and Medicaid agencies by making your medical records available to your new health care providers in a timely

manner.

If you had additional health care coverage through a Medi-gap policy, you may be eligible to reapply for that policy if you are dis-enrolled from LifeCircles. LifeCircles will help you with this process.

If you have Medicaid when you enroll in LifeCircles and later become eligible for Medicare, but do not select PACE Medicare, then you will be disenrolled from LifeCircles.

Important Note

If you enroll in any other Medicare or Medicaid prepaid plan or optional benefit, including a Medicaid HMO, Hospice, Medicare Prescription Drug Plan, or Home and Community-Based services while you are a LifeCircles participant, this will be considered your voluntary disenrollment from our program. If you enroll in any of these plans, you will lose all services and benefits provided by LifeCircles. You will receive notification from LifeCircles of this termination of your enrollment. Your disenrollment will be effective as described under “Voluntary Disenrollment” below.

a. Voluntary Disenrollment

You may choose to disenroll from LifeCircles at any time for any reason. If you want to disenroll, please let a LifeCircles staff member know. **Please note: you cannot disenroll from LifeCircles at a Social Security office.** Should you provide notice to voluntarily disenroll, the disenrollment will be effective on the first day of the month after LifeCircles receives the notice. PACE services will continue until the effective date of disenrollment. You may discuss the timing of your disenrollment with your Personal Care Team to ensure that your coverage is not interrupted. If you are eligible for Medicare and/or Medicaid at disenrollment, you may go back to other Medicare and/or Medicaid providers in the community.

Even though you have requested disenrollment, you must still get all routine services from LifeCircles medical providers until the effective date of your disenrollment. LifeCircles will send you a letter that confirms when your

disenrollment is effective.

b. A Move from or Extended Absences from the LifeCircles Service Area

Please discuss any planned absence from the service area with your Personal Care Team.

If you will be out of the service area for more than 30 consecutive days you will no longer be eligible for participation in LifeCircles unless you have made arrangements with your Personal Care Team. If you have not made arrangements, we may disenroll you from LifeCircles.

c. Involuntary Disenrollment

LifeCircles can stop your benefits for the following reasons:

- The participant fails to pay, or make satisfactory arrangements to pay, any premium or patient pay (share of cost) amount due to LifeCircles after a 30-day grace period.
- The participant moves out of the LifeCircles service area or is out of the service area for more than 30 consecutive days, unless LifeCircles agrees to a longer absence.
- The participant is determined to no longer meet the State of Michigan Nursing Facility Level of Care criteria and is not deemed eligible.
- The LifeCircles PACE agreement with CMS and the State of Michigan is not renewed or is terminated.
- LifeCircles is unable to offer health care services due to the loss of state licenses or contracts with outside providers.
- A participant with decision-making capacity who consistently refuses to comply with his or her individual plan of care or the terms of the Enrollment Agreement, making it medically unfeasible for the attending physician or other health care professionals to safely or prudently render covered services to the participant.
- A participant or family member or caregiver who engages in disruptive or threatening behavior. A participant whose behavior jeopardizes his or her health or safety, or the safety of others.

If you are eligible for Medicare and/or Medicaid at disenrollment, you may go back to other Medicare and/or Medicaid providers in the community.

Involuntary disenrollment will:

- Occur after LifeCircles notifies MDHHS and MDHHS reviews the involuntary disenrollment and determines LifeCircles documented acceptable grounds for disenrollment
- Be effective on the first day of the next month that begins 30 days after the day LifeCircles sends notice of the disenrollment to you

17. Renewal Provisions

“If I decide to leave LifeCircles, is there any way I can be a Participant again?”

If you disenroll or are disenrolled from LifeCircles, you may re-enroll if you meet the eligibility requirements. You will have to complete the application process each time you enroll in LifeCircles. There is no limit to the amount of times you may enroll in LifeCircles.

If you are being disenrolled because you did not pay your monthly bill, you may stop the disenrollment by paying the bill. However, you must pay this bill before the end of the last month you receive services from LifeCircles or you may have to begin the application process over again.

18. Confidentiality Statement

Information from your medical records and from providers or hospitals will be kept private and confidential. It will not be shared with anyone without your written consent, except as required by Federal and State law.

Any personal information held by LifeCircles and its network providers is also protected and will remain confidential. LifeCircles will not allow unauthorized people to see your medical records.

19. Medicare Part D

Medicare Prescription Drug Coverage

LifeCircles provides prescription drug coverage for prescription drugs to all participants. You don't need to join a Medicare prescription drug plan because you will get Medicare prescription drug coverage through LifeCircles. If you join a separate Medicare prescription drug plan, you will be disenrolled from LifeCircles. LifeCircles provides not only your prescription drug coverage, but all of your health care services. Therefore, if you dis-enroll from LifeCircles by joining a separate Medicare prescription drug plan, you will no longer receive other health care benefits from LifeCircles.

Participants with both Medicare and Medicaid coverage

As a LifeCircles participant, you will automatically receive all prescription drug and healthcare benefits from LifeCircles. LifeCircles has a contract with Medicare to provide you with prescription drug coverage at no cost to you.

If you have questions about this or other information you receive regarding the Medicare prescription drug plans or Medicare prescription drug coverage, we encourage you to talk to your social worker or any other staff person at LifeCircles.

Participants with Medicare, but not Medicaid coverage

If you do not have Medicaid coverage, you will be required to pay a separate monthly premium for your prescription drug coverage. You will receive all prescription drug and health care benefits from LifeCircles.

You may have received a letter from the Social Security Administration (SSA) that you may qualify for extra help in paying your Medicare prescription drug costs. This notification should include an *Application for Help with Medicare Prescription Drug Plan Costs* (Form SSA-1020). **It is very important that you fill out this application and return it to SSA.** If you haven't received an application in the mail and would like to receive one, call SSA at 1-800-772-1213. TTY users should call Michigan Relay 711 or 1-800-649-3777. You can also visit www.socialsecurity.gov on the web. SSA's application process provides you

with the quickest decision. You can also go to a local Medicaid office and apply. LifeCircles will be glad to assist you to find out if you qualify for extra help with costs related to Medicare prescription drug coverage.

Prescription Drug Coverage Late Enrollment Penalty

Please be aware that if you are eligible for Medicare prescription drug coverage and are enrolling in LifeCircles after going without Medicare prescription drug 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 can contact your LifeCircles social worker for more information about whether this applies to you.

20. Definitions

Appeal – An *Appeal* is a formal complaint process involving the Participant’s health care services including denial of services or non-payment of services.

Benefits and Coverage – *Benefits and Coverage* is the health and health-related services we provide after you sign the enrollment agreement. You must sign this agreement to be a LifeCircles participant. 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 LifeCircles, Medicare (Centers for Medicare and Medicaid Services), and Medicaid (State of Michigan). This enrollment agreement to participate in LifeCircles gives you the same benefits you would get under Medicare/Medicaid, plus other benefits. To get any benefits from LifeCircles, you must meet the conditions that are in the Participant Enrollment Agreement.

Emergency Medical Condition – An *Emergency Medical Condition* is defined as: a medical condition manifesting itself by acute conditions of sufficient severity (including severe pain) such that a prudent layperson, with an average knowledge of health and medicine, could reasonably expect the absence of medical attention to result in the following:

- serious jeopardy to your health; or
- serious impairment to bodily function; or
- serious dysfunction of any bodily organ or part.

Enrollment Agreement – The *Enrollment Agreement* is the document you are

currently reading, a booklet that tells you about LifeCircles, 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 LifeCircles.

Enrollment Agreement Signature Sheet – The *Signature Sheet* is the form inside the Enrollment Agreement you must sign before you can be a LifeCircles participant. After you sign this agreement, you will get LifeCircles services until you voluntarily or involuntarily end your enrollment and participation.

Grievance – A *Grievance* is a formal complaint process, written or verbal, about the kind of care or quality of care that the participant has received.

Health Care Services – *Health Care Services* are services such as medical care, diagnostic tests, medical equipment, appliances, drugs, prosthetic and orthotic devices, nutritional counseling, nursing, social services, therapies, dentistry, optometry, podiatry, audiology, etc. Health care services may be provided in the LifeCircles Center or in your home. These services may also be provided in the offices of specially-trained people, in hospitals, or nursing homes that have agreements with LifeCircles to give health care services to LifeCircles participants.

Lock-in Provision – The *Lock-in Provision* means the source of non-emergency services are limited to LifeCircles, or to sources pre-approved by LifeCircles.

Long-Term Care – *Long-Term Care* is a variety of services that includes medical and non-medical care to people who have a chronic illness or disability. Long-term care helps meet health or personal needs. Most long-term care is to assist people with support services such as activities of daily living like dressing, bathing, and using the bathroom. Long-term care can be provided at home, in the community, in assisted living, or in nursing homes.

Medicaid – *Medicaid* is a joint Federal and State program that helps with medical costs for some people with low incomes and limited resources.

Medicare – *Medicare* is a Federal program of health care insurance for persons who are 65 years or older, for some persons with disabilities under age 65, and for people with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a transplant).

- **Medicare Part A** – part of Medicare health insurance that covers

hospitalization

- **Medicare Part B** – part of Medicare health insurance that covers medical coverage, such as doctor office visits and outpatient services
- **Medicare Part D** – part of Medicare health insurance that covers prescription drugs

Monthly Charge - the amount you must pay, *if you are required*, on the first (1st) day of every month. You will pay this directly to LifeCircles to receive benefits as an enrolled participant.

Nursing Home – A *Nursing Home* is a health facility licensed as a Nursing Home Facility by the State of Michigan.

Participant – A *Participant* is anyone who is eligible and has signed the Enrollment Agreement Signature Sheet to receive health care services from LifeCircles.

Personal Care Team – The *Personal Care Team* is the LifeCircles interdisciplinary professional team made up of at least: a Doctor, Social Worker, Registered Nurse, Center Manager, Home Care Coordinator, Physical Therapist, Recreational Therapist, Occupational Therapist, Dietitian, Transportation Coordinator, Pharmacy Team, and Personal Care Attendants. Your Personal Care Team will review your medical, functional, and psychosocial conditions and develop a Plan of Care to give you the care that you need. Many of the services are provided and monitored by this team. From time to time, your Personal Care Team will meet to talk about your needs, decide if your needs have changed, and change your Plan of Care to meet these needs.

Service Area – the LifeCircles *Service Area* is all of Muskegon County and portions of Ottawa and Allegan counties.

Urgent Care – the care provided to a PACE participant who is out of the PACE service area and who believes their illness or injury is too severe to postpone treatment until they return to the service area, but their life or function is not in severe jeopardy.