ELDER**ONE** CONNECTION

Our newsletter to keep participants and families in the know.

ElderONE An Affiliate of Rochester Regional Health



CE Month!

INSIDE THIS ISSUE:

Letter from the Vice President	1
Medicare Open Enrollment	2
New Electronic Medical Record	2
Fall Prevention: Bathroom Safety	3
Emergency Preparedness	3
Pace Day Center Re-Opens	2
Health Outcomes Survey	2
Website	5
Influenza Vaccination	Ę
Understanding the Grievance, Service Request & Appeal Process	Ę
ElderONE Participants Rights & Responsibilities	ė
Notice of Non-Discrimination	8
Privacy Notice	8

LETTER FROM THE VICE PRESIDENT

It is with immense joy and gratitude that I sit down to pen my first newsletter article, and what better subject to write about than the heartwarming welcome I received on my new job! Embarking on this new journey has been a remarkable experience, filled with kindness, support, and a genuine sense of belonging.

One of the most striking aspects of my new job has been the unparalleled sense of teamwork. It is truly heartening to be part of a group that values collaboration and camaraderie. From one on one conversations to meetings and town halls, every interaction exudes a spirit of unity and shared purpose in caring for our participants and for each other. I want to express my heartfelt gratitude to everyone at ElderOne and Rochester Regional Health for making me feel so welcomed and appreciated.

I also want to acknowledge and thank the participants and family members I have met during visits. Your feedback is invaluable and always appreciated. I look forward to spending more time in the field and learning more for you.

Here's to a bright beginning, shared successes, and a future filled with growth and collaboration.

Warm regards.

Rob Aroesty



ROB AROEST Vice President of ElderONE and Adult Day

DAY CENTER DIRECTORY

Emerson Center

800 Emerson Street Rochester, NY 14613 **P:** (585) 922-9970

Hudson Day Center

2066 Hudson Avenue Rochester, NY 14617 **P:** (585) 922-2800

North Park Center

355 North Park Drive Rochester, NY 14609 **P:** (585) 922-9920

Silver Hill Center

1000 Technology Pkwy Newark, NY 14513 **P:** (315) 359-2220

CONTACTS

General Number (585) 922-2800

Home Health Aide Service (585) 214-1500

Toll-Free 1-855-457-4636

MEDICARE OPEN ENROLLMENT

This time of year marks open enrollment into Medicare plans. You will likely receive information asking you to pick a plan to cover your medical expenses and medications.

ElderONE is a Medicare plan and all of your medical and medication needs are already covered by ElderONE.

You do not need to take any action if you would like to remain enrolled with ElderONE. If you have any questions or concerns about your coverage in our program, please reach out to an ElderONE team member and we will be happy to assist you.



NEW ELECTRONIC MEDICAL RECORD

ElderONE will be transitioning to a new and improved **electronic medical record (EMR) system on Tuesday, November 7th**. On this date, ElderONE will begin using the **Rochester Regional Health enterprise EMR called Care Connect**. This transition will provide:

- Operational Efficiencies and Reduction of Administrative Burden
- Greater Transparency for Optimal Service Provision
- Program Growth Potential

In addition, program participants will now have **access to their ElderONE medical records via MyCare**. For more information about MyCare, please contact any ElderONE team member.

PLEASE NOTE - ElderOne appointment times available via MyCare are a placeholder for services on a given date and may not be representative of the actual time that the appointment may occur.



EMERGENCY PREPAREDNESS

As we look ahead and prepare for wintery conditions in Western New York, please know that **ElderONE follows the weather forecast very closely.** Per practice standards, in the case of dangerous weather and or driving conditions, center services may be suspended or interrupted. **ElderONE announces closures on 13WHAM News and www.13wham.com.** In addition, an **ElderONE staff member will notify participants or their representative in the case of a closure, if the participant is scheduled to attend center on that day.** Please feel free to reach out with any questions.



PACE DAY CENTERS RE-OPEN!



ElderONE's PACE Day Centers have been operating a limited number of days and at limited capacity since the start of COVID. **ElderONE is thrilled to announce that it plans for full reopening at all PACE Day Centers by the end of 2023.** We are continuing efforts to achieve center service and attendance levels closer to what was available prior to the pandemic. Ride Health, ElderONE's transportation vendor, continues to add to their fleet of drivers, and we are pleased to offer **Day Center services up to five days a week at both the Silver Hill Day Center and North Park Day Center locations.** The Hudson Day Center location is set to offer services five days a week starting Thursday, October 5th and the Emerson Day Center location is set to offer services five days a week starting Wednesday, October 18th. ElderONE's goal is to begin increasing daily center attendance at each Day Center in Monroe county starting in November.

We appreciate all of your patience and are so very excited to finally be able to offer Day Center and Clinic services each day of the week, within all of our locations for the first time since March of 2020! As a vital part of our center reopening, we are excited to announce the arrival of **13 brand new Chevy Allstar buses**, to the ElderONE fleet. These buses were funded through the American Rescue Plan Act grant, awarded to ElderONE in order to aide in the reopening of our PACE centers. We are working closely with Ride Health to improve the quality of our transportation services. With the increase in Ride Health drivers within our additional fleet of buses, we aim to greatly reduce our need for third party transportation services, thus enhance the reliability and quality of our transportation services.

HEALTH OUTCOMES SURVEY



PACE participants nationwide will receive a Health Outcomes Survey-Modified (HOS-M) via the US Mail during the months of July through September 2023. If no response is returned via mail, participants may also receive a follow up telephone call so that they may participate in the survey over the phone.

The survey asks participants questions about their individual health status. Participants are encouraged to be very candid when answering these questions as accurate results will help ElderONE to provide them with the care that they need. ElderONE supports and appreciates your survey participation as it offers important information to Medicare.

Please contact any ElderOne staff member with questions about the HOS-M survey, or if you would like assistance with the survey completetion. We would be happy to help you!

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Please visit

ElderONE

About Us Our Services 🗸 an updated Provider Network Directory is available on our website under the 'Resources' link on the top of the home page

and

Enrollment Resources Our Locations

Our Care Team

us at www.elderONE.org

Did you know that the ElderONE website contains information about our services as well as many resources for participants & families?

All the care you need all from one team.

Together, we can keep seniors hap living at home.

INFLUENZA VACCINATION

As the weather turns colder the risk of Influenza, commonly referred to as the "flu," becomes a significant concern for both ElderONE participants and staff. Influenza is a respiratory infection that can have severe complications and even cause death in the frail elderly population. Immunization is the best way to protect against Influenza infection. Here at ElderONE, we strongly recommend that all of our participants be immunized before the Influenza season begins in December.

If you have any questions about either vaccine, or if you choose not to receive the vaccine, please contact your ElderONE clinic at 922-2800 to speak with your primary nurse, nurse practitioner, physician assistant or physician. We will be happy to answer your questions and discuss the benefits of immunization with you.

UNDERSTANDING THE GRIEVANCE, SERVICE REQUEST & APPEAL PROCESS

As always, your quality of care and your satisfaction are very important to us at ElderONE. In order to provide you with the most up to date information, we would like to share with you the process of filing a grievance, service request, and appeal:

• If you have a grievance, please notify any ElderONE staff member. You can do this verbally or in writing.

• Once we receive your grievance, our staff will have 15 days to work with you to come to a resolution.

• If you have a service request, please tell any ElderONE staff member. Once the request is discussed and reviewed by your Interdisciplinary Team, you will be given an answer within three calendar days.

• In the event that you do not like the outcome of your grievance or service request you can always appeal the decision. Please note that an appeal must be made within 45 days of ElderONE's notification of a decision to deny coverage or payment for a service/or equipment.

• Standard appeals will be addressed as quickly as possible, but no later than 30 days after you have requested the appeal. If you believe that life, health, or ability to regain or maintain maximum function could be seriously jeopardized, absent the provision of the service in dispute,

let us know right away. ElderONE will consider this an expedited appeal and will answer your appeal within 72 hours of receipt of the appeal. You will be notified in writing of the outcome of the appeal review.

We would also like to share that we are tracking the quality of the care we provide in our annual Quality Improvement (QI) Plan. This year, we are working on quality of care outcomes relating to Pain Control, Care Planning, and Falls. Additionally, we are monitoring nursing facility placements, Emergency Department visits, and Hospital stays.

Look out for more information throughout the year on how ElderONE is doing in these areas. If you have any questions or would like to learn more about these projects, please do not hesitate to call ElderONE and speak to any member of the IDT team or a member of the quality team.

If you have any questions, please feel free to reach out to ElderONE by either calling **585-922-2800** or writing to ElderONE at:

ElderONE Attention: Quality Department 490 East Ridge Road Rochester, NY 14621



ELDERONE PARTICIPANT RIGHTS & RESPONSIBILITIES

You have the right to be treated with respect.

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

• To get all of your health care in a safe, clean environment and in an accessible manner.

• To be free from harm. This includes excessive medication, physical or mental abuse, neglect, physical punishment, being placed by yourself against your will, and any physical or chemical restraint that is used on you for discipline or convenience of staff and that you do not need to treat your medical symptoms.

• To be encouraged and helped to use your rights in the PACE program.

• To get help, if you need it, to use the Medicare and Medicaid complaint and appeal processes, and your civil and other legal rights.

• To be encouraged and helped in talking to 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/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
- Ethnicity
- National Origin
- Religion
- Age
- Sex
- Mental or physical disability
- Sexual Orientation

• Source of payment for your health care (For example, Medicare or Medicaid)

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

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

You have a right to information and assistance.

You have the right to get accurate, easy-to-understand information 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 the PACE program interpret the information into your preferred language in a culturally competent manner, if your first language is not English and you can't speak English well enough to understand the information being given to you.

• To get marketing materials and PACE participant rights in English and in any other frequently used language in your community. You can also get these materials in Braille, if necessary.

• To have the enrollment agreement fully explained to you in a manner understood by you.

• To get a written copy of your rights from the PACE program. The PACE program must also post these rights in a public place in the PACE center where it is easy to see them.

• To be fully informed, in writing, of the services offered by the PACE program. This includes telling you which services are provided by contractors instead of the PACE staff. You must be given this information before you join, at the time you join, and when you need to make a choice about what services to receive.

• To be provided with a copy of individuals who provide care-related services not provided directly by ElderONE upon request.

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

You have a right to a choice of providers.

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

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

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

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 and you do not need to get permission from ElderONE prior to seeking emergency services.

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 health status and how well you are doing, and to make health care decisions. This includes the right not to get treatment or take medications. If you choose not to get treatment, you must be told how this will affect your health.

• To have the PACE program help you create an advance directive, if you choose. An advance directive is a written document that says how you want medical decisions to be made in case you cannot speak for yourself. You should give it to the person who will carry out your instructions and make 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 and confidential, including health data that is collected and kept electronically, as protected under State and Federal laws.

• You have the right to look at and receive copies of your medical records and request amendments.

• You have the right to be assured that your written consent will be obtained for the release of information to persons not otherwise authorized under law to receive it.

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

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

You have a right to file a complaint, request additional services or make an appeal.

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

• To a full explanation of the complaint process.

• To be encouraged and helped to freely explain your complaints to PACE staff and outside representatives of your choice. You must not be harmed in any way for telling someone your concerns. This includes being punished, threatened, or discriminated against.

• To contact 1-800-Medicare for information and assistance, including to make a complaint related to the quality of care or the delivery of a service.

You have the right to request services from ElderONE that you believe are necessary. You have the right to a comprehensive and timely process for determining whether those services should be provided.

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

You have a right to leave the program.

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

Your Responsibilities as an ElderONE Participant

The services of ElderONE depend on the involvement of you – the participant. The ElderONE Team works closely with you to be sure that your health care needs are met to the greatest degree possible. In order to do that, participants and caregivers have the following responsibilities:

• Accept help and/or care without regard to the race, religion, age, gender, sexual orientation, disability, or national origin of the caregiver and to treat those providing you with care with respect.

• Keep appointments or notify ElderONE if an appointment cannot be kept.

- Supply accurate and complete information to caregivers.
- Actively participate in developing and updating your care plan, if you are able.
- Ask questions and request further information regarding anything you do not understand.
- Assist in developing and maintaining a safe environment for you and your caregivers.
- Inform ElderONE of all health insurance coverage and notify ElderONE promptly of any changes in that coverage.
- Cooperate with ElderONE in billing for and collecting applicable fees from Medicare and other third party payers.

• Use ElderONE designated providers, hospitals and nursing homes for services included in the benefit package.

• Notify ElderONE promptly of any change in address or any absence from the area.

• Comply with all policies of the program as noted in this Enrollment Agreement.

- Cooperate in implementation of the care plan.
- Take your medications as the ElderONE physician orders.

• If emergency services are used at any time, or while out of the service area, you must notify ElderONE within forty-eight hours or as soon as reasonably possible.

• To notify ElderONE if you are injured by someone else's actions, such as being involved in an automobile accident.

• To let ElderONE know as soon as possible, when you are not satisfied with care or services.

- To notify ElderONE if you wish to disenroll.
- Pay any required monthly fees on time.
- To wear your ElderONE nametag while at the Day Center.

For a participant determined to be incompetent in accordance with State law, these written rights and responsibilities apply to the person and representative authorized to act on behalf of the participant.





Notice of Non-Discrimination

ElderONE complies with applicable Federal civil rights laws and does not discriminate, exclude people or treat them differently on the basis of race, color, national origin, age, disability, or sex. ElderONE provides free aids and services to people with disabilities to communicate effectively with us, 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 your ElderONE Social Worker.

If you believe that ElderONE has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

ElderONE Attn: Performance Improvement Coordinator

490 E. Ridge Road Rochester, NY 14621

Phone: (585) 922-9985 Toll Free: 855-457-4636 Fax: (585) 922-2847 TTY: 800-662-1220

You can file a grievance in person, by mail, or fax. If you need help filing a grievance, ElderONE's Performance Improvement Coordinator 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:

U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

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



MAKE A REFERRAL

Do you know someone who needs the comprehensive, compassionate care that ElderONE provides? Do you know someone who could benefit from our services? You can make a referral simply by calling ElderONE or encouraging people you know to call ElderONE at **585.922.2831** or **1.855.457.4636**.

Privacy Notice

As an ElderONE Participant, you have a right to have information about your health and medical care remain confidential and private. This right, along with an explanation of circumstances where your health information may be shared (e.g. for treatment or payment purposes), is described in our Notice of Privacy Practices. You can find the notice posted in every ElderONE clinic. You may also request a printed copy of the notice by asking one of your Interdisciplinary Team Members. Should you have any specific questions about the Notice of Privacy Practices and/or your right to have your health information protected, please contact Lisa Wild, Privacy Manager for Rochester Regional Health at (585) 922-9453.