

ELDERONE CONNECTION

Our newsletter to keep participants and families in the know.

ElderONE
An Affiliate of
Rochester Regional Health

FALL 2020 EDITION

INSIDE THIS ISSUE:

Fall is the Perfect Time for Giving your Feedback	1
Letter from the Vice President	2
COVID-19 Fraud Alert	3
Understanding the Grievance, Service Request, & Appeal Process	4
Influenza Vaccinations	5
Participants Rights & Responsibilities	6
Notice of Non-Discrimination	8
Privacy Notice	8

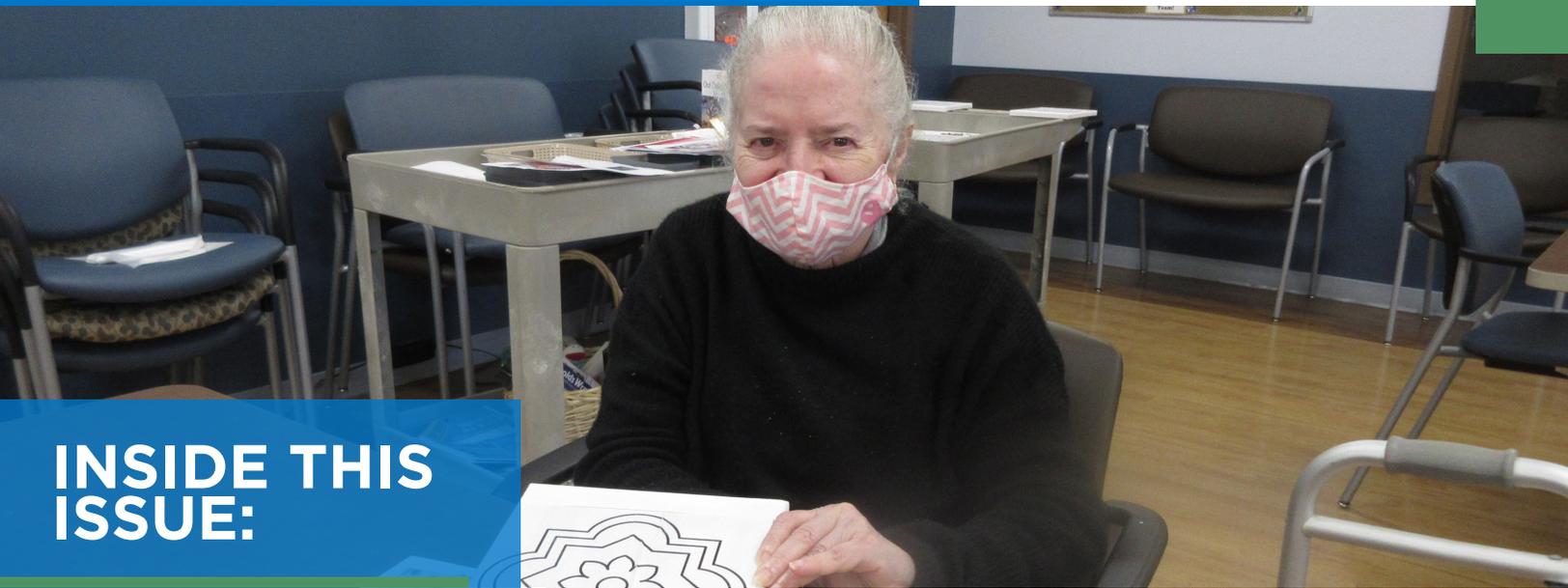
FALL IS THE PERFECT TIME FOR GIVING YOUR FEEDBACK

This fall there are 3 different surveys and ElderONE hopes to hear from you. Please take a few moments to complete each survey as we greatly appreciate input from participants and family caregivers.

- 1. Health Outcomes Survey (HOS-M) – Happening Now!**
The HOS-M survey is a Medicare survey conducted each year to assess overall health and wellness of participants in the ElderONE program.
- 2. National PACE Association COVID-19-Related Survey – October 2020**
The National PACE Association COVID-19 related survey is to gain an understanding of participant satisfaction with ElderONE through the changes that occurred as a result of COVID-19.
- 3. Annual ElderONE Satisfaction Survey – November 2020**
This survey is conducted each year and helps drive improvement in all program services. ElderONE utilizes feedback from both participants and family caregivers to understand areas of opportunity and to promote overall program satisfaction.

Your feedback is very valuable and we truly appreciate your time.

For the latest updates and information, visit us online at www.ElderONE.org



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

LETTER FROM THE VICE PRESIDENT

Dear Readers,

I hope you are all doing well and have found some enjoyment during the summer season.

I would like to take this opportunity to introduce myself to you as ElderONE's Interim Vice President. Many of you may know me from my former role as The Director of Home Care and Clinical Services. I have the privilege of stepping into this new role to oversee the operations of the ElderONE organization. I look forward to working with our leaders and staff to continue to provide ElderONE participants with excellent care.

2020 has been a challenging year for all of us. ElderONE works to assure that our participants are always well cared for. During this fall season, ElderONE will be sending out three separate surveys, which are described below. Your feedback is important for ElderONE to gauge your overall satisfaction with the services you receive.

ElderONE is partnering with the National PACE Association (NPA) who is conducting a survey across all PACE organizations to gain a pulse on how well satisfaction was met during the COVID-19 outbreak. Your participation is important so that we can continue to provide excellent care and best understand how ElderONE satisfied the needs of our participants throughout this pandemic.

The annual HOS-M survey was sent to ElderONE participants in late August. Your feedback allows ElderONE to assess the health and wellness of our participants. Many of you have already received letters explaining the survey. If you have any questions on this survey, ElderONE team members are available to assist you.

The annual ElderONE Satisfaction Survey, which allows participants and family caregivers to provide valuable feedback to our program, will be sent in November. Feedback from this survey gives us the opportunity to continue to promote and improve overall program satisfaction.

As we look to the months ahead, ElderONE will resume our annual focus on protecting our participants and staff from the flu virus, which includes administration of the flu vaccine and continued adherence to safe infection prevention practices. Starting this month, ElderONE participants will receive the flu vaccine prior to the arrival of the 2020 flu season. Our flu campaign for ElderONE staff is underway.

I want to thank you for your patience as ElderONE carefully re-opens our centers and expands our services. ElderONE continues to follow all State and Federal guidelines to keep us all safe. ElderONE strives to keep our participants well informed about the program; please visit our website at www.elderone.org where we will share up-to-date information.

Thank you for trusting ElderONE with your care.

- Amy

COVID-19 FRAUD ALERT

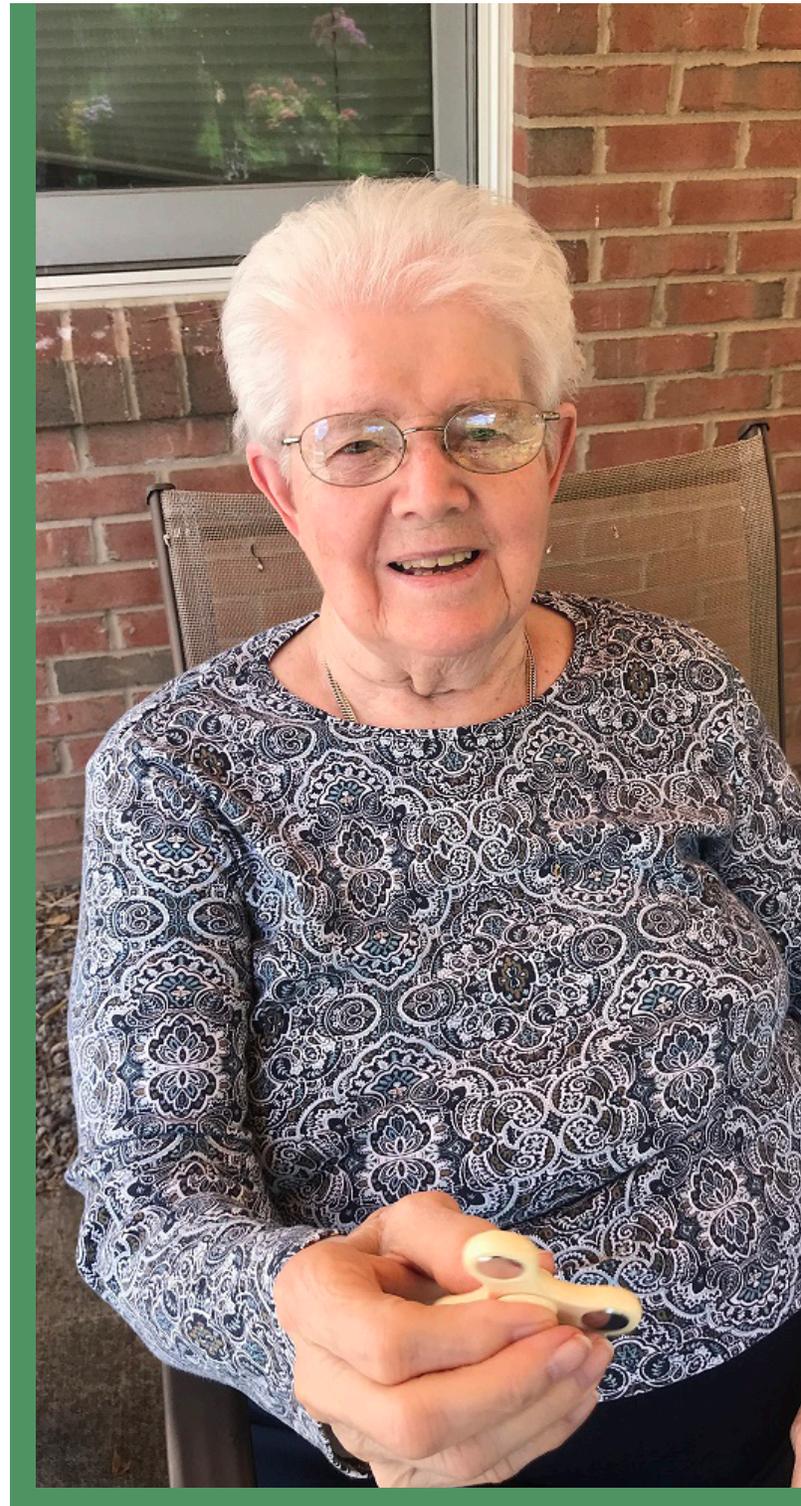
The U.S. Department of Health and Human Services Office of Inspector General is alerting the public about fraud schemes related to the novel coronavirus (COVID-19). Scammers are offering COVID-19 tests to Medicare beneficiaries in exchange for personal details however, these services are unapproved and illegitimate. Fraudsters are targeting beneficiaries in a number of ways, including telemarketing calls, text messages, social media platforms, and door-to-door visits. These scammers use the coronavirus pandemic to benefit themselves, and beneficiaries face potential harm. The personal information collected can be used to fraudulently bill Federal health care programs and commit medical identity theft.

PROTECT YOURSELF

- Be cautious of unsolicited requests for your Medicare or Medicaid numbers. Medicare will not call you to offer COVID-19 related products, services or benefit review.
- Be suspicious of any unexpected calls or visitors offering COVID-19 tests or supplies. If your personal information is compromised, it may be used in other fraud schemes.
- Do not respond to, or open hyperlinks, in text messages about COVID-19 from unknown individuals.
- Ignore offers or advertisements for COVID-19 testing or treatments on social media sites.
- A physician or other trusted healthcare provider should assess your condition and approve any requests for COVID-19 testing.
- Do not give your personal or financial information to anyone claiming to offer HHS grants related to COVID-19.
- Be aware of scammers pretending to be COVID-19 contact tracers. Legitimate contact tracers will never ask for your Medicare number, financial information, or attempt to set up a COVID-19 test for you and collect payment information for the test.

- If you suspect COVID-19 health care fraud, report it immediately online via <https://oig.hhs.gov/fraud/report-fraud/> or call 800-HHS-TIPS (800-447-8477).

Reference: <https://oig.hhs.gov/coronavirus/fraud-alert-covid19.asp>



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:

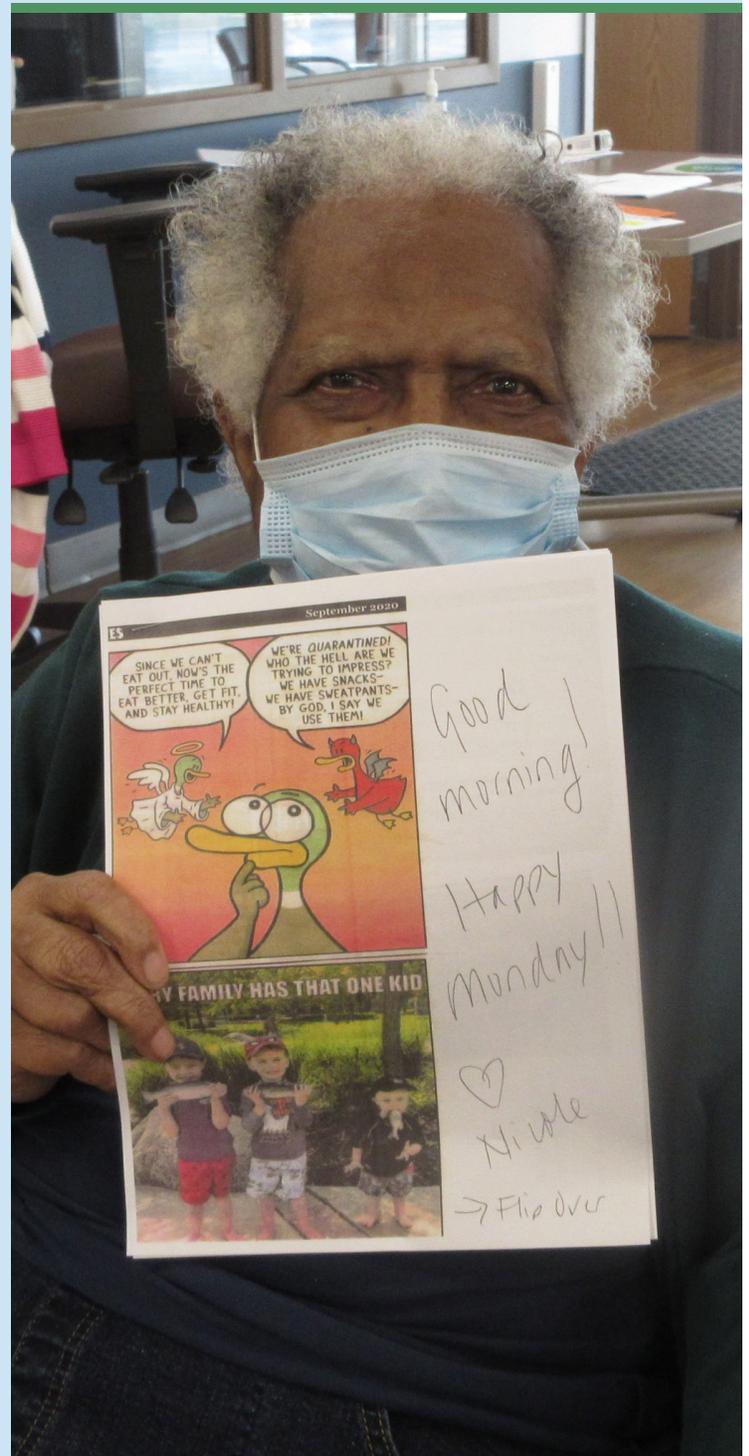
If you have any questions, please feel free to reach out to ElderONE by either calling 585-922-2800 or writing to ElderONE at:

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

- 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 3 days/72 hours.
- 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 have developed a Quality Improvement (QI) plan and are currently tracking and monitoring a total of 11 areas. Some of those areas include, care planning, recreation visits, monthly weights, pain control, falls, and communication, just to name a few.

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 your IDT team or a member of the quality team.



INFLUENZA VACCINATIONS

As fall approaches and the days get shorter, ElderONE resumes our annual focus on protecting our participants from Influenza, also known as “the flu.” As most of you know, Influenza is a common respiratory infection that can infect young and old alike, but older adults have a greater risk of complications, hospitalization, and even death. Influenza is a more serious infection than the common cold.

Immunization continues to be the best way to protect ourselves from getting Influenza. This year, ElderONE again strongly recommends all participants be immunized before the Influenza season begins.

For the 2020-21 season, the ElderONE Medical staff have unanimously recommended that the high-dose influenza vaccine be provided to all participants. The high-dose influenza vaccine has been proven more effective for older and chronically-ill adults, by generating higher immunity against the viruses expected to arrive in our community this fall. The high-dose vaccine can, in some cases, be associated with more side effects such as muscle aches or fatigue. However, as with previous vaccines, these symptoms commonly resolve in a few days.

National prevention recommendations for all adults include an annual Influenza vaccination (flu shot). The high-dose vaccine is increasingly recommended for older adults. Considering the serious risk of influenza for ElderONE participants, the Medical staff feels this is the best option for all participants, even those under 65.

In order to include all ElderONE participants, nursing will begin administering Influenza vaccine in October, unless there is a medical contraindication or a written request from participant or family to not be vaccinated. We aim to complete all vaccines before Thanksgiving. As in the past, a separate effort will take place to vaccinate all direct care staff.

If you have any questions about this program, the vaccine schedule, or the high-dose vaccine, please contact your ElderONE team at 922-2800 to speak with a nurse. We will be happy to answer your questions and discuss the benefits of immunization with you.

*Stephen D. Ryan MD, MPH
Medical Director, ElderONE*

COLD VS. FLU VS. COVID-19

SYMPTOMS	 Fever	 Headache	 General Aches and Pains	 Fatigue, Weakness	 Extreme Exhaustion	 Stuffy Nose	 Sneezing	 Sore Throat	 Cough	 Shortness of Breath
COLD	Rare	Rare	Slight	Mild	Never	Common	Usual	Common	Mild to moderate	Rare
FLU	High (100-102 F) can last 3-4 days	Intense	Usual (often severe)	Intense Can last up to 2-3 weeks	Usual (starts early)	Sometimes	Sometimes	Common	Common can become severe	Rare
CORONAVIRUS (COVID-19)	Common	Can be present	Can be present	Can be present	Can be present	Has been reported	Has been reported	Has been reported	Common	Common

PARTICIPANTS RIGHTS & RESPONSIBILITIES

ANNUAL NOTICE

As a participant in ElderONE you have the following rights:

- To be fully informed of rights and responsibilities as a participant and of all rules and regulations governing participation in ElderONE. Evidence of your receipt of this information is in the form of your signed enrollment agreement acknowledgement, a copy of which is incorporated into your medical record.
- To be treated with dignity and respect, and be afforded privacy, confidentiality and humane care.



- The right to considerate, respectful care from all ElderONE employees and contractors at all times and under all circumstances.
- The right not to be discriminated against in the delivery of required PACE services, by ElderONE, based on race, ethnicity, national origin, religion, sex, age, sexual orientation, mental or physical disability, or source of payment.
- To receive comprehensive health care in a safe and clean environment, and in an accessible manner. To not be required to perform services for ElderONE.
- To have reasonable access to telephones.
- To be free from harm, including physical or mental abuse, neglect, corporal punishment, involuntary seclusion, excessive medication, and any physical or chemical restraint imposed for purposes of discipline or convenience and not required to treat your medical symptoms. To be free from hazardous procedures.
- To be encouraged and assisted, throughout your participation in ElderONE, to exercise your rights as a participant, as well as your civil and legal rights. To be encouraged and assisted to voice complaints to ElderONE staff and outside representatives of your choice. There will be no restraint, interference, coercion, discrimination or reprisal by ElderONE or its staff, nor will the filing of a grievance disrupt your care plan.
- To be encouraged and assisted to recommend changes in policies and procedures to ElderONE staff. This may include accessing the Medicaid and Medicare appeal processes.
- To be fully informed in writing of the services available from the plan, including identification of all services that are delivered through contracts, rather than furnished directly by the PACE organization at the following times:
 1. Before enrollment
 2. At enrollment
 3. At the time your needs necessitate the disclosure and delivery of such information in order to allow you to make an informed choice.
- Any changes to the payment structure may be made after you receive 30 days written notice.
- To be able to examine the results of the most recent review of ElderONE conducted by New York State and Federal government and any plan of correction in effect.
- To choose your primary care physician and specialists from within the ElderONE network.
- To request that a qualified specialist for women's health services furnish routine or preventive women's health services.

- To disenroll from the program at any time.
- To access emergency services without prior approval when the need arises.
- Emergency Medical Condition means a condition or situation manifesting itself by acute symptoms 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 immediate medical attention may result in:
 - 1) serious jeopardy to the health of the participant;
 - 2) serious impairment to bodily functions; and/or
 - 3) serious dysfunction of any bodily organ or part.
- To participate in the development and implementation of your plan of care.
- To expect that ElderONE develop a written care plan for patient care and to participate in all decisions effecting your plan of care/treatment and to be advised in advance of any change in the plan of care. If you are unable to participate fully in treatment decisions you have the right to designate a representative. You have the right to appeal any decision affecting your plan of care if you cannot come to agreement with the interdisciplinary team.
- To have all treatment options explained in a culturally competent manner and to make health care decisions, including the right to refuse treatment, and be informed of the consequences of the decisions.
- To have the Enrollment Agreement, Enrollment Agreement Acknowledgement, all treatment and treatment options fully discussed and explained to you in a manner you understand.
- To receive information on Advanced Directives as dictated by the Patient Self Determination Act of 1990, and to receive assistance in the completion of a Health Care Proxy form to convey such directive.
- To be fully informed by the Interdisciplinary Team of your health and functional status. Be informed of all treatments prescribed prior to implementation, when and how services will be provided and the names and functions of any person and/or affiliated agency providing care, coordination or supervision of services.
- To request information about your diagnosis, prognosis, and treatment, including alternatives of care and risks involved in terms that you and your family can readily understand so that you can give your informed consent.
- To request reassessment by the team.
- To be given reasonable advance notice in writing of any transfer to another part of ElderONE's program for medical reasons, or for your welfare, or that of other participants. Such actions will be documented in your health record.
- To be assured of confidential treatment of all information contained in your health record, including information



- contained in any automated data bank. You have the right to communicate with health care providers in confidence and to have the confidentiality of your identifiable health care information protected. We require your written consent for the release of information to persons not otherwise authorized under law to receive it. Persons representing news or other media shall not be given any information that identifies or leads to the identification of you, including photographs, unless you have given written consent. You may review and copy your own medical records and request amendments to those records. You may provide written consent which limits the degree of information, the persons to whom information may be given, and the time the consent is in effect.
- To be fully informed of the appeal process, and receive from ElderONE staff, any assistance needed, to file an appeal, as outlined in the ElderONE appeal process. To appeal any treatment decision made by ElderONE, its employees, or contractors through the process described in Section 11 in the Enrollment Agreement.
- To receive treatment and rehabilitative services designed to promote your functional ability to the optimal level and to encourage your independence. These services must be agreed to by the interdisciplinary team.
- To have your reports of pain believed and to be provided with information about pain and pain relief measures. You can expect health professionals to respond quickly to your reports of pain and to receive effective pain management.
- Upon request to the Manager, Quality Management, to view your clinical record in the ElderONE office. You may receive a copy of your clinical record, upon written request. All patient requests for viewing/receiving clinical records will be made known to the physicians. There may be a cost associated with copying clinical records.
- To contact the New York State Nursing Home Hotline at 1-800-206-8125 and identify the concern as a Managed Long Term Care concern.

ElderONE

An Affiliate of
Rochester Regional Health
490 East Ridge Rd.
Rochester, NY 14621

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.

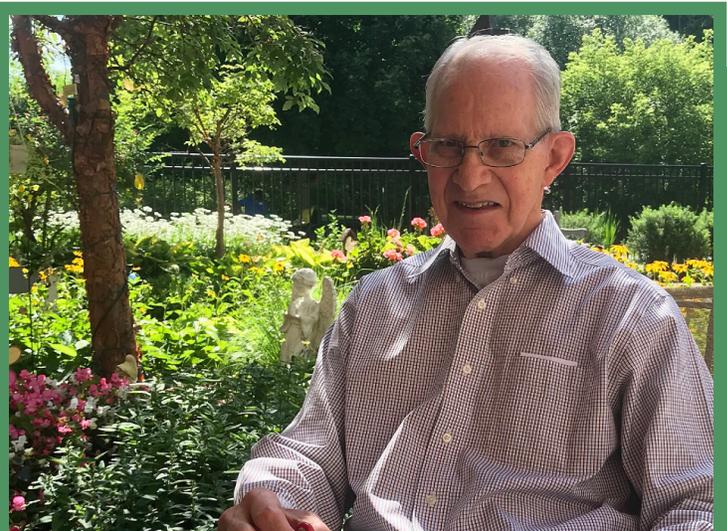
You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

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.