

CHAPTER 10

TERMINATION OF BENEFITS

After signing your Enrollment Agreement, your benefits under AltaMed PACE continue indefinitely unless you choose on your own to give up your enrollment in the program (voluntary), or you are disenrolled because you no longer meet the conditions of enrollment (involuntary).

AltaMed PACE will work to transition you back into traditional Medi-Cal and/or Medicare programs and services for which you are eligible as quickly as possible. Medical records will be forwarded to your new providers within 30 days, and referrals to other resources in the community will be made to assure continuity of care.

You are required to continue to use AltaMed PACE's services and to pay the monthly fee, if applicable, until your disenrollment becomes effective. AltaMed PACE will continue to provide all necessary services until disenrollment is effective. If you should require care before your reinstatement occurs, AltaMed PACE will pay for the service that you are entitled by Medicare or Medi-Cal.

AltaMed PACE will provide you with information on the impact and consequences, including but not limited to, explaining that you may not receive all the same services and benefits in other optional Medicare or Medicaid programs following disenrollment from PACE.

Voluntary Disenrollment

If you wish to cancel your benefits by disenrolling, you should discuss this with your social worker. You may disenroll from AltaMed PACE at any time and for any reason. You will be asked to sign a "Disenrollment Form". This form will indicate that you will no longer be entitled to services through AltaMed PACE after midnight on the last day of the month. The effective date of your disenrollment will be the first day of the month following the date we receive your disenrollment notification. Please note that you may not enroll or disenroll from

AltaMed PACE at a Social Security office.

Involuntary Disenrollment

AltaMed PACE can stop your benefits by giving you thirty (30) days notice in writing for any of the following reasons:

- You move out of the AltaMed PACE service area or are out of the service area for more than 30 consecutive days unless AltaMed PACE agrees to a longer absence due to extenuating circumstances (see CHAPTER 6).
- You or your caregiver engage in disruptive or threatening behavior, which jeopardizes your health or safety or the safety of others. This would include if you have decision-making capacity and you consistently refuse to comply with the terms of your Plan of Care or Enrollment Agreement, when you have decision-making capacity. Disenrollment under these circumstances is subject to prior approval by the California Department of Health Care Services and will be sought in the event that you or your caregiver display disruptive interference with care planning or threatening behavior that interferes with the quality of PACE services provided to you and other PACE Participants.
- It is determined that you no longer meet the Medi-Cal requirements for nursing facility level of care and are not deemed eligible.
- You fail to pay or fail to make satisfactory arrangements to pay any premium due to AltaMed PACE, any applicable Medi-Cal spend down liability, or any amount due under the post-eligibility treatment of income process, within the 30-day grace period.
- The agreement between AltaMed PACE, the Centers for Medicare and Medicaid Services and the DHCS is not renewed or is terminated.
- AltaMed PACE is unable to offer health care services due to the



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loss of our state licenses or contracts with outside providers.

Involuntary disenrollments are effective on the first day of the next month that begins 30 days after the day we send you notice of your disenrollment.

All rights to benefits will stop at midnight on the last day of the month following a voluntary or involuntary disenrollment. We will coordinate the disenrollment date between Medicare and Medi-Cal if you are eligible for both programs. You are required to use AltaMed PACE services (except for Emergency Services and Urgent Care provided outside our service area) and to pay the monthly fee, if applicable, until disenrollment becomes effective. AltaMed PACE will continue to provide all necessary services until the disenrollment is effective, including making appropriate referrals and ensure medical records are made available to new providers within thirty (30) days. AltaMed PACE will work with CMS and the State administering agency to reinstate you in other Medicare and Medicaid programs for which you are eligible. **22**

If you are hospitalized or undergoing a course of treatment at the time your disenrollment becomes effective, AltaMed PACE has the responsibility for service provision until you are reinstated with Medicare and Medi-Cal benefits (according to your entitlement and eligibility).