

PACE of West Baltimore
Voluntary Disenrollment Policy

I. PURPOSE

To establish the policies and processes for a Participant's voluntary disenrollment from the PACE of West Baltimore.

II. POLICY

- A. A Participant may voluntarily disenroll from PACE of West Baltimore without cause at any time.
- B. A participant's voluntary disenrollment is effective on the first day of the month following the date the PACE organization receives the participant's notice of voluntary disenrollment.
- C. PACE of West Baltimore ensures that employees or contractors will not engage in any practice that would reasonably be expected to have the effect of steering or encouraging disenrollment of participants due to a change in health status.
- D. PACE of West Baltimore will process a voluntary disenrollment utilizing the most expedient process allowed under Medicare and Medicaid procedures and will ensure that the PACE disenrollment date is the same for Medicare and Medicaid.
- E. PACE of West Baltimore will facilitate the reinstatement in other Medicare and Medicaid programs after disenrollment. The program will:
 - (a) Make appropriate referrals and ensure medical records are made available to new providers within 30 days.
 - (b) Work with CMS and the State Administering Agency to reinstate the participant in other Medicare and Medicaid programs for which the participant is eligible.
- F. Until the voluntary disenrollment is effective, the Participant must continue to use PACE of West Baltimore services and pay premiums, if applicable.
- G. PACE of West Baltimore will continue to furnish all necessary services until the effective voluntary disenrollment date.
- H. PACE of West Baltimore will notify Participants upon enrollment of their rights to voluntarily disenroll at any time. The notice will provide the steps required to request voluntary disenrollment and the time necessary to process voluntary disenrollment requests.
- I. PACE of West Baltimore will keep a daily log of all verbal and written voluntary disenrollment requests and the dispositions, and make the supportive

documentation available for review by the Centers for Medicare & Medicaid Services (CMS) and State Administering Agency (SAA) upon request.

- J. PACE of West Baltimore will review trends and patterns for voluntary disenrollment as a component of the Quality Improvement (QI) Process.

III. PROCEDURE

- A. PACE of West Baltimore will take the following actions to affect a voluntary disenrollment of a Participant from PACE of West Baltimore.

PACE of West Baltimore will:

- 1. Upon receipt of a request for voluntary disenrollment from the Participant or authorized Representative, inform the Participant or authorized Representative in writing of disenrollment procedures.
- 2. Have the Participant fill out a Voluntary Disenrollment form;
- 3. Keep on file Disenrollment Form to document the disenrollment effective date; and
- 4. Notify the Participant that there are no appeal rights for a voluntary disenrollment.

- B. PACE of West Baltimore will be responsible for facilitating a Participant's reinstatement or transition to other Medicare or Medicaid programs for which they are eligible after voluntary disenrollment from PACE of West Baltimore.

- 1. With authorization, PACE of West Baltimore will provide appropriate referrals and medical records to new providers in a timely manner.
- 2. PACE of West Baltimore staff will work with CMS and the SAA to transition the Participant into other Medicare and Medicaid programs for which he or she is eligible. PACE of West Baltimore will make appropriate referrals and ensure medical records are made available to new providers within 30 days

- C. The SAA will disenroll the Participant in the Medical Management Information Systems

(MMIS) system on the first day of the month

- 1. Enrollment will cease at 11:59 p.m. on the last day of the month prior to the effective date of disenrollment as approved by the SAA. From that time forward, PACE of West Baltimore program will be relieved of all obligations to provide or arrange for covered services to the Participant under the terms of the provider agreement.

- D. The PACE of West Baltimore Quality Improvement Coordinator will retrospectively review all voluntary disenrollments to analyze any trends or areas of improvement.

- E. PACE of West Baltimore Reinstatement
 - 1. Any Participant who was previously disenrolled from the PACE of West Baltimore may re-apply to the program and may re-enroll upon meeting the eligibility criteria. There is no limit on the number of times a Participant may re-enroll following disenrollment.
 - 2. A Participant who was disenrolled following non-payment of premiums may be reinstated without a break in service coverage if the premium is paid prior to the effective date of disenrollment.
 - 3. A Participant who wishes to re-enroll following a disenrollment must complete the intake and enrollment process in its entirety and be formally assessed by the Interdisciplinary Team (IDT) prior to re-enrollment. The Level of Care determination will be subject to the state's determination.
 - 4. With authorization, PACE of West Baltimore will provide appropriate referrals and medical records to new providers in a timely manner.
 - 5. PACE of West Baltimore staff will work with CMS and the SAA to transition the Participant into other Medicare and Medicaid programs for which he or she is eligible. PACE of West Baltimore will make appropriate referrals and ensure medical records are made available to new providers within 30 days
- F. The SAA will disenroll the Participant in the Medical Management Information Systems (MMIS) system on the first day of the month
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