



Policy: PACE Voluntary Disenrollment		Policy No. ENR 02
Section: Enrollment and Disenrollment		
Date Adopted: September 30, 2022	Date Revised:	
<input checked="" type="checkbox"/> Horizon PACE	<input type="checkbox"/> Horizon Adult Health Care	

POLICY:

A Horizon-PACE participant may voluntarily disenroll from the program without cause at any time. The participant’s disenrollment will take effect on the 1st day of the month following the participant’s notice of voluntary disenrollment. A previously disenrolled participant may be re-enrolled in Horizon-PACE.

PROCEDURE:

1. The participant must notify a member of the Horizon-PACE Interdisciplinary Team that he/she wishes to disenroll from the Horizon-PACE.
2. The Social Worker will meet with the participant and or designated representative to discuss the reason for disenrollment and to explain the disenrollment procedure(s).
3. If the reason for disenrollment is dissatisfaction with Horizon-PACE or services, the participant and or designated representative, will be asked to complete a Grievance Form. All PACE staff both contracted and employed will follow the grievance process as outlined in the policy.
4. Attempts to address the reason for dissatisfaction will be made prior to disenrollment.
5. The Grievance Form will be forwarded to the Quality Improvement Coordinator. The Quality Improvement Coordinator will review the disenrollment reasons to assess for trends. If a trend is determined, action will be taken as part of the quality improvement process.
6. The Disenrollment documentation will be completed within 24 hours by a staff member and the participant will be asked to sign it; however, the participant has the right to refuse to do so.
7. In a case where the participant refuses to sign or is unavailable to sign the disenrollment paperwork, they will be notified in writing, by certified letter, the date at which disenrollment will be effective, which will be the 1st of the month following the request to disenroll.
8. The Social Worker will assist the participant in completing forms, provide options counseling and referrals, facilitate enrollment into other programs or services, and aide in the reenrollment in traditional or managed care Medicare and/or Medicaid, while ensuring a discharge date of the 1st of the month following the request to voluntarily disenroll.



9. Participant's reinstatement in the fee-for-service system must begin on the first day of the month following the request to voluntarily disenroll.
10. Until enrollment is terminated, Horizon-PACE participants are required to continue to use Horizon-PACE provider services and will remain liable for any premiums. Horizon-PACE shall continue to provide all approved services until the date of disenrollment. Horizon-PACE will not be liable for non-approved services with the exception of emergency services.
11. The disenrollment will be coordinated among Horizon-PACE, the State Administering Agency (SAA), and CMS so that there is no lapse in the participant's Medicare and/or Medicaid coverage or needed services.
12. Medical records will be made available to new providers upon completion of a Release of Information signed form by the participant or designated representative.
13. The clinic will provide the client a 30-day supply of medications.
14. Discharge summaries will be written in the medical record within five (5) days of discharge by all disciplines.
15. CMS will be notified of the disenrollment through the Health Plan Management System (HPMS).
16. The original signed Disenrollment Form will be filed in the participant's medical record.
17. In the event that a participant wishes to be reinstated into Horizon-PACE, the Enrollment Specialist will be notified, and the Horizon-PACE Enrollment Process and Criteria Policy will be followed.