LIFE Pittsburgh
Living Independence for the Elderly

Administrative Offices
875 Greentree Road
One Parkway Center, Suite 200
Pittsburgh, PA 15220-3508

Enrollment Agreement

Greentree Daily Living Center
875 Greentree Road
One Parkway Center, Suite 100
Pittsburgh, PA 15220-3508

Allegheny Center Daily Living Center
3 Allegheny Center
Pittsburgh, PA 15212-5329

North Shore Daily Living Center
1200 Reedsdale Street Suite 4 Rear
Pittsburgh, PA 15233-2108

McKees Rocks Daily Living Center
130 Chartiers Ave
McKees Rocks, PA 15136

412-388-8040

A Partnership of Lutheran SeniorLife and Pittsburgh Mercy Health System

Known Nationally as the Program of All-inclusive Care for the Elderly (PACE)
## Enrollment Agreement

### Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome to LIFE Pittsburgh</td>
<td>1</td>
</tr>
<tr>
<td>Special Features of LIFE Pittsburgh</td>
<td>2</td>
</tr>
<tr>
<td>Advantages of Enrolling in LIFE Pittsburgh</td>
<td>2</td>
</tr>
<tr>
<td>Benefit Services/Coverage</td>
<td>3</td>
</tr>
<tr>
<td>Exclusions and Limitations</td>
<td>6</td>
</tr>
<tr>
<td>Emergency Services &amp; Urgently Needed Care</td>
<td>6</td>
</tr>
<tr>
<td>Services Received Outside the LIFE Pittsburgh Service Area</td>
<td>7</td>
</tr>
<tr>
<td>Eligibility/Enrollment</td>
<td>7</td>
</tr>
<tr>
<td>Medicare Eligibility Notification</td>
<td>9</td>
</tr>
<tr>
<td>Termination of Benefits</td>
<td>10</td>
</tr>
<tr>
<td>Participant Grievance/Appeal Procedure</td>
<td>11</td>
</tr>
<tr>
<td>Your Rights as a Participant</td>
<td>13</td>
</tr>
<tr>
<td>Participant and Caregiver Responsibilities</td>
<td>15</td>
</tr>
<tr>
<td>General Provisions</td>
<td>16</td>
</tr>
<tr>
<td>Definitions</td>
<td>16</td>
</tr>
<tr>
<td>Financial Eligibility</td>
<td>18</td>
</tr>
<tr>
<td>Nursing Facility Placement</td>
<td>20</td>
</tr>
<tr>
<td>LIFE Pittsburgh Enrollment Agreement - Signature Page</td>
<td>21</td>
</tr>
<tr>
<td>LIFE Pittsburgh Monthly Premium and Payment Agreement</td>
<td>23</td>
</tr>
<tr>
<td>Provider Network</td>
<td>25</td>
</tr>
<tr>
<td>Inpatient Facilities</td>
<td>28</td>
</tr>
<tr>
<td>Non-Discrimination Addendum</td>
<td></td>
</tr>
<tr>
<td>Important Phone Numbers and Emergency Care</td>
<td></td>
</tr>
<tr>
<td>Back Cover</td>
<td></td>
</tr>
</tbody>
</table>
Welcome to LIFE Pittsburgh

We welcome you as a potential participant in the plan and urge you to review this agreement carefully. Feel free to ask questions about any of the sections. We'll be happy to answer them for you. Please keep this booklet. If you decide to enroll, it becomes your Enrollment Agreement, a contract between you and LIFE Pittsburgh.

The LIFE Pittsburgh program offers health and social services for older adults. To be eligible to enroll in our program you must:

1. be at least 55 years old;

2. live in one of the following zip codes;

   15006, 15007, 15015, 15017, 15031, 15044, 15046, 15056, 15064, 15071, 15082, 15086, 15090, 15091, 15101, 15106, 15108, 15116, 15126, 15127, 15136, 15142, 15143, 15201, 15202, 15203, 15204, 15205, 15209, 15210, 15211, 15212, 15213, 15214, 15216, 15219, 15220, 15222, 15223, 15224, 15225, 15226, 15228, 15229, 15233, 15237, 15241, 15243

3. meet eligibility criteria for nursing facility level of care;

4. be able to live safely in the community with services from LIFE Pittsburgh.

NOTE: To enroll in LIFE Pittsburgh, individuals must be certified by the Department of Human Services (DHS) as Medical Assistance eligible, or be able to private pay.

We at LIFE Pittsburgh are committed to helping you remain as independent as possible. We offer a program of health and health-related services, all designed to keep you living in the familiar surroundings of your own community, preferably in your own home, as long as is desired and feasible.

IMPORTANT NOTICE: The benefits under this program are made possible through an agreement that LIFE Pittsburgh has with the Pennsylvania Department of Human Services (through the Office of Long-Term Living) and the federal government. If you decide to enroll in the program, you agree to accept benefits from LIFE Pittsburgh in place of the usual Medical Assistance and Medicare benefits. You will no longer receive services through your current health care provider. These are UPMC For You, Gateway Health Plan, United Healthcare Of Pennsylvania Community Plan and CoventryCares from Health America. LIFE Pittsburgh will provide the same plus many more benefits.

Please examine this agreement carefully. Enrollment is voluntary. If you are not interested in enrolling in our program, you may return the agreement to us without signing. If you do enroll with us, you will still be able to terminate the agreement at any time if you change your mind. In order to terminate the agreement, you must notify LIFE Pittsburgh.
Special Features of LIFE Pittsburgh

LIFE Pittsburgh arranges a full array of health and social services 24 hours a day, 7 days a week, 365 days a year. A health team of geriatric doctors, nurses, social workers, rehabilitation specialists and other health care professionals assesses your needs and desires, plans and approves services with you and your family or caregiver, monitors for changes, and provides timely interventions. Primary care and community services are provided through the adult day living center and through our in-home program according to your needs.

Authorization of Care - You will get to know each of your health team's members very well, as they will work closely with you to be as healthy and independent as you can be. The health team will talk with you and make arrangements for the services that will provide the care you need. Before you can receive services or stop receiving services through the LIFE Pittsburgh program, your health team must approve it. They will reassess your needs on a regular basis, at least every six months, but more frequently if necessary. All care planning includes you, and if you wish, family members and caregivers.

Location of Service Delivery - You will receive most of your health care services at our health center, where your health team will be. Our drivers will provide transportation to the center, which will be arranged for you as needed. When necessary, services may also be provided in your own home, in a hospital or in a nursing facility. Your LIFE Pittsburgh physician will be a participating member of the health team and will manage your specialty and hospital care. We have agreements with physician specialists (such as cardiologists, urologists, and orthopedists), laboratory and diagnostic testing services (X-rays, etc.), and with hospitals and nursing facilities. Services may be provided at their respective locations. Our drivers may also provide transportation to the hospital and other appointments the health team arranges for you.

Care Providers - Once you have enrolled in the LIFE Pittsburgh program, you must agree to receive services through LIFE Pittsburgh. We seek to provide efficient and effective delivery of services for you, and in order to do so we will provide and/or arrange for your health care needs. Therefore, you will no longer be able to seek services from other providers under the Medicare or Medical Assistance Program. You must receive all needed health care, including primary care and specialist physician services (other than emergency services) from the LIFE Pittsburgh program. You may be fully and personally liable for the cost of unauthorized services. The health team will coordinate all of your care.

Services Provided Exclusively Through LIFE Pittsburgh - There are many services provided through LIFE Pittsburgh that are not typically provided in most traditional health care plans. We are committed to working with you to provide you with the most effective way to keep you healthy and independent.

Advantages of Enrolling in LIFE Pittsburgh

This program is designed and developed specifically to sustain independence among frail elderly by offering a coordinated alternative kind of service through a single organization. Our unique program and financing arrangements allow us to provide the most unique and flexible benefits of any health care plan in the area.
Other advantages of the program include:

- Our dedicated, qualified geriatric health professionals who know you personally.
- Complete long-term care coverage.
- Coordinated 24 hour advice and care.
- Support for family caregivers.
- Care designed specifically for your individual needs.
- One provider to oversee your care whether at home, in a hospital, or in a nursing facility.
- No co-insurance, deductibles or payments due for services you receive. (In some cases there may be a monthly premium required to participate in the program based on your income). A patient pay amount may be required if nursing facility services are utilized.
- Prior approval is not required to obtain emergency medical services. More detail is provided on page 6.
- Sponsored by two strong Pittsburgh area health care organizations, Lutheran SeniorLife and Pittsburgh Mercy Health System.

**Benefit Services/Coverage**

All services provided or arranged by LIFE Pittsburgh are fully covered when approved by the health team. You will receive a service package specifically designed to meet your needs. Services you may receive or have coordinated include the following:

**Health Services**

- Adult day health services.
- Transportation to and from the center and LIFE Pittsburgh coordinated services.
- Primary medical and specialist care, including consultation, routine care, preventive health care and physical examinations.
- Nursing care.
- Social services.
- Physical, occupational and speech therapies.
- Recreational Therapy.
- Nutritional counseling and education.
- Laboratory tests, x-rays and other diagnostic procedures.
- Drugs and biologicals.
- Prosthetics, orthotics, medical supplies, medical appliances and durable medical equipment (per Medicare and Medical Assistance guidelines).
- Podiatry, including routine foot care
Privacy care, including examinations, treatment, and corrective devices such as eyeglasses.
- Dental care (see the dental section for more detail).
- Psychiatry, including evaluation, consultation, diagnostic and treatment.
- Audiology, including evaluation, hearing aids, repairs and maintenance.

**Home Care**

- Skilled nursing services.
- Physician and certified registered nurse practitioner visits.
- Physical, speech, and occupational therapies.
- Social services, case management, and counseling.
- Personal care.
- Homemaker chore services.
- Home delivered meals with special diets.
- In-home respite care.
- Transportation and escort services.

**Hospital Care**

- Semi-private room and board.
- General medical and nursing services.
- Medical surgical/intensive care/coronary care unit.
- Laboratory tests, x-rays and other diagnostic procedures.
- Drugs and biologicals.
- Blood and blood derivatives.
- Surgical care, including the use of anesthesia.
- Use of oxygen.
- Physical, speech, occupational, and respiratory services.
- Medical social services and discharge planning.
- Emergency room and ambulance services.

*Not included under hospital care: private room and private duty nursing, unless medically necessary and non-medical items for your personal convenience such as telephone charges and radio or television rental.*
Inpatient Long-Term Care Facility Services

♦ Semi-private room and board (may require payment toward cost of care according to Medical Assistance regulations).
♦ Physician and nursing services.
♦ Custodial care.
♦ Personal care and assistance.
♦ Drugs and biologicals.
♦ Physical, speech, occupational and respiratory services.
♦ Social services.
♦ Medical supplies and appliances.

End of Life Services

The health team will remain involved with your care for the remainder of your life. This includes comfort care during difficult end of life situations.

Dental Care

Dental care is provided to you according to need and appropriateness, as determined by the health team. The first priority of our dental care is to treat pain and acute infections. Our second priority is to maintain oral functioning, i.e. to enable you to chew your food as well as your health and oral conditions permit. Dental services may include:

♦ Diagnostic services - examinations, radiographs.
♦ Preventive services - prophylaxis, oral hygiene instructions.
♦ Restorative dentistry - fillings, temporary or permanent crowns.
♦ Prosthetic appliances - complete or partial dentures.
♦ Oral surgery - extractions, removal/modification of soft and hard tissue.

Other Services

♦ Services for hearing and speech impairments.
♦ Translation services.
♦ Other services determined necessary by the health team to improve and maintain your overall health status.
Exclusions and Limitations

♦ Any services not authorized by the health team, unless it is an emergency service.
♦ Cosmetic surgery, unless required for improved functioning of a malformed part of the body resulting from an accidental injury or for reconstruction after mastectomy.
♦ Experimental, medical, surgical, or other health procedures not generally available in the area unless authorized by the health team.
♦ Any service rendered outside of the United States.
♦ Private room or private duty nursing while in a nursing home or hospital, unless medically necessary.

Emergency Services & Urgently Needed Care

LIFE Pittsburgh provides access to care 24 hours per day, 7 days per week and 365 days per year.

When you enroll in LIFE Pittsburgh, you will receive instructions to keep in your home.

LIFE Pittsburgh staff is on-call 24 hours a day, seven days a week. LIFE Pittsburgh's on-call coordinator will advise you what to do and will make necessary arrangements for you to receive the care you need. If you need to be taken to the hospital, the coordinator will call the ambulance company to dispatch an ambulance to your home.

Please contact LIFE Pittsburgh as soon as you start feeling bad, instead of waiting until it is a crisis situation. That enables us to meet your needs and may prevent an emergency medical condition.

An Urgent Medical Condition is a condition that without immediate medical attention could result in: Serious jeopardy to the health of the Participant; serious impairment to bodily functions; or serious dysfunction of any bodily organ or part.

If you need urgent (but not emergency) care:

(1) Monday through Friday, 8:00 am – 4:30 pm - please call the LIFE Pittsburgh center at:

    Telephone: 412-388-8040

and briefly describe the situation.

(2) During off hours or on weekends or holidays, contact LIFE Pittsburgh at:

    Telephone: 412-388-8040

An Emergency Medical Condition is defined as the onset of a sudden medical condition, or severe pain, that an average person, with no medical training, feels would place their health at serious risk, result in serious harm to bodily functions, or result in serious harm of an organ or bodily part.
If you have an emergency medical condition, please call 911.

Please answer questions and follow instructions carefully. You should request to be taken to the hospital, tell the ambulance company that you are a LIFE Pittsburgh participant, and present your LIFE Pittsburgh card to the emergency room staff.

Please notify LIFE Pittsburgh staff as soon as possible if you have used the 911 emergency services.

Services Received Outside the LIFE Pittsburgh Service Area

LIFE Pittsburgh also covers emergency and urgently needed care when you are temporarily out of the region for a period up to 30 days. THE HEALTH TEAM MUST BE ADVISED IN ADVANCE OF ALL TEMPORARY RELOCATIONS OUT OF THE AREA, AND THEY MUST NEVER EXCEED 30 DAYS.

If you have received emergency or urgent care when you are temporarily out of the area, you must notify LIFE Pittsburgh within 48 hours or as soon as is reasonably possible to do so. Information about your hospital visit or stay must be provided to LIFE Pittsburgh. If you should be hospitalized, LIFE Pittsburgh would like to transfer you to a hospital designated by us as soon as you are physically able. Remaining in the care of LIFE Pittsburgh is the best way to coordinate your health care needs. NOTE: You must return to LIFE Pittsburgh for any follow-up care as a result of the emergency or urgent care you received.

If emergency or other care is received in another area and you have paid for the medical services you received, you should request a receipt from the facility or physician involved. This receipt must show: the provider’s name, your health problem, date of treatment and release, and charges. Please send the receipt to the LIFE Pittsburgh Executive Director for approval and reimbursement. LIFE Pittsburgh is only obligated to pay for urgently needed out-of-network and post stabilization care services when: a) the services are pre-approved by LIFE Pittsburgh or b) the services are not pre-approved by LIFE Pittsburgh because LIFE Pittsburgh did not respond to a request for approval within one hour after being contacted or cannot be contacted for approval. LIFE Pittsburgh is not obligated to pay for any follow-up care. You must return to LIFE Pittsburgh to receive any follow-up care.

If you did not pay for the services, send a letter with the provider’s name, your treatment, date(s) of service, and charges to the Executive Director for review. The Executive Director will notify you within ten days whether payment will be made by LIFE Pittsburgh.

If you receive care outside of the United States, LIFE Pittsburgh will not be responsible for the charges.

Eligibility/Enrollment

If you meet eligibility requirements and want to enroll, you must sign and agree to abide by the conditions of LIFE Pittsburgh, as explained in this agreement. You will be expected to actively participate and comply with your care plan.

Your effective date of enrollment will be the first day of the calendar month following the date you sign the Enrollment Agreement.
NOTE: Individuals currently enrolled in a Medical Assistance HMO, Home and Community Based Waiver Program, or other Medical Assistance Program must be disenrolled from that program before they can enroll with LIFE Pittsburgh. You will be required to disenroll from a Medicare HMO, so we can effectively coordinate your care. Potential enrollees may not enroll in LIFE Pittsburgh at a Social Security Office.

Enrolling in LIFE Pittsburgh includes four steps: **Intake, Assessment, Determination of Medical and Financial Eligibility, and Enrollment.**

Your benefit coverage officially begins on your effective date of enrollment.

**Intake**

Intake begins when you or someone on your behalf makes a call to LIFE Pittsburgh. If it appears from this first conversation that you are potentially eligible, a program representative will visit you to explain our program and obtain further information about you. During this visit:

- You will learn how the LIFE Pittsburgh program works, the kinds of services LIFE Pittsburgh offers, and answers to any questions you may have about LIFE Pittsburgh.

- We will explain that if you enroll, you must agree that all of your healthcare services will be provided and/or coordinated by LIFE Pittsburgh, including primary care and specialist physician services (other than emergency services). Members of your health team will approve these services. LIFE Pittsburgh participants may be fully and personally liable for the costs of unauthorized services (other than emergency services).

- We will have you sign a release allowing us to obtain your past medical records so our health team can fully assess your health conditions.

You will be encouraged to visit the LIFE Pittsburgh Center to see what it is like. If you are interested in enrolling, our program representative will assist you with the enrollment process.

**Assessment**

The health team will meet with you to evaluate your needs and goals. After the assessment has been completed, the health team will meet to specifically discuss your evaluation and determine if your needs can be appropriately met by our program. If so, the health team will develop an individual plan for services and schedule time with you to explain how it will best meet your needs and preferences. However, LIFE Pittsburgh cannot guarantee or offer enrollment before a formal eligibility determination has been made.

**Determination of Medical and Financial Eligibility**

Because LIFE Pittsburgh is committed to serving only frail older adults who need long-term care and are eligible for nursing home care, an outside opinion must confirm that your situation qualifies you for our services. The Allegheny County Area Agency on Aging will determine your medical eligibility for the program after making an assessment of your needs. The Allegheny County Assistance Office will determine your financial eligibility for the program, if applicable.
IMPORTANT NOTICE

If you are eligible for Medicare or Medicaid, the services or benefits you get once you become a participant in PACE are made possible through an agreement that we have with The Centers for Medicare and Medicaid Services (CMS) of the United States Department of Health and Human Services regarding Medicare and Medicaid benefit coordination. When you become a Participant, you are agreeing to accept benefits ONLY from LIFE Pittsburgh in place of your usual Medicare and Medicaid benefits.

Participants Without Medicare Coverage at the Time of Enrollment

A participant who becomes eligible for Medicare after enrollment must obtain all Medicare coverage (Parts A and/or B, and Part D) through LIFE Pittsburgh in order to remain in the LIFE Pittsburgh program.

LIFE Pittsburgh will track your Medicare benefits to ensure that you are enrolled in the CMS Medicare systems as soon as possible. You will be notified by letter and/or a phone call and apprised of eligibility status and your options. You will be provided with a 60-day advance notice of your ability to opt out of LIFE Pittsburgh if you do not wish your Medicare services to be administered by the LIFE Pittsburgh program.

Enrollment

You, and if you wish, your family or caregiver, will meet with the program representative to review and come to an agreement about your participation in the LIFE Pittsburgh program before you sign the Enrollment Agreement. At this meeting you have an opportunity to discuss:

- The plan of care recommended for you by the health team, which incorporates plans for family and caregiver involvement.
- That when you are enrolled in LIFE Pittsburgh, all of your Medical Assistance and Medicare services must be authorized or coordinated by the health team. (Remember, approval is not required for emergency care.)
- What to do if you are unhappy with the LIFE Pittsburgh program. (See Participant Grievance Procedure.)

Final Approval and Enrollment

If you decide to join LIFE Pittsburgh, we will ask you to sign the Enrollment Agreement. Upon signing this agreement, you will receive:

- A copy of the Enrollment Agreement.
- A sticker with LIFE Pittsburgh’s emergency telephone numbers and an instruction sheet to put on or by your telephone telling you what to do in an emergency.
- An identification card or sticker that must be placed with your Medical Assistance and Medicare card, indicating that you are enrolled in LIFE Pittsburgh.
Since LIFE Pittsburgh provides comprehensive care for its participants, enrollment in LIFE Pittsburgh results in disenrollment from any other Medicare or Medical Assistance prepayment plan.

All LIFE Pittsburgh services are provided and admissions and referrals are made without regard to race, sex, color, national origin, ancestry, religious creed, sexual orientation, or handicap. Complaints of discrimination may be filed with the following state agencies:

Office for Civil Rights
US Department of Health & Human Services
150 S. Independence Mall West
Suite 372, Public Ledger Building
Philadelphia, PA 19106-9111
Main Line: 215-861-4441
Hotline: 800-368-1019

PA Human Relations Commission
301 5th Avenue
Suite 390, Platt Place
Pittsburgh, PA 15222
Voice: 412-565-5395
TTY: 412-565-5711

**Termination of Benefits**

Your benefits under LIFE Pittsburgh can be stopped if you choose to disenroll from the program voluntarily or if you no longer meet the conditions of enrollment and are involuntarily disenrolled. This program is available through an agreement LIFE Pittsburgh has with the state and federal government. If this agreement is not renewed by those agencies, this program will be terminated. The effective date of termination of benefits will be midnight of the last day of the month in which the notice was given.

You are required to continue to use LIFE Pittsburgh’s service and to pay any applicable fee until termination becomes effective.

**Voluntary Disenrollment**

If you wish to cancel your benefits by disenrolling, you should discuss this with a program representative at your center. You will need to sign a Disenrollment Form which will indicate that you will no longer be entitled to services through LIFE Pittsburgh after midnight on the last day of the month. You may not disenroll from LIFE Pittsburgh at a Social Security office. Choosing to enroll in any other Medicare or Medical Assistance prepayment plan or optional benefit, including the hospice benefit, after you enrolled in LIFE Pittsburgh, is considered a voluntary disenrollment from LIFE Pittsburgh.

Your social worker will assist you in returning to the appropriate Medicare/Medical Assistance Program. The Medicare or Medical Assistance program you enroll into upon disenrollment from LIFE Pittsburgh may not provide you with the full range of services available to you through LIFE Pittsburgh.

**Involuntary Disenrollment**

LIFE Pittsburgh can terminate your benefits, if:

- You move out of the LIFE Pittsburgh service area.
- You consistently do not comply with your individual care plan and/or terms of this agreement and are competent to make decisions for yourself.
• You engage in disruptive or threatening behavior.

• You fail to pay or fail to make satisfactory arrangements to pay any amount due LIFE Pittsburgh after a 30-day grace period.

• You are out of the service area for more than 30 days without prior approved arrangements.

• You no longer meet the eligibility requirements for the program.

• Our agreement with the federal and state government is terminated.

• LIFE Pittsburgh loses the contracts and/or licenses enabling it to offer health care services.

NOTE: In Pennsylvania, individuals who reside in personal care boarding homes are not nursing home eligible. Therefore, any individual who relocates to a personal care boarding home will be involuntarily disenrolled from the LIFE program.

Before you are involuntarily disenrolled from LIFE Pittsburgh, we will provide you with 30 days written notice. Your disenrollment will be effective the last day of the month after 30 days notice.

Your involuntary disenrollment will automatically be considered an appeal if you are involuntarily disenrolled for not complying with your care plan or meeting conditions of participation, engaging in disruptive or threatening behavior, failing to pay or make satisfactory arrangements to pay, or are out of the service area for more than 30 days without prior approved arrangements. An impartial party will review the involuntary disenrollment.

If you are disenrolled due to failure to pay the monthly fee, you can re-enroll simply by paying the monthly fee in full. Provided you make this payment before the effective date of disenrollment, there will be no break in coverage.

Participant Grievance/Appeal Procedure

All of us at LIFE Pittsburgh share the responsibility for assuring that you are satisfied with the care you receive. We ENCOURAGE you to express any complaints you have at the time and place any dissatisfaction occurs. To be consistent with federal regulations for the program, your complaints or dissatisfaction with our program or decisions are identified as either grievances or appeals. Those processes are described below.

Grievance Procedure

The definition of a grievance is a complaint, either oral or written, expressing dissatisfaction with service delivery or the quality of care furnished.

• Discuss your grievance with any staff member. Give complete information so that appropriate staff can help to resolve your concern in a timely manner.

• The staff that receives your grievance will discuss with you and provide in writing the specific steps including time-frames for response that will be taken to resolve your grievance. The grievance will be reported to the health team within 5 working days.
If a solution is found by the staff and agreed to by you and/or your family/caregiver within 5 working days of making the grievance, the grievance is resolved.

If you are not satisfied with the solution, the staff will send a written report to the Executive Director (clinical complaints will be reviewed by qualified clinical personnel) for review, to be completed within 5 working days.

Immediately after review (but within 5 working days), a copy of a written report will be sent to you and/or your family/caregiver.

If you are still dissatisfied with the results, you may submit a request in writing within 30 days to ask for a review by LIFE Pittsburgh’s Plan Advisory Committee.

The Plan Advisory Committee will send written acknowledgment of receipt of the grievance within five working days to you, investigate, find a solution and take appropriate actions.

The committee will send you a copy of a report containing a description of the grievance, the actions taken to resolve the grievance and the basis for such action. The committee has 30 working days from the day the grievance is filed with the committee to complete its report and send it to you.

If the decision is not in your favor, a copy of the report will be forwarded immediately to the federal government, the Pennsylvania Department of Human Services and the Allegheny County Area Agency on Aging.

**Appeal Procedure**

The definition of an appeal is action taken by you with respect to your disagreement with our non-coverage of or non-payment for a service, denial of enrollment, or your involuntary disenrollment from the program.

You will be notified in writing if we: will not cover or pay for a service that you are receiving or requesting; are denying enrollment into LIFE Pittsburgh; or are initiating an involuntary disenrollment from LIFE Pittsburgh. The notice will instruct you how to appeal our decision if you do not agree with it. You must request an appeal within 30 days of our notice to you. An involuntary disenrollment for non-compliance with your care plan or conditions of participation, engaging in disruptive or threatening behavior, failing to pay or make satisfactory arrangements to pay, or being out of the service area for more than 30 days without prior approved arrangements, will automatically be considered an appeal.

Confirmation of receipt of your request for appeal will be sent to you within 24 hours of receipt of your request.

We will continue to furnish disputed services until a final determination is made if you appeal within 30 days of our notice to you; if we are proposing to terminate or reduce services you are currently receiving; and if you agree that you will be liable for the costs of the disputed services if the appeal is not resolved in your favor.

An impartial party will review your appeal and you will be notified in writing of the date and time of that review to have an opportunity to present evidence related to your dispute.
• You will receive a written report of the third party review within 30 days of receipt of your appeal. That report will describe the appeal, actions taken, and outcome of the review.

• If your appeal is resolved in your favor, we will provide or pay for the disputed service right away.

• If the decision is not in your favor, a copy of the written report from the third party review will be forwarded immediately to the federal government, the Pennsylvania Department of Human Services and the Allegheny County Area Agency on Aging. You will also be notified in writing of your additional appeal rights under Medicare, or Medical Assistance through the State Fair Hearing Process. We will assist you in choosing which to pursue and forward the appeal to the appropriate entity.

• If you believe that your life, health or ability to regain function would be seriously jeopardized if you do not receive the service in question, you can request in writing that we speed up the appeal process. In that case you will receive the outcome of the appeal within 72 hours of receipt of your appeal.

Your Rights as a Participant

As a participant in LIFE Pittsburgh you have the following rights:

• To have this Enrollment Agreement, all treatments and treatment options fully discussed and explained to you in a language you understand, (which includes Braille if necessary).

• To be fully informed in writing in a language you understand, (which includes Braille if necessary) prior to and at the time of enrollment (as well as during participation) of the services available at the Center and in the program.

• To not be required to perform services for LIFE Pittsburgh.

• To be fully informed of rights and responsibilities as a participant in LIFE Pittsburgh and to exercise your rights as a participant. This may include voicing grievances and recommending changes in policies and services to center staff and outside representatives of your choice. There will be no restraint, interference, coercion, discrimination or reprisal by the Center or its staff.

• To be fully informed of the appeal process, and be provided, by LIFE Pittsburgh staff, any assistance needed to file an appeal, as outlined in LIFE Pittsburgh’s appeal process.

• To be fully informed by the health team of your health and functional status.

• To participate in the development and implementation of your service plan designed to promote your functional ability to the optimal level and to encourage your independence. The health team must agree upon these services.

• To choose your health care provider from LIFE Pittsburgh’s contracted network.

• To request a qualified specialist for women’s health.
- To access emergency services without prior approval.

- To request reassessment by the health team.

- To be given advance notice, in writing, of any transfer to another treatment setting.

- To receive information on advance directives and assistance in completing forms to carry out your wishes.

- To receive treatment and rehabilitation services.

- To be treated with dignity and respect, and be afforded privacy, confidentiality and humane care.

- To receive services in a culturally competent manner even if you have limited English language skills and a diverse cultural and ethnic background.

- To be free from harm, corporal punishment, unnecessary physical or chemical restraints, involuntary seclusion, physical or mental abuse or neglect.

- To be free from hazardous procedures.

- To have reasonable access to telephones.

- To be assured of confidential treatment of all information contained in your health record, including information contained in any automated data bank. We will require your written consent or authorization for the release of information to persons not otherwise authorized under law to receive it. You may provide written consent or authorization, which limits the degree of information and the persons to whom information may be given.

- To review your own records and to request and receive a copy of your medical records and to request that they be amended or corrected.

- To refuse treatment and be informed of the consequences of such refusal.

- To receive competent, considerate, respectful care from LIFE Pittsburgh staff and contractors without regard to race, religion, color, age, sex, source of payment, national origin, sexual orientation or disability.

- To receive comprehensive health care in a safe and clean environment, and in an accessible manner.

- To be able to examine the results of the most recent review of LIFE Pittsburgh conducted by the state and federal government.

- To end your participation in LIFE Pittsburgh at any time subject to the terms of this agreement.
Participant and Caregiver Responsibilities

Participants and caregivers have the following responsibilities:

- Accept help from LIFE Pittsburgh staff without regard to race, religion, color, age, sex, national origin or disability of the care provider.

- Keep appointments or notify LIFE Pittsburgh if an appointment cannot be kept.

- Supply accurate and complete information to LIFE Pittsburgh staff.

- Authorize LIFE Pittsburgh to obtain and use records and information from hospitals, residential health care facilities, home health agencies, physicians and other practitioners who treat you.

- Authorize LIFE Pittsburgh to disclose and exchange personal information with the federal and state government and their agents during reviews.

- Actively participate in care plan development.

- Inform LIFE Pittsburgh of all health insurance coverage and notify LIFE Pittsburgh promptly of any changes in that coverage.

- Cooperate with LIFE Pittsburgh in billing for and collecting applicable fees from third party payers.

- Notify the Allegheny County Assistance Office of the Department of Human Services and your LIFE Pittsburgh social worker within 7 days of any changes in your income and assets. Assets include bank accounts, cash in hand, certificates of deposit, stocks, life insurance policies and any other assets. The state operates a fraud control program under which local, state and federal officials may verify the information you have given.

- Ask questions and request further information regarding anything you do not understand.

- Use LIFE Pittsburgh designated providers for services included in the benefit package.

- Assist in developing and maintaining a safe environment for you, your family and your caregivers.

- Notify LIFE Pittsburgh promptly of any change in address or lengthy absence from the area. Notice should be mailed to our office at:
  875 Greentree Road
  One Parkway Center, Suite 200
  Pittsburgh, PA 15220-3508

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

- Cooperate in implementation of the care plan.

- Take prescribed medicines.

- If you get sick or injured, call LIFE Pittsburgh for direction right away at 412-388-8040.
• In case of emergency, call 911.

• If emergency services are required elsewhere or out of the service area, you must notify LIFE Pittsburgh within forty-eight hours or as soon as reasonably possible.

• Notify LIFE Pittsburgh in writing prior to disenrolling.

• Pay required monthly fees if applicable.

General Provisions

CHANGES TO AGREEMENT: Changes to this agreement may be made if they are approved by the Department of Human Services and the federal government. We will give you at least 30 days written notice of any change.

CONTINUATION OF SERVICES ON TERMINATION: If this agreement terminates for any reason, Participants will be advised of the availability of other services. You will be reinstated back into the appropriate Medicare or Medical Assistance Program, if you are eligible.

COOPERATION IN ASSESSMENTS: In order for us to determine the best services for you, your full cooperation is required in providing medical and financial information to us.

GOVERNING LAW: The laws of the Commonwealth of Pennsylvania and applicable Federal laws govern this agreement in all respects. Any provision required to be in this agreement by either of the above shall bind LIFE Pittsburgh whether or not mentioned in this agreement.

NO ASSIGNMENT: You cannot assign any benefits or payments due under this agreement to any person, corporation, or other organization. Any assignment by you will be void. (Assignment means the transfer to another person or organization of your right to the services provided under this agreement or your right to collect money from us for those services.)

NOTICE: Any notice that we give you under this agreement will be mailed to you at your address as it appears on our records. You should notify us promptly of any change of your address. When you have to give us any notice, it should be mailed directly to the LIFE Pittsburgh Center.

NOTICE OF CERTAIN EVENTS: We will give you reasonable notice of any termination or breach of contract by hospitals, physicians or any other person we contract with to provide services and benefits under this agreement, if it may materially or adversely affect you. We will arrange for the provision of any interrupted service by another provider.

Definitions

AGREEMENT means this document between you and LIFE Pittsburgh, which establishes the terms and conditions and describes the benefits available to you. This agreement remains in effect until disenrollment and/or termination take place.
BENEFITS AND COVERAGEs means the health and health-related services we provide you through this agreement. These services take the place of the benefits you would otherwise receive through Medical Assistance and/or Medicare. This is made possible through a special arrangement between LIFE Pittsburgh and the Department of Human Services' Office of Long-Term Living and the federal government. This agreement gives you the same benefits you would receive under Medical Assistance and/or Medicare plus many additional benefits. To receive any benefits under this agreement, you must meet the conditions described in this agreement.

ELIGIBILITY FOR NURSING FACILITY CARE means that your health status meets the Department of Human Services' criteria for nursing facility level of care. LIFE Pittsburgh's goal is to maintain you in the community as long as it is medically and socially feasible, even if you are eligible for nursing facility level care.

EMERGENCY MEDICAL CONDITION is a condition 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 to result in placing the health of the individual in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part.

EMERGENCY SERVICES are services provided in an inpatient or outpatient setting that are furnished by a qualified emergency services provider, other than LIFE Pittsburgh or one of its contract providers, either in or out of the service area and are needed to evaluate or stabilize an emergency medical condition.

EXCEPTION means any part of the agreement that eliminates or reduces the benefits for a specific hazard or condition.

HEALTH SERVICES means services such as medical care, diagnostic tests, medical equipment, appliances, drugs, prosthetic and orthotic devices, nutritional counseling, nursing, social services, therapies, dentistry, optometry, podiatry, and audiology. Health services may be provided in the LIFE Pittsburgh adult health center, in your home, or in professional offices of specialists, hospitals, or nursing homes under agreement with LIFE Pittsburgh.

HEALTH TEAM describes the LIFE Pittsburgh program’s professional team consisting of a primary care physician, social worker, registered nurse, physical, recreational, and occupational therapist, dietician, certified registered nurse practitioner, personal care assistant, speech therapist, chaplain and transportation staff. They will assess your medical, functional and psychosocial status, and develop a treatment plan that identifies the services needed. Many of the services are provided and monitored by this health team. The health team must authorize all services you receive. The health team will perform periodic reassessments of your needs, and changes in the service plan may occur.

HOSPITAL SERVICES means those services that are generally and customarily provided by acute general hospitals.

LIFE is an acronym for Living Independence For the Elderly. LIFE is the Pennsylvania Department of Human Services' community based managed care program for the frail elderly based on the federal Program of All-Inclusive Care for the Elderly (PACE) or based on the Commonwealth's Pre-PACE program which operates under a Prepaid Inpatient Health Plan.

LIFE Pittsburgh CONTRACTED PROVIDER is defined as a health facility, health care professional, community living support service, or agency, which has contracted with LIFE Pittsburgh to provide health and health-related services to participants.
NURSING FACILITY is defined as a health facility licensed for long-term care by the Commonwealth of Pennsylvania.

OTHER SERVICES are those services that support the provision of health services and help you maintain your independence. Such services include escort, translation, transportation, and assistance with housing problems.

OUT-OF-AREA means any area beyond LIFE Pittsburgh’s zip code Service Area.

PACE is the Program of All-inclusive Care for the Elderly, a community based model of care that began as a demonstration waiver in San Francisco, was replicated nationally through federal waivers and was authorized as a Medicare program and Medical Assistance state option in the Balanced Budget Act of 1997.

PARTICIPANT is defined as a person who meets LIFE Pittsburgh’s eligibility criteria and voluntarily signs an agreement with LIFE Pittsburgh. The words “you” or “your” refer to a participant.

PLAN ADVISORY COMMITTEE is the committee that reports to and advises your LIFE Pittsburgh program’s governing board and establishes committees on matters related to the grievance and appeal process; quality assurance; utilization review process; and ethics. The committee is required to invite and/or include participants of the program, caregivers, community groups, the Allegheny Area Agency on Aging and Ombudsman.

SERVICE AREA means the zip codes in which the LIFE Pittsburgh program provides care.
15006, 15007, 15015, 15017, 15031, 15044, 15046, 15056, 15064, 15071, 15082, 15086, 15090, 15091, 15101, 15106, 15108, 15116, 15126, 15127, 15136, 15142, 15143, 15201, 15202, 15203, 15204, 15205, 15209, 15210, 15211, 15212, 15213, 15214, 15216, 15219, 15220, 15222, 15223, 15224, 15225, 15226, 15228, 15229, 15233, 15237, 15241, 15243

SERVICE LOCATION is described as any location at which a participant obtains any health or health-related service under the terms of this agreement.

URGENT MEDICAL CONDITION means a condition 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 to result in: Serious jeopardy to the health of the participant; serious impairment to bodily functions; or serious dysfunction of any bodily organ or part. The individual believes they cannot or should not delay treatment.

Financial Eligibility

Your payment each month will depend on your eligibility for Medicare and/or Medical Assistance.

If you are eligible for:

- **MEDICARE AND MEDICAL ASSISTANCE** or **MEDICAL ASSISTANCE ONLY**
  If you are eligible for both Medicare and Medical Assistance, or Medical Assistance only, and reside in the community, you will make no monthly premium payment to LIFE Pittsburgh and you will continue to receive all LIFE Pittsburgh services, including prescription drugs. However; in some instances you may be held liable for any applicable spend down amounts (i.e. patient pay amounts) and any amounts due under the annual financial redetermination of income and assets process.
• **MEDICARE ONLY**
   
   If you have Medicare and are not eligible for Medical Assistance, then you will pay a monthly premium to LIFE Pittsburgh. Your monthly premium of $3,754.25 starts on _______________________. Because this premium does not include the cost of Medicare prescription drug coverage, you will be responsible for an additional monthly premium for Medicare prescription drug coverage in the amount of $591.00. You may pay both premiums together or you may contact your social worker for additional payment options.

• **PRIVATE PAY (Neither Medicare or Medical Assistance)**
   
   If you are not eligible for Medicare or Medical Assistance, you will pay a monthly premium to LIFE Pittsburgh in the amount of $________________. Because this premium does not include the cost of prescription drugs, you will be responsible for an additional premium for prescription drug coverage in the amount of $________________. You may pay both premiums together or you may contact your social worker for additional payment options.

**Prescription Drug Coverage Late Enrollment Penalty**

Please be aware that if you are eligible for Medicare prescription drug coverage and are enrolling in LIFE Pittsburgh after going without Medicare prescription drug coverage or coverage that was at least as good as Medicare drug coverage for 63 or more consecutive days, you may have to pay a higher monthly amount for Medicare prescription drug coverage. You can contact your LIFE Pittsburgh social worker for more information about whether this applies to you.

**Instructions for Making Payments to LIFE Pittsburgh**

If you have to pay a monthly charge to LIFE Pittsburgh, you must pay the money by the first day of the month after you sign the Enrollment Agreement. The monthly charge then has to be paid on the first day of every month.

Payment can be made by check or money order to:
   
   LIFE Pittsburgh  
   875 Greentree Road  
   One Parkway Center, Suite 200  
   Pittsburgh, PA 15220

* If you are over the monthly income limit for Medical Assistance eligibility, you may be eligible to have Medical Assistance pay a portion of your monthly premium.

If you are eligible for Medicare, you will continue to be responsible for maintaining your monthly Medicare Part B premium to the Social Security Administration (SSA). If you are eligible for Medical Assistance, you must keep your resources under what is currently required by the Department of Public Welfare to continue eligibility. If your eligibility for Medicare or Medical Assistance changes while you are a LIFE Pittsburgh participant, your monthly premium will be adjusted in accordance with that change.

Notify the Allegheny County Assistance Office of the Department of Public Welfare and your LIFE Pittsburgh social worker within 7 days of any changes in your income and assets. Assets include bank accounts, cash in hand, certificates of deposit, stocks, life insurance policies and any other assets. You have a responsibility to provide true, correct and complete information to the Allegheny County Assistance Office to the best of your ability. You must cooperate in documenting or providing the information you give. If you cannot provide proof you should ask the Allegheny County Assistance Office to help.

The state operates a fraud control program under which local, state and federal officials may verify the information you have given. Any inappropriate nondisclosure of excess resources or misuse of participant’s resources may be considered fraud.
Nursing Facility Placement

Our goal is to provide services to enable you to remain in the community. However, if it is no longer feasible to meet your needs in the community, we have nursing facilities in our network to most effectively meet your needs, and we will continue to closely monitor you and the care you receive. This option will be reviewed and considered with you and your family if that need occurs.

While you are living in the community and are eligible for Medical Assistance, you are able to use your income to maintain your home. If you are placed in a nursing facility, your income will need to be reassessed based on Medical Assistance income requirements for nursing facility placement, and you may be required to contribute a monthly payment toward the cost of your care. This determination will be based on your spouse's income and assets as well as your own, and all income and assets must be disclosed. If a doctor states there is the possibility you can return to your home, you may be able to keep a portion of your income for up to six months to maintain your home so it is there when you return.

Any required payment will be paid directly to LIFE Pittsburgh. Failure to pay your payment to LIFE Pittsburgh will make you subject to involuntary disenrollment from the program.

Participants identified as responsible for a portion of or the total payment amount will be informed of the payment procedure. You have several options for making the payment to LIFE Pittsburgh.

Due to the fact that federal and state rules and regulations are specific to each individual’s case, if and when you are placed in a nursing facility on a long-term basis a LIFE Pittsburgh representative will contact you to discuss your specific responsibilities and payment options in greater detail.
I have received, read, and do understand LIFE's "Enrollment Agreement". The terms and conditions in this agreement have been explained to me. I have been given an opportunity to ask questions. All my questions have been answered to my satisfaction. I agree to participate in the LIFE program according to the terms and conditions in this Agreement. As a participant, I agree to receive and/or have coordinated my health and health-related services from LIFE. I also agree to allow disclosure and information exchange about my participation with LIFE between the federal and state government, the local Area Agency on Aging, and LIFE.

I understand that the benefits under this program are made possible through a special agreement that LIFE has with The Office of Long-Term Living and Medicare. I understand that when I sign this agreement, I am agreeing to accept benefits exclusively from LIFE in place of the usual Medical Assistance and Medicare benefits. LIFE will provide essentially the same benefits plus many more. I have received, read and agree to abide by the participant rights and responsibilities.

<table>
<thead>
<tr>
<th>Participant's Name Printed (First) (Middle) (Last)</th>
<th>Participant's Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guardian/Representative Printed (If applicable)</td>
<td>Guardian/Representative Signature</td>
<td>Date</td>
</tr>
<tr>
<td>Guardian/Representative Address</td>
<td>(City)</td>
<td>(Zip)</td>
</tr>
<tr>
<td>Witness Name Printed</td>
<td>Witness Signature</td>
<td>Date</td>
</tr>
<tr>
<td>LIFE Representative Printed</td>
<td>LIFE Representative Signature</td>
<td>Date</td>
</tr>
<tr>
<td>LIFE Center Administrator Printed</td>
<td>LIFE Center Administrator Signature</td>
<td>Date</td>
</tr>
</tbody>
</table>
LIFE Pittsburgh Participant Enrollment Form (page 2 of 2)

Demographics

Name (First) (Middle) (Last)

Address

(City) (Zip)

Date of Birth: __________ Social Security Number: __________

Ethnicity: Hispanic ☐ Non-Hispanic ☐ Sex: Male ☐ Female ☐

Race: Black/African American ☐ American Indian/Alaskan Native ☐ Asian ☐ White ☐

Native Hawaiian/Pacific Islander ☐ Other ☐

Payor Source

1. Is the participant private pay? Yes ☐ No ☐

2. Does the participant have Medical Assistance? Yes ☐ No ☐ Pending ☐ If yes, please complete.

   Medical Assistance: ___________________________

   (County) (Record Number) (Line Number)

   Recipient ID #: __________________________________________

3. Does the participant have Medicare? Yes ☐ No ☐ Pending ☐ If yes, please complete.

   Medicare ID #: __________________________________________

   Part A: ☐ Part B: ☐

4. Does the participant have other health insurance/payer source? Yes ☐ No ☐ If yes, please complete.

   Insurance Name: __________________________________________

   Insurance ID #: __________________________________________

Enrollment Information

LIFE Provider ID #: 001705841 Service Location Code: ______

Effective Date of Enrollment: _____-____-____

Service Begin Date: _____-____-____

Will an Alternative Care Setting (ACS) be used? Yes ☐ No ☐

Referral Data

Did the participant receive Long-Term Care Services prior to enrolling in the LIFE Program? If so, where:

**Nursing Facility ☐ (If nursing facility stay was greater than 90 days, participant may be eligible for Money Follows Person (MFP))

Home & Community Based Waiver ☐ Options Program ☐ Other __________________________

Who assisted the participant in the transition to the LIFE Program? __________________________
LIFE Pittsburgh Monthly Premium and Payment Agreement

I understand that as part of my participation in the LIFE Pittsburgh program, I am required to pay monthly premiums as they relate to my continuing eligibility for Medical Assistance, Medicare and/or private pay services. I understand that the monthly fees may vary as my eligibility for these programs may change in the future, and may be adjusted annually. I may be required to pay monthly fees directly to LIFE Pittsburgh.

I understand that all required payments to LIFE Pittsburgh are due on the first of the month.

My payment to LIFE Pittsburgh will be: $______________

Effective date: __ __ - __ __ - __ __ __ __

I agree to make the payment as indicated above:

__________________________________________ Date: ____________
Participant Signature

__________________________________________ Date: ____________
Participant Printed

__________________________________________ Date: ____________
Representative Signature

__________________________________________ Date: ____________
Representative Printed

__________________________________________ Date: ____________
LIFE Pittsburgh Staff Signature

__________________________________________
LIFE Pittsburgh Staff Printed
LIFE Medical Record Review and Copying Cost Agreement

I understand that as a participant in the LIFE Pittsburgh program, I have the right to review and request a copy of my medical records.

I understand that I must schedule a time to review my records with an appropriate LIFE Pittsburgh staff member.

I understand that I must provide LIFE Pittsburgh with a written request to obtain a copy of my records.

I understand that I will be charged per page based on the Centers for Medicare and Medicaid Services Fee Schedule when requesting a copy of my records.

_________________________________________ Date: ___________
Participant Signature

_________________________________________
Participant Printed

_________________________________________ Date: ___________
Representative Signature

_________________________________________
Representative Printed

_________________________________________ Date: ___________
LIFE Staff Signature

_________________________________________
LIFE Staff Printed
LIFE Pittsburgh Provider Network

Physicians and Other Medical Professionals

Anesthesiology
University of Pittsburgh Physicians
Ohio Valley Medical Services

Audiology
SH Russo Audiological Service

Behavioral Health/Mental Health
Staunton Clinic
Larry Gitelman, CRNP Mercy Behavioral Health
Ohio Valley Professional Services
Persad Center Inc.

Cardiovascular Disease
University of Pittsburgh Physicians
Central Cardiovascular Associates

Chiropractor
Graig Schade DC

Dental
Joseph S. Certo, DMD
Mark Mikus, DMD
Mark Hagarman, DMD
David Iurlano, DDS

Dermatology
Joseph Bikowski, MD
Allegheny Clinic - Dermatology

Endocrinology
Associates in Endocrinology

Gastroenterology
Allegheny Clinic - Gastroenterology

Gynecology
University of Pittsburgh Physicians
Allegheny Clinic-Gynecology
*(accommodates disabilities)*
Eugene Scioscia, MD
Eric Lantzman, MD
Sonia Aneha, MD

Hematology/Oncology
Hematology Oncology Association

Hospitalists
Campbell & Philbin Medical Assoc
at UPMC Mercy

Ohio Valley Professional Services
at Ohio Valley Hospital

Community Care Plus
at Ohio Valley Hospital

Psychiatric Associates of Western PA
Jeffrey Wilson, MD Inpatient Psychiatric services at nursing facilities

University of Pittsburgh Physician
Department of Psychiatry at Kane Glenn Hazard/WPIC

Infectious Disease
Associates in Infectious & Tropical Diseases
Ohio Valley Professional Services
Allegheny Clinic - Infectious Disease

Nephrology and Dialysis Services
Pittsburgh Kidney Care
Three Rivers Nephrology
Vascular Access Center
Partners in Nephrology & Endoc
David Hakas, MD
Advanced Kidney Care

Neurology
Greater Pittsburgh Neurology
Allegheny Clinic-Neurology
Susan Baser, MD

Neurosurgery
University of Pittsburgh Physicians
Allegheny Clinic - Neurosurgery
Physicians and Other Medical Professionals, cont.

**Ophthalmology**
Glaucoma Cataract Consultants
(Procedures @ Mt. Lebanon Surgical Center)
Sewickley Eye Center (Procedures @ OVH)

**Optometry**
Timothy J. Corcoran, OD
Sewickley Eye Center

**Otolaryngology**
Metropolitan ENT Associates

**Pain Management**
Pittsburgh Pain Physicians

**Pharmacy Consulting Services**
Rx Partners

**Physical Medicine**
Medical Rehab, Inc.

**Podiatry**
Roger H. Rooth, DPM
Greentree Foot & Ankle

**Pulmonology**
Pittsburgh Chest Physicians
Allegheny Clinic Pulmonary

**Urology**
University of Pittsburgh Physicians
*R. Martin Benoit, MD*
Allegheny Clinic - Urology
Jay Herman, MD

**Rheumatology**
Ohio Valley Professional Services
University of Pittsburgh Physicians

**Surgery: General and Vascular**
University of Pittsburgh Physicians
Ohio Valley Professional Services
General & Vascular Surgery Assoc.

**Surgery: Colon & Rectal**
Colon and Rectal Wellness Center:
*Dr. Bradley Levinson*

**Surgery: Oral Surgery**
Daniel Pituch, MD, DMD
Mark Grenadier, DDS

**Surgery: Orthopedic**
Greater Pittsburgh Orthopedic Associates

**Surgery: Plastic Surgery**
University of Pittsburgh Physicians
*Guy Stoffman, MD*

**Surgery: Thoracic and Vascular**
University of Pittsburgh Physicians

**Wound Care**
Ohio Valley Professional Services:
*Philip Georgevich, MD*
Greentree Foot & Ankle:
*Dr. Chris Hajnosz*
Allegheny Clinic – Wound Care
In addition to the specific specialists listed above, we have a contract in place with the University of Pittsburgh Physicians with specialists available to cover all of your healthcare needs.

### Outpatient Facilities and Diagnostic Testing

**Diagnostic Laboratory**
- Quest Diagnostic
- Ohio Valley Hospital Outpatient

**Outpatient Hospital Services**
- Ohio Valley Hospital Outpatient
- UPMC Mercy Hospital Outpatient

**Dialysis Clinic**
- Fresenius Medical Care
- ARA Dialysis Unit at Ohio Valley Hospital, LLC

**Pain Clinics**
- Ohio Valley Hospital Pain Clinic
- UPMC Mercy Hospital Pain Clinic

### Durable Medical Equipment and Other Services

**Durable Medical Equipment & Oxygen**
- Klingensmith Healthcare
- Blackburns Physicians Pharmacy
- Health Care Solutions at Home
- Trinity Biomedical Solutions
- Westmoreland Medical Equipment
- National Seating and Mobility
- Chartwell Pennsylvania, LP

**Orthotics & Prosthetics**
- DE LA Torre O&P, Inc.
- Hangar Prosthetics & Orthotics
- Three Rivers Orthotics & Prosthetics
- Union Orthotics
- Colaizzi

**Housekeeping**
- ServiceMaster of Greater Pittsburgh

**Interpreter**
- Echo International (TrustPoint Internaional)

**Pedorthist**
- Sanaljon
- Three Rivers Orthotics & Prosthetics

**Medical Supplies**
- Comfort Care Medical

**Other Home Services**
- TNP Enterprises d/b/a Mr. Handyman North

**Transportation**
- Guardian Angel Ambulance Services
- Lewis Ambulance
- Northwest EMS
- Steel Valley Ambulance
LIFE Pittsburgh Inpatient Facilities Provider Network

We have contract arrangements in place to cover services that we cannot provide directly. Below is a list of the providers that we have contracts with. All of these providers understand our program and agree to comply with our program’s requirements. We will still coordinate, arrange for and monitor your care through these providers.

**Inpatient Hospital**
UPMC Mercy Hospital  
1400 Locust Street  
Pittsburgh, PA 15219

Ohio Valley Hospital  
25 Heckel Road  
McKees Rocks, PA 15136

**Inpatient Psychiatric Care**
Ohio Valley Hospital  
25 Heckel Road  
McKees Rocks, PA 15136

**Inpatient/Outpatient Facilities**
Allegheny Health Network  
320 East North Avenue  
Pittsburgh, PA 15212

**In Patient/Outpatient Facilities**
West Penn Allegheny Health System Inc  
4800 Friendship Avenue  
Pittsburgh, PA 15224

Acute Rehabilitation – Inpatient Hospital Facilities  
UPMC Mercy Hospital  
1400 Locust Street  
Pittsburgh, PA 15219

Ohio Valley Hospital  
25 Heckel Road  
McKees Rocks, PA 15136

Encompass Health Rehabilitation Hospital of Sewickley  
303 Camp Meeting Road  
Sewickley, PA 15143

Encompass Health Harmarville Rehabilitation Hospital  
(acute rehabilitation only)  
320 Guys Run Road  
Pittsburgh, PA 15238

Nursing Facilities
Asbury Health Center  
700 Bower Hill Road  
Pittsburgh, PA 15243

Caring Heights Community Care & Rehabilitation Center  
234 Coraopolis Road  
Coraopolis, PA 15108-4004

St. John Specialty Care Center  
500 Wittenberg Way  
Mars, PA 16046

Manor Care Greentree of Pittsburgh  
1848 Greentree Road  
Pittsburgh, PA 15220

John J. Kane Regional Centers  
Kane Regional Center – Glen Hazel  
955 Rivermont Drive  
Pittsburgh, PA 15207

Kane Regional Center – Ross Township  
110 McIntyre Road  
Pittsburgh, PA 15237

Kane Regional Center – Scott Township  
300 Kane Blvd.  
Pittsburgh, PA 15243

Passavant Retirement Community  
401 S. Main Street  
Zelienople PA 16063

Reformed Presbyterian Home  
2344 Perrysville Avenue  
Pittsburgh, PA 15214

Your signature below verifies that you agree to allow LIFE Pittsburgh to be your sole service provider and that you agree to receive all services through us, and when referred, the network providers listed above.

Participant Signature (date)  

Representative Signature (date)

Participant Name Print  

Representative Name Print

K/CMS Final Responses/Enrollment Agreement  

Effective 04/01/2015
ADDENDUM

LIFE Pittsburgh complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. LIFE Pittsburgh does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

LIFE Pittsburgh cumple las leyes civiles federales y no discrimina por raza, color, nacionalidad, edad, discapacidad o sexo. LIFE Pittsburgh no excluye a las personas o las trata de forma distinta por su raza, color, nacionalidad, edad, discapacidad o sexo.


LIFE Pittsburgh 遵守适用的联邦民权法，不会根据种族、肤色、民族血统、年龄、残疾或性别歧视他人。LIFE Pittsburgh 不因种族、肤色、民族血统、年龄、残疾或性别而排斥他人或区别对待。

注意：如果您说中文，我们可免费为您提供语言协助服务。请致电：412-388-8042 (TTY:711)。

LIFE Pittsburgh tuân thủ các Luật dân quyền liên bang áp dụng hiện hành và không kỳ thị về chủng tộc, màu da, nguồn gốc quốc tịch, tuổi tác, tình trạng khuyết tật hoặc giới tính. LIFE Pittsburgh không phân biệt hoặc đối xử bất công bằng với bất kỳ cá nhân nào về chủng tộc, màu da, nguồn gốc quốc tịch, tuổi tác, tình trạng khuyết tật hoặc giới tính.


Компания LIFE Pittsburgh обеспечивает соблюдение соответствующего федерального законодательства о гражданских правах и гарантирует отсутствие дискриминации по признаку расы, цвета кожи, национального происхождения, возраста, инвалидности или пола. Компания LIFE Pittsburgh гарантирует равный подход ко всем и отсутствие дифференцированного обращения с лицами по признаку расы, цвета кожи, национального происхождения, возраста, инвалидности или пола.

ADDENDUM

LIFE Pittsburgh voldoet aan de toepasselijke federale burgerrechtenwetten en discrimineert niet op basis van ras, huidskleur, afkomst, leeftijd, handicap of geslacht. LIFE Pittsburgh sluit geen personen uit of behandelt ze anders op grond van ras, huidskleur, afkomst, leeftijd, handicap of geslacht.


LIFE Pittsburgh는 해당 연방 시민권 법률을 준수하며 인종, 피부색, 국적, 나이, 장애 또는 성별을 이유로 차별하지 않습니다. LIFE Pittsburgh는 인종, 피부색, 국적, 나이, 장애 또는 성별을 이유로 사람을 배척하거나 다르게 대하지 않습니다.


LIFE Pittsburgh è conforme alle leggi sul diritto civile federali applicabili e non discrimina sulla base di razza, colore, nazionalità, età, disabilità o sesso. LIFE Pittsburgh non esclude persone o le tratta in modo diverso a causa di razza, colore, nazionalità, età, disabilità o sesso.


LIFE Pittsburgh Lawrenceville laws that are fair and that do not discriminate on the basis of race, color, or national origin or disability. LIFE Pittsburgh does not exclude people or treat them differently because of race, color, or national origin.

LIFE Pittsburgh le lois fédérales sur les droits civiques en vigueur et ne pratique aucune discrimination fondée sur la race, la couleur, l’origine, l’âge, l’incapacité ou le sexe. LIFE Pittsburgh n’exclut pas ou ne traite pas de personnes différemment en se basant sur leur race, couleur, origine, âge, incapacité ou sexe.

2
ADDENDUM


द्वारा पितृसंरेण बालु हेतु क़ानून अधिकार आयुष्मान नु पालन र्हे छ अनेक जन, जन्ति, राष्ट्रीय मूल, उम्र, अपेक्षा, अथवा बैंक प्रमाणें खेतिमा नसकरी करती, द्वारा पितृसंरेण बालुप्रविध प्रमाणे नभन्न व्यवस्था र्हे बालु नसकरी रामनी

ध्यान देश: जों तस्में {जुन्दराती} बोरी बाल, तो तम्हें भारी सहयोग संग्रह भर्तरो महत्तम मनमें. 412-388-8042 पर डाल दौरें (TTY:711)

LIFE Pittsburgh przestrzega obowiązujących federalnych przepisów dot. praw obywatelskich i nie zezwala na dyskryminację ze względu na rasę, kolor skóry, pochodzenie narodowe, wiek, niepełnosprawność lub płeć. LIFE Pittsburgh nie wyklucza osób i nie traktuje ich w odmienny sposób z powodu ich rasy, koloru skóry, pochodzenia narodowego, wieku, niepełnosprawności, czy płci.


LIFE Pittsburgh konfôme ak lwa federal konsènan dwa sivil epi li pa fe diskriminasyon ki baze sou ras, koulè, orijin nasyonal, laj, andikap, oswa laj, andikap, oswa sèks. LIFE Pittsburgh aksepte tout moun epi li trete yo egalego san gade sou ras, koulè, orijin nasyonal, laj, andikap, oswa sèks.
ADDENDUM


LIFE Pittsburgh ñege gwo yo pik ake bòna apsye bòna ak ressou plis. Yo se yo fè la fòmi apsye nan bòna ak ressou plis. LIFE Pittsburgh ñege gwo yo pik ake bòna ak ressou plis.

A LIFE Pittsburgh oboeke às leis federais aplicáveis de direitos civis e não discrimina com base em etnia, cor, nacionalidade, idade, deficiência ou sexo. A LIFE Pittsburgh não exclui pessoas nem as trata de maneira diferente por motives de etnia, cor, nacionalidade, idade, deficiência ou sexo.

IMPORTANT PHONE NUMBERS

Allegheny County Department of Aging
Senior Line................................................................. 412-350-5460
OPTIONs Assessment Unit........................................... 412-350-7137
AAA - Protective Services........................................... 412-350-6905

Ombudsman Program For All LIFE Pittsburgh Centers
Will Harrison .............................................................. 412-350-5791

Commonwealth of Pennsylvania
Medicare Fraud Hotline.................................................. 1-800-447-8477
Poison Control............................................................... 412-681-6669

Emergency Services & Urgently Needed Care

LIFE Pittsburgh provides access to care 24 hours per day, 7 days per week and 365 days per year.

An Emergency Medical Condition is defined as the onset of a sudden medical condition, or severe pain, that an average person, with no medical training, feels would place their health at serious risk, result in serious harm to bodily functions, or result in serious harm of an organ or bodily part.

If you have an emergency medical condition, please call 911.

➢ Answer questions and follow instructions carefully.
➢ Request to be taken to the hospital, tell the ambulance company that you are a LIFE Pittsburgh participant, and present your LIFE Pittsburgh card to the emergency room staff.
➢ Notify LIFE Pittsburgh staff as soon as possible if you have used the 911 emergency services.

LIFE Pittsburgh staff is on-call 24 hours a day, seven days a week. LIFE Pittsburgh's on-call coordinator will advise you what to do and will make necessary arrangements for you to receive the care you need. If you need to be taken to the hospital, the coordinator will call the ambulance company to dispatch an ambulance to your home.

Please contact LIFE Pittsburgh as soon as you start feeling bad, instead of waiting until it is a crisis situation. That enables us to meet your needs and may prevent an emergency medical condition.

If you need urgent (but not emergency) care, call 412-388-8040:

Monday through Friday, 8:00 am – 4:30 pm & you will reach the Day Health center:
✓ Speak to any clinical staff or any administrative member to briefly describe your situation.

During off hours or on weekends or holidays, you will be connected to LIFE Pittsburgh's nurse on-call:
✓ Briefly describe the situation to the nurse on-call
✓ The nurse will advise you what to do and will make necessary arrangements for you to receive the care you need.
✓ If you need to be taken to the hospital, the nurse on-call will direct you to call the ambulance company to dispatch an ambulance to your home.