

Model Policy: Presenting PACE As a Clear Alternative to Managed Care

OVERVIEW

PACE plays a significant role in supporting the goals of state and federal policy-makers to serve individuals who need long-term services and supports (LTSS) in capitated and integrated care models. PACE offers consumers a provider-based alternative to larger, insurer-based managed care plans while helping policy-makers achieve their goals for more effective and efficient care. As more states consider using managed care organizations to care for individuals needing LTSS, it is important that PACE is clearly presented as a voluntary alternative.

MODEL POLICY

Beneficiary Communications

In areas of the state where PACE is available, all communications about LTSS options will include PACE as a voluntary alternative presented alongside the state managed care program.

In materials about the state managed care program, information about PACE will be presented as an enrollment alternative. These materials include the following:

- ✦ background information about the managed care program,
- ✦ enrollment materials,
- ✦ enrollment assistance programs and
- ✦ outreach programs.

Current PACE participants will be excluded from standard mailings that are sent to beneficiaries eligible to enroll in managed care.

PACE will be a visible option during the initial roll-out of the state managed care program.

PACE will be a visible option during “open enrollment” when members of Medicaid managed care plans can change options or plans.

Medicaid beneficiaries who are newly eligible to enroll in PACE as a result of meeting nursing home level of care will be notified of this option upon their change in status.

Enrollment and Disenrollment

PACE participants will be exempted from mandatory enrollment in managed care organizations.

PACE participants will not be included in any passive enrollment processes as they are already enrolled in a managed care option.

Unless a PACE participant actively indicates a desire to enroll in an alternative managed care plan, enrollment in PACE will continue uninterrupted.

Beneficiaries can disenroll from a managed care plan anytime to enroll in PACE.

Options Counseling

Individuals eligible for managed care will receive comprehensive information about the full range of health and LTSS options available to them.

To ensure options counselors are knowledgeable and experienced about PACE, the state will evaluate the entire system during the initial roll-out period of managed LTSS and periodically thereafter to assess whether individuals' needs are being met.

The evaluation will include the following:

- ★ analysis of referral and enrollment patterns to address any lack of awareness or potential conflicts of interest;
- ★ assessment of options counselors' ability to advise consumers about the benefits and features of a PACE program; and
- ★ accuracy of options counseling information regarding access to PACE by service area, services provided, costs and any PACE-waiver features (e.g., community-based primary care).