

Adapting PACE



PACE Pilots: A New Era for Individuals with Disabilities August 24, 2016



**National
Multiple Sclerosis
Society**



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Disability Network

What is PACE?

- Traditional model for nursing home eligible individuals over age 55 (PACE stands for Program of All-Inclusive Care for the Elderly)
- Use of interdisciplinary team - including physicians, nurse practitioners, nurses, social workers, therapists, van drivers and aides to keep people in the community
- Combines payments from Medicare and Medicaid or private pay sources
- Offers high quality care while also being cost effective

PACE Innovation Act of 2015

- CMMI has authority to develop PACE pilots for new populations
 - Delegated to MMCO
- Potential Populations

Adapting PACE: What to Build On?

- Successful track record of maintaining people who have complex medical care and functional support needs in the community
- Interdisciplinary assessment, care planning, and care delivery
- Flexible services to meet individual participant's needs

PACE Services

- nursing
- physical therapy
- occupational therapy
- recreational therapy
- meals
- nutritional counseling
- social work
- medical care
- home health care
- other services as needed
- personal care
- prescription drugs
- social services
- audiology
- dentistry
- optometry
- podiatry
- speech therapy
- respite care
- hospitalization
- nursing facility

Adapting PACE: What's Needed

- Robust, person-centered care planning and care delivery approach
- Support for community-based activities
- Access to disability competent care
- Avoid medicalization of services
- Potential need for increased support of vocational activities
- Additional specialists as members of interdisciplinary team
- Outcome, quality of care and quality of life measures
- Recognition of PACE organization's responsibility and risk for care
- Payment that reflects costs and (unknown) risks of serving people with disabilities

Adapting PACE: For Who?

- People with a disability under the age of 55
 - Physical
 - Intellectual
 - Developmental
 - Cognitive
 - Behavioral
- Who have a nursing home level of care **OR**
- Who have a chronic disease or medical condition
 - Expected to last more than one year
 - That limits their functional abilities
 - Requires ongoing medical monitoring
 - Requires human assistance with two or more ADLs
 - **AND EITHER**
 - Have had a non-elective hospital admission with use of acute or subacute rehabilitation services within the last 12 months **OR**
 - Evidence of ongoing need for medical management of complex systems

Adapting PACE: By Who?

- Consumers
- Providers
 - Disability providers
 - PACE providers
 - Partnerships
 - Nonprofit and for profit
- Medicare
- Medicaid

Adapted PACE Protocol

- PACE protocol is original operating guide to PACE
- Group of disability stakeholders reviewed to adapt the protocol for people with disabilities, including:
 - American Association on Health and Disability
 - ANCOR
 - Autistic Self Advocacy Network
 - Lakeshore Foundation
 - Lutheran Services in America Disability Network
 - National Assoc. of State Directors of DD Services
 - National Multiple Sclerosis Society
 - National PACE Association

Adapted PACE Protocol

- Adapted PACE Disability Protocol:
<http://www.npaonline.org/sites/default/files/PDFs/Adapted%20PACE%20Protocol.pdf>
- What's in the Disability Protocol
 - 1. Overview
 - 2. Provider Requirements
 - 3. Eligibility, Enrollment, Disenrollment
 - 4. Participant Rights
 - 5. Service Coverage and Delivery
 - 6. Quality Assurance
 - 7. Quality Measurement
 - 8. Provider Administration
 - 9. External Oversight
 - 10. Provider Termination
 - 11. Medicare and Medicaid Contracts Requirements

Adapted PACE: Why a Disability Protocol?

- “Nothing About Us Without Us” – Stakeholder engagement
- Ensuring that the vision of the Americans with Disabilities Act and *Olmstead* are fulfilled
- Expanding the application of the HCBS Settings Rule from specific Medicaid programs to throughout CMS as envisioned by leadership
- Carefully working with all stakeholders to shift away from a medical model of services while also providing quality care

Adapted PACE: Key Issues for Disability Protocol

- Person-centered/conflict free care planning and delivery
 - Provides for an independent, external person centered planning advocate upon initial assessment and when requested by the participant
- PACE Center role
 - No required attendance at the PACE center
 - Available and supported services in an integrated setting
 - Complies with HCBS settings rule and guidance
 - Need to support wide range of community activities, reflecting interests and wishes of the participant

Adapted PACE: Key Issues for Disability Protocol

- PACE Interdisciplinary Team expanded
 - to include expertise in disability care and support
 - to reflect lifespan services (employment coach, etc.)
- Adapted PACE services must be provided in a setting that is compliant with HCBS Settings Rule including
 - Employment support services
 - Transportation
 - Support and services that support individual's ability to obtain and maintain community housing

Adapted PACE: Status of Disability Protocol

- Participants finalized the protocol in June 2016
- Subsequently these individuals met with officials at CMS to discuss the protocol and why it is important
- Although not yet an official part of the pilots, applicants for the pilot program should review the protocol and consider how to implement it

CMS PACE Conference: Potential Pilot Populations

- 21+ population with:
 - *Physical disabilities (priority)*
 - **Timeline:** current administration (potentially)
 - Intellectual and developmental disabilities
 - Severe and persistent mental illness
 - Substance use disorders
 - End stage renal disease
- Elderly Medicare Beneficiaries
 - At-risk for nursing home care

Source: CMS PACE Conference

CMS PACE Conference and Beyond: Pilot Milestones

- Pilot development ongoing
 - CMS seeking input
- Anticipated Pilot Announcement
 - Specify eligible providers
 - Build on current PACE provider application process
 - Include set of waivers for current PACE regulations* to allow Pilot programs to operate consistent with an adapted/modified approach

*Note: CMS' released a proposed rule to update the PACE regulations currently in place for the permanent (not Pilot) PACE program. This proposed rule is not expected to be finalized or in effect in time for the Pilot announcement. Therefore the Pilot waivers will address changes needed to the current PACE regulation.

Adapting PACE: Next Steps and Discussion

- What type of technical assistance will be provided to potential pilot organizations?
- How will the pilots be evaluated?

Adapting PACE: Discussion

- Timeline: implementation of pilots
- Ongoing communication with CMS
- Continued advocacy efforts

Adapted PACE: Next Steps and Discussion



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