## 2024 LTSS Provider Forum Q&A Session: PACE SERVICES

Answers provided and vetted by DHB 7/22/2024

The agency can hire LPN or RN family members to provide care and pay them with Medicaid claims? Medicaid will address this question in a formal bulletin in the next 90 days.

What is the state's opinion on for profit PACE program in North Carolina? The state has no position on whether a PACE Organization is for profit or not for profit.

**Can PACE In-Home Services allow a family member to be a paid caregiver?** Medicaid will address this question in a formal bulletin in the next 90 days.

What is the PACE participants out of pocket when they go to LTC? PML is calculated based on income.

How does a person start the process of initiating a PACE referral? Is the referral made through a provider, medical provider or directly to Acentra? The referral can come from anyone, with a PACE application from Medicaid. Process can take 3-4 weeks

Can the public access information about a PACE center's deficiencies? Yes, will be posted on the PACE center's website.

How can I sign up to work with PACE as a Home Care Provider? Reach out to the PACE Program.

Do PACE participants have to give up their current PCP to enroll in PACE? I thought they did but have also been told by a center that they don't. Yes - they do. There are collaborative approaches between the State and CMS that can occur with the provider being integrated into the care team. They need to be a part of daily call coordination.

What is the farthest distance PACE will drive to pick up/drop off an attendee? Within the service area with a rest break after 45 minutes, 60 minutes there and back.

**People can have PCS in addition to pace? How does that work?** PACE participants can have PCS services if the services are either provided by the PACE organization or paid for by the PACE organization and part of the participant's plan of care

Is there a cap on the number of PCS hours a beneficiary can receive on PACE? No. Hours provided would be based on the hours approved on participant's plan of care.

Does a provider have to have a contract? Yes

How does a person decide between PACE and CAP/DA as the best program for them? Yes, if you enroll in PACE you will not be eligible for CAP/DA.

Why would a person consider PACE vs Medicaid Direct or Standard Plan. How do we qualify or refer participants for/to PACE? PACE is NC Medicaid Managed Care for individuals 55+ so it is comparable to a Standard Plan. Individuals who are "dually eligible" cannot enroll in a Standard Plan by law, but can enroll in PACE if they meet a certain level of care.

What makes PACE differ from CAP Services? PACE is NC Medicaid Managed Care CAP/DA is not. PACE provides coverage for all call including hospitalization, Waiver services are non-medical.

Can a PACE recipient, already receiving PACE in home care services paid for by PACE, also get services under CAP waiver such as a) licensed home care b) consumer direction/choice c) coordinated caregiving? Individuals in PACE, which is NC Medicaid Managed Care cannot be enrolled in CAP/DA. CAP/DA is NC Medicaid Direct.

What is process to contract with the PACE program in NC? <a href="https://www.ncpace.org/How-to-Enroll">https://www.ncpace.org/How-to-Enroll</a>

**Do PCS agencies have to contract with PACE to provide services to clients in the PACE program?** Yes