

Best Practices for Growth Webinar #6: Promoting a Policy Environment that Supports PACE Growth



PACE 2.0

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Welcome!



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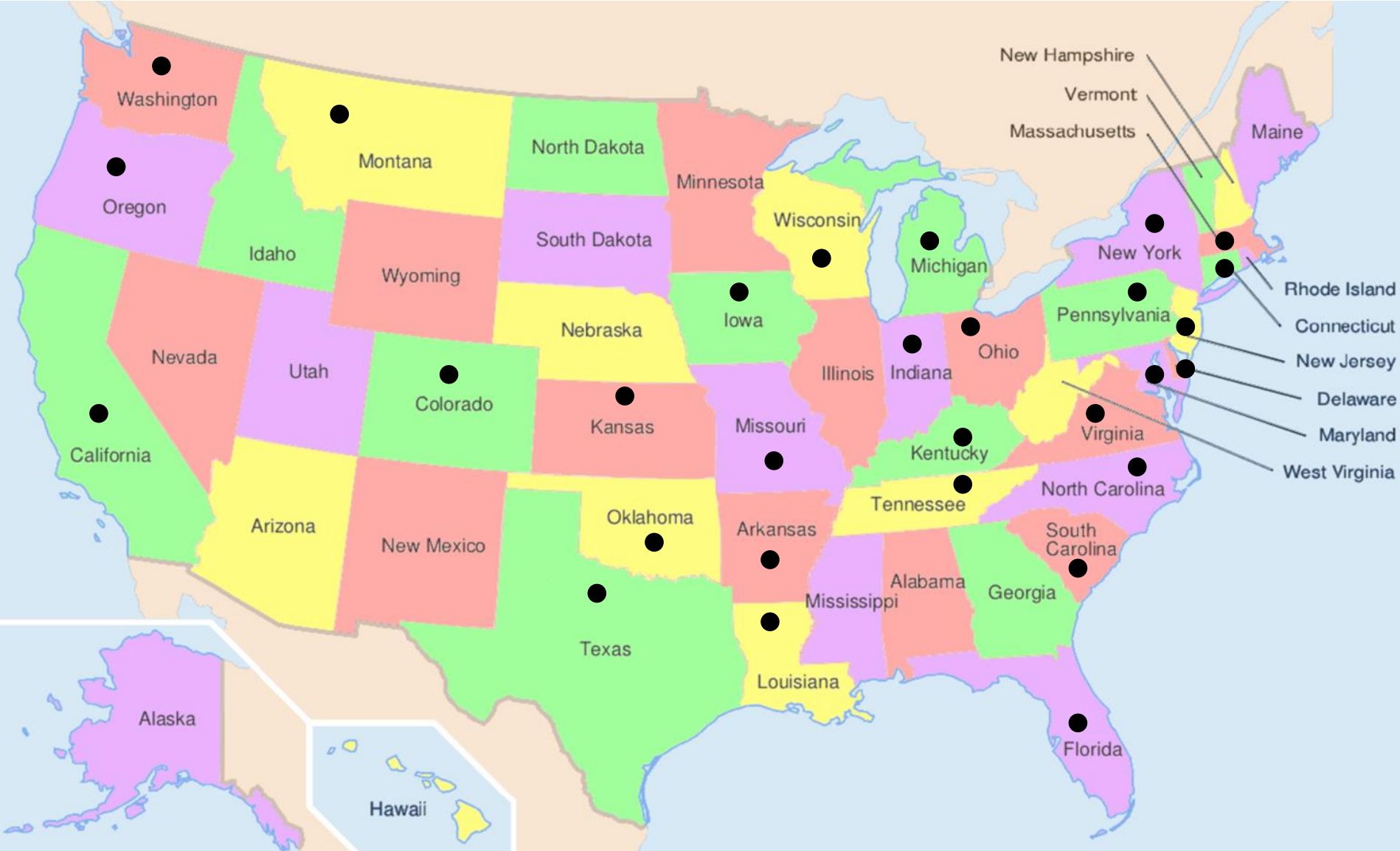


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Participants



Agenda

- Welcome (10 min)
- Access Agenda, Model Policies, Scorecard (15 min)
- Case Study: Florida PACE Providers Association (20 min)
- Break-Out Rooms (15 min)
 - What are key policy challenges in your state?
 - Are they perceived challenges? Can you confirm the requirement?
 - What are some ways you might advocate to changes to improve the policy?
- Discussion (20 min)
- Close (5 min)

Please Rename Yourself - Add State Abbreviation

Rename yourself in Zoom to add state abbreviation

(e.g., "Jane Smith – **CA**")

- Click on the “Participants” button at the top of the Zoom window
- Hover your mouse over your name in the “Participants” list on the right side of the Zoom window
- Click on “Rename”
- Add the state abbreviation to the end of your name and click on “OK”

Raise Hands and Chat Function

To raise your hand

- In the desktop application click on the “Participant” tab and then click on “Raise hand”
- in the Mobile application click on the “More” tab and then click on “Raise hand”

To use the chat function

- In the desktop application click on the “Chat” tab and type your message in the bottom right corner and press send; make sure you are sending to everyone
- In the mobile application, tap the screen to bring up the controls bar, tap on “Participants” at the bottom of the list, click on “Chat,” type your message, and press send

Access Agenda, Model Policies, Scorecard

NPA State Access Agenda

Supporting

Supporting Access to PACE in Current Service Areas

Expanding

Expanding Access in New Communities

Piloting

Piloting PACE for Populations with Similar Care Needs

NPA State Access Agenda

Supporting Access to PACE in Current Service Areas

- Ensure PACE organizations can grow sufficiently to meet the needs of their communities
- Increase awareness of PACE
- Ease enrollment into PACE

NPA State Access Agenda

Expanding Access in New Communities

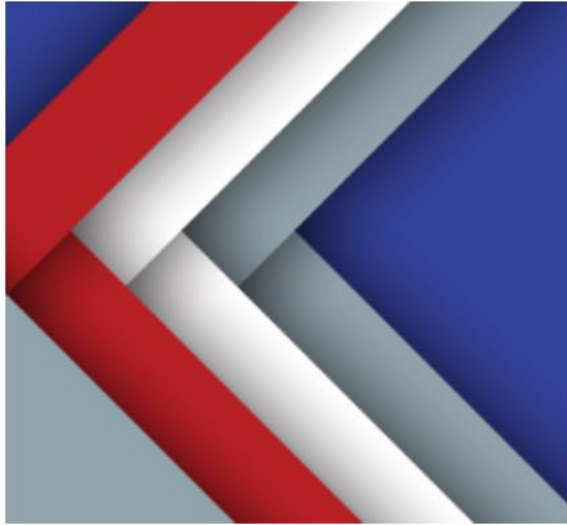
- Assess areas that could benefit from PACE
- Provide sufficient funding for growth

NPA State Access Agenda

Piloting PACE for Populations with Similar Care Needs

- Identify certain at-risk groups that could benefit from PACE
- PACE organizations and states can work together to request a PACE pilot to meet the needs of the identified population

Resources to Help with Access to PACE



State Almanac

The State Almanac assesses state performance in five key areas: Growth of PACE, Sustainability, Oversight and Flexibility, Alternatives to PACE, and Access to PACE.



State Scorecard

NPA has created a scorecard to assess key metrics for growing, expanding, and sustaining PACE.

Additional Resources to Help with Access to PACE

Model Policy: Options Counseling for Individuals Transitioning to LTSS

OVERVIEW

Individuals in need of long-term services and supports (LTSS) often face a complicated patchwork of service options and need assistance exploring the public and private programs available to them, navigating eligibility and enrollment requirements, and weighing other factors that affect their ability to live independently.

When designed and implemented appropriately, effective options counseling educates individuals about the range of LTSS available and to assist them in selecting the option that best meets their needs. Given the unique needs of each individual, there is no single correct approach to options counseling. However, individuals need access to options counseling that meets the following criteria:

- **Comprehensive:** Individuals need to be aware of the full range of health and LTSS options available to them and be able to develop and access person-centered, tailored plans of care.
- **Competent:** Care plans should be provided by experienced, knowledgeable staff that is fully versed in the complete range of available services.
- **Conflict-Free:** This will ensure that options counselors, enrollment brokers or their sponsoring organizations do not inappropriately influence individuals' choices for their own financial benefit.
- **Continuous and Timely:** While it may be expedited when necessary, options counseling should be offered to all individuals prior to their enrollment in a plan. The process should allow sufficient time for clinical and financial eligibility determinations and for individuals to consider and weigh all options. Counseling should be revisited as individual needs or circumstances change.

MODEL POLICY¹

Individuals who would benefit from better understanding their LTSS options receive competent, comprehensive and conflict-free options counseling.

The state will make options counseling available to all individuals who meet one of the following criteria:

- request or indicate an interest in receiving information or advice concerning LTSS;
- are required to enroll in an insurance plan as part of a state-managed LTSS program or financial alignment demonstration initiative;
- are referred by a hospital, nursing home, assisted living home or other long-term residential setting; home- and community-based waiver services provider; or another agency;
- have had a recent change in health status, resulting in a greater need for LTSS;
- need assistance coordinating their LTSS and health care needs across many services and systems;
- have LTSS needs but are unsure about the process of accessing services or what services will best meet their preferences or needs;

¹ Comprehensive and competent options counseling is an issue many states continue to work on and try to improve. NPA has pulled together

Model Policy: Ensuring Access to PACE Through the Use of a Streamlined Clinical Eligibility Determination Process

OVERVIEW

When individuals and their families consider enrolling in PACE, the need to access community-based long-term services and supports often requires that a decision be made quickly to avoid institutional placement. To enroll in PACE, individuals must meet the eligibility criteria of their state for nursing home level of care, regardless of who assumes responsibility for PACE costs. Therefore, it is critical that clinical eligibility determinations be made as quickly and efficiently as possible.

Historically, the timeframes for determining clinical and/or financial eligibility in some states have been lengthy, with the processes taking six weeks or longer. Processes to determine clinical eligibility may involve in-person clinical assessments by state or local government staff who may have difficulty completing timely assessments. However, some states have implemented effective policies to get eligible individuals enrolled in PACE more quickly. Expediting the process comes with risks for the PACE organization and the state, so they should consider the necessary safeguards to protect from unnecessary harm.

MODEL POLICY¹

To ensure individuals enrolling in PACE experience a streamlined and expedited eligibility determination process, the state will implement a process allowing PACE organizations to undertake a pre-enrollment screening that involves completing a Level of Care (LOC) form:

- During the pre-enrollment screening, all PACE organizations will be required to utilize a standard form to be submitted to the state and used by its LOC review team to assess whether an individual meets state criteria for nursing home level of care.
- The LOC form will be securely submitted electronically to the review team, which will perform an expedited review within five days. The team will make an eligibility determination based on the information provided. All individuals determined Nursing Facility Clinically Eligible will be enrolled in PACE. If the team is unable to certify eligibility based on the information provided by the PACE organization, the team will contact the organization with a request for additional information or, if necessary, deny enrollment.
- To ensure the accuracy of the LOC assessment pre-enrollment screenings of the PACE organization, the review team will conduct a quarterly audit and randomly select 20 percent of completed initial comprehensive assessments to ensure the information provided in the LOC tool is consistent with the information documented in the comprehensive interdisciplinary team assessments.
- If the audit results in a finding that the comprehensive assessment does not support the information provided in the LOC tool, the participant is disenrolled retroactively from the PACE organization, and the organization is subject to 100 percent recovery of any capitation received for the months the ineligible participant was enrolled.

Model Policy: Statewide Access to PACE

OVERVIEW

PACE can play 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.

However, enrollment in a PACE organization is limited to those who reside within its defined service area. The service area is established in the PACE program agreement with the state and the Centers for Medicare & Medicaid Services. Since PACE can serve only those who live in the defined service area, it is a limited state option. The state should consider how to expand access to PACE services through new programs and/or expanded service areas. This will allow PACE organizations to care for a larger number of those who need LTSS.

MODEL POLICY¹

States will examine the LTSS needs of its population and adequately expand PACE to meet those needs.

- The state will assess the projected growth for its population of age 55 and over that meets a nursing home level of care and will expand PACE through new programs or expanding service area agreements to meet the needs of that population.
- The state will explore areas that are unserved or underserved by PACE and assess whether they have a sufficient geographic size and population to ensure the PACE model will be financially viable. Once the assessment is completed, the state will prioritize counties and seek providers.
- The state will use a Request for Proposals process to identify the interest of prospective PACE organizations in defined service areas with sufficient geographic size and population to support financially viable operations.
- Applications for new PACE programs or PACE service area expansions will be processed by the state in a timely manner.
- The state will provide sufficient funding to support PACE growth in response to provider and consumer interest and need.

Case Study: Florida PACE Providers Association

Break-Out Rooms

- What are key policy challenges in your state?
 - Are they perceived challenges? Can you confirm the requirement?
- What are some ways you might advocate to changes to improve the policy?

Discussion

Thank You!