

Program for All-Inclusive Care for the Elderly (PACE)

The Program for All-Inclusive Care for the Elderly is a federally and state funded program that works towards helping the elderly live independently in the community. The goal is to keep them out of long term care for as long as possible. PACE coordinates all-inclusive medical and social services that meet the particular needs of eligible seniors who have remained in the community, but would otherwise need to be in long term care. PACE provides in-home care services in addition to transportation to adult day health care centers where participants can receive medical care, rehabilitative therapies, and social services.

PACE Providers

There are PACE providers located in the following counties: Alameda, Contra Costa, El Dorado, Fresno, Humboldt, Kern, Kings, Los Angeles, Madera, Orange, Placer, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, Santa Clara, Stanislaus, Sutter, Tulare, and Yuba.

Eligibility

In order to be eligible for PACE, the applicant must be at least 55 years old and able to live in the community safely, meeting the level of care requirements determined by the California Department of Health Care Services. The level of care requirements are identical to those needed for skilled nursing care. The applicant must also live in a service area served by the PACE program. (Go to www.dhcs.ca.gov/individuals/Pages/PACEPlans.aspx to view zip codes that are in service areas).

Payment Options

PACE is paid for by Medi-Cal and Medicare. Therefore, if an applicant has Medi-Cal, he/she is automatically eligible for PACE, paying the Share of Cost, if any, that is determined by Medi-Cal. If applicants have Medicare but no Medi-Cal, they can pay for the Medi-Cal portion of the fee privately.

If one spouse needs PACE services and the other spouse does not, it is important to note that the Medi-Cal spousal impoverishment provisions apply, which means that the non-PACE spouse can retain additional assets and income.

Services Provided

Participants of PACE are evaluated and comprehensive health care plans are developed according to individual needs. The following are among the services provided:

Medical Care:

- Primary care from a physician on PACE's interdisciplinary team.
- Specialized care such as audiology, dentistry, optometry, podiatry, and speech therapy.
- Prescription and non-prescription medication and necessary medical equipment.
- Emergency care, nursing home care (if necessary), and hospitalization.

In-Home Care:

- Assistance with daily living needs.
- Light housekeeping.

Adult Day Health Center:

- Rehabilitative services: physical and occupational therapies.
- Meals and nutritional counseling.
- Social services (case management).
- Recreational and social activities.

An interdisciplinary team evaluates the participant and develops a treatment plan involving as many of the above services as possible. Participants cannot pick and choose which services they want to make use of. It is an all-inclusive program addressing various issues that seniors face in their daily lives concerning their health, brain function, social stimulation, and general quality of life. Every aspect works toward the ultimate goal of keeping more seniors living independently in the community.

The “Interdisciplinary Team”

The PACE “interdisciplinary team” usually consists of:

- Primary care physician
- Clinic and home care nurses
- Social workers
- Transportation representatives
- Healthcare workers
- Occupation, physical, speech, and recreational therapists.

All health care services received by the PACE participant are provided exclusively by this team. If the participant needs to be admitted to a hospital or a nursing home, the interdisciplinary team will continue to supervise the treatment and care of the participant.

* PACE can contract with mental health specialists to provide mental health services.

Important: You must use PACE healthcare providers. You cannot keep your own doctor.

PACE and RCFEs

If you are a resident in a Residential Care Facility for the Elderly, you can simultaneously be a participant in PACE. While PACE will not cover the costs of your room and board in the RCFE, it will pay for medical costs. It is a good option for those who are happy living in an RCFE (don't want to move to an SNF) but need additional care and have high medical bills. Since RCFEs do not accept Medi-Cal, PACE can help ease the financial burden of residing in one by absorbing the resident's medical costs.

How to Apply

- PACE is funded by the Medi-Cal program. If you are not currently enrolled in Medi-Cal, you can apply at your local Social Services office.
- Go to the DHCS website (www.dhcs.ca.gov/individuals/Pages/PACEPlans.aspx) to determine whether or not you are in a PACE service area.
- If you are, contact the PACE provider in your area.
- A representative will pay a home visit, giving you thorough information about the plan.

- Tour the PACE site.
- Sign an Enrollment Agreement (lasting regardless of change in health status until death or voluntary/involuntary disenrollment).
- Schedule a medical and social assessment with the interdisciplinary team immediately after enrollment.

California PACE providers

- Visit the DHCS website (www.dhcs.ca.gov/individuals/Pages/PACEPlans.aspx) to determine whether or not you are in a PACE service area, and to view a list of PACE programs by zip code.

PACE Grievance Process

PACE participants can discuss their concerns or dissatisfaction directly with PACE program staff, but they also have the right to appeal any decision related to covered services, including the denial or reduction of services. The PACE program should provide all participants with written information about the grievance and appeals process specific to their program. Contact your PACE program if you did not receive this information. PACE services should also continue during the grievance or appeals process. Some common reasons participants file a grievance include:

- The quality of PACE services
- Wait times to reach staff or be served at the program
- Behavior of program staff or care providers.
- PACE facilities
- Quality of food provided
- Transportation services
- Violations of participant's rights

For information about PACE participant rights, read Medicare's guide on [Your Rights in PACE](#).

If you are covered by Medi-Cal only or by Medi-Cal and Medicare, you are entitled to pursue your grievance with the Department of Health Care Services, by contacting or writing to one of the following departments:

Ombudsman Unit, Medi-Cal Managed Care Division
 Department of Health Care Services
 P.O. Box 997413, Mail Station 4412
 Sacramento, CA 95899-7413
 Telephone: 1-888-452-8609
 TDD/TTY: 1-800-735-2922

PACE Compliance Team
 Department of Health Care Services
iscdcompliance@dhcs.ca.gov
 916-713-8444