

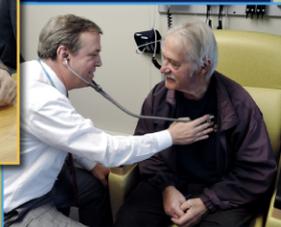
# PACE in New Hampshire

*PACE Provider Role*



# Agenda

- Considerations for Program Design
  - Federal and State Roles and Relationships
  - Provider Goals, History, Local Relationships, and Decisions About How to Invest Program Dollars
- Neighborhood PACE – A Case Studies in Program Development



# Regulatory Relationship – A Provider View

**CMS  
(Central,  
Regional)**

**State (SAA)**

**PACE  
Provider**

Regulation, audit, provider agreements, site and zip code approvals, quality monitoring, Part D

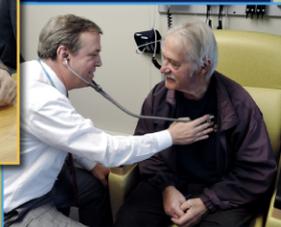
Eligibility, program expansion and site approvals, licensing requirements, Medicaid rates, coordination with other State programs

Operating a program/insurance vehicle consistent with mission, regulatory compliance, and good financial stewardship



# Examples of Governmental Impact on PACE Providers

- CMS Program Impact
  - Reporting requirements
  - Application timeframes
  - Regulatory requirements
    - PACE
    - MA and Other Medicare Providers
    - Part D
- State Impact
  - LTSS Landscape
  - Approach to rate development
  - Budget Management



# Neighborhood PACE

Our Mission remains the same

To enhance and enrich the quality of life for our participants and their caregivers while providing the communities we serve with the best all-inclusive healthcare option for older adults.



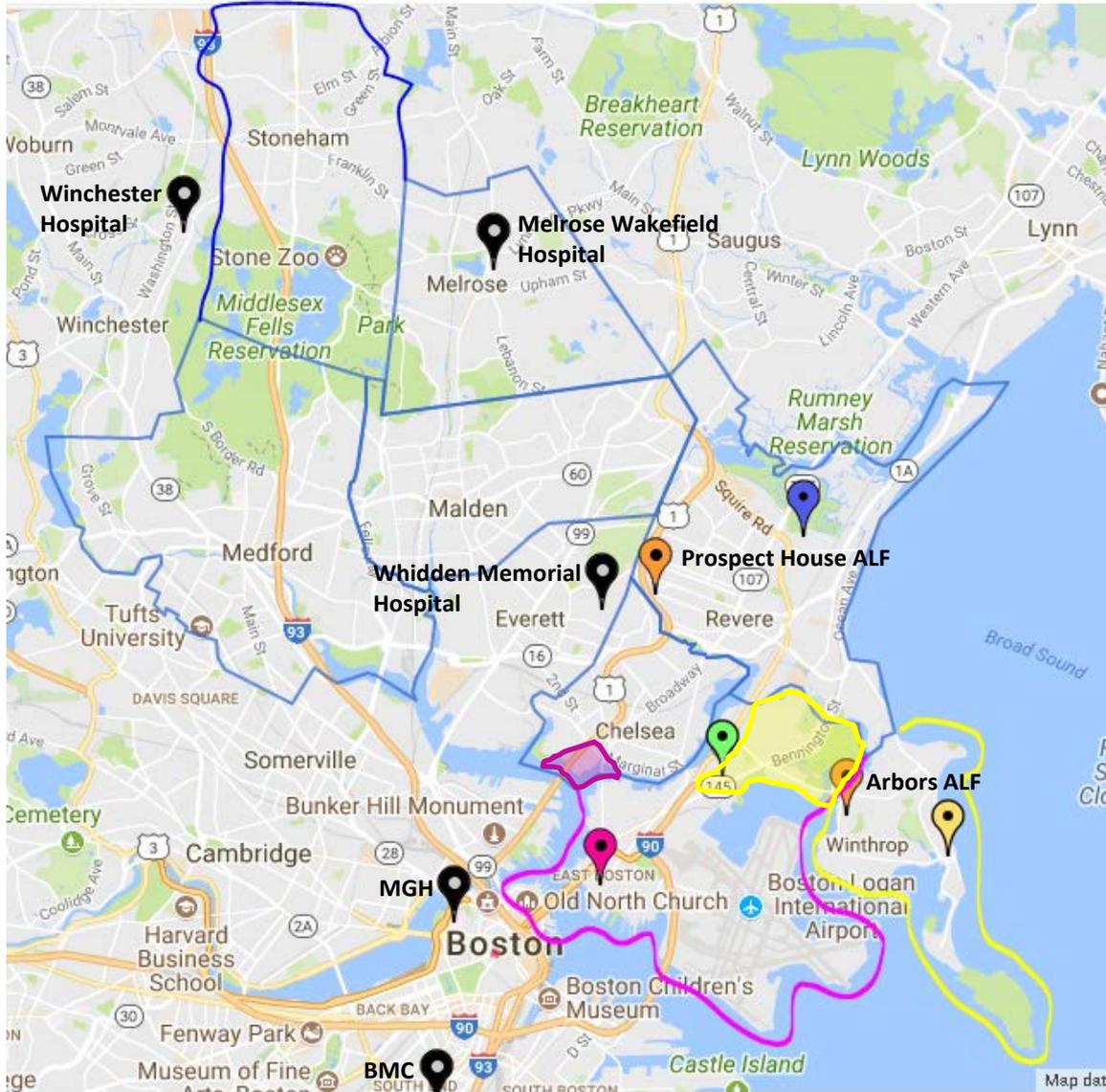
The Right Care at the Right Place:  
A Care Partnership

# Neighborhood PACE

- 1990 – PACE demo opened first site (co-located with elderly **housing**) with 25 participants
- 2003 - Full provider status
- 2018 – 3 PACE Centers, 565 participants, **200+ full and part-time employees** from our local communities



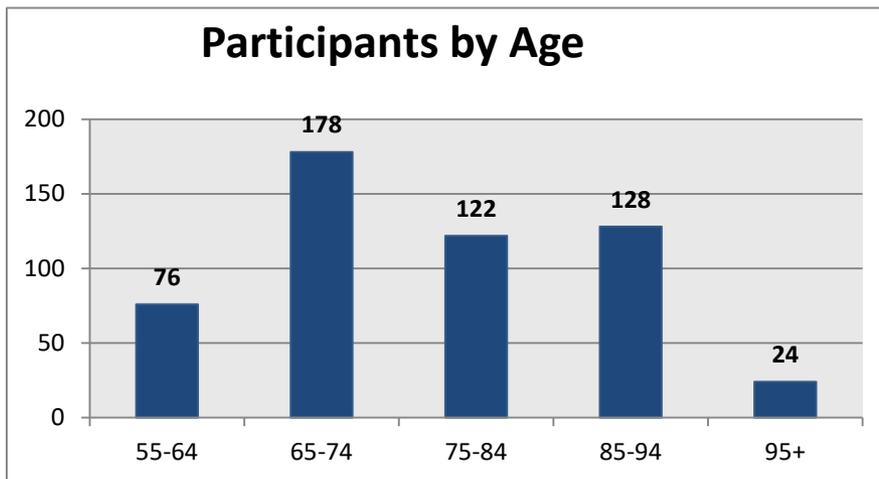
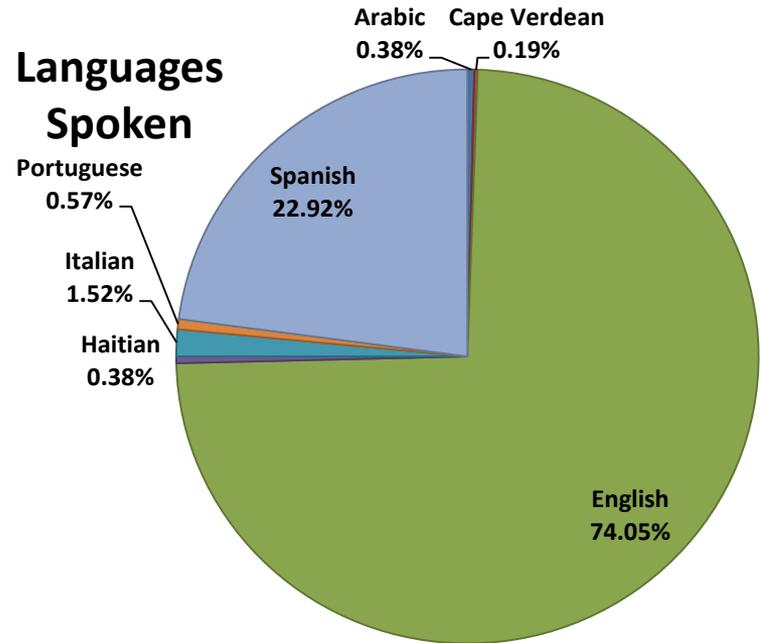
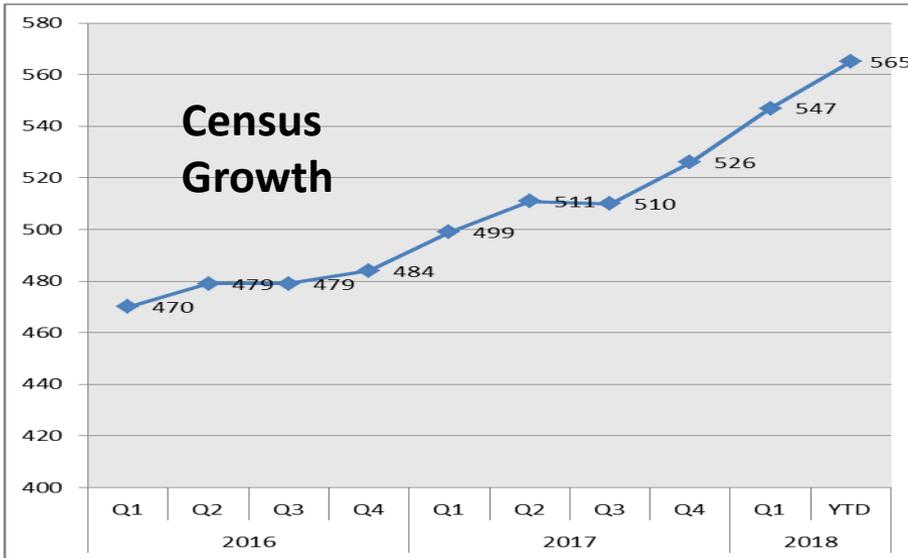
# Neighborhood PACE Contracted Service Area



## Considerations

- Travel time to PACE Center
- Alternative Care Settings
- Over-Lapping Service Areas

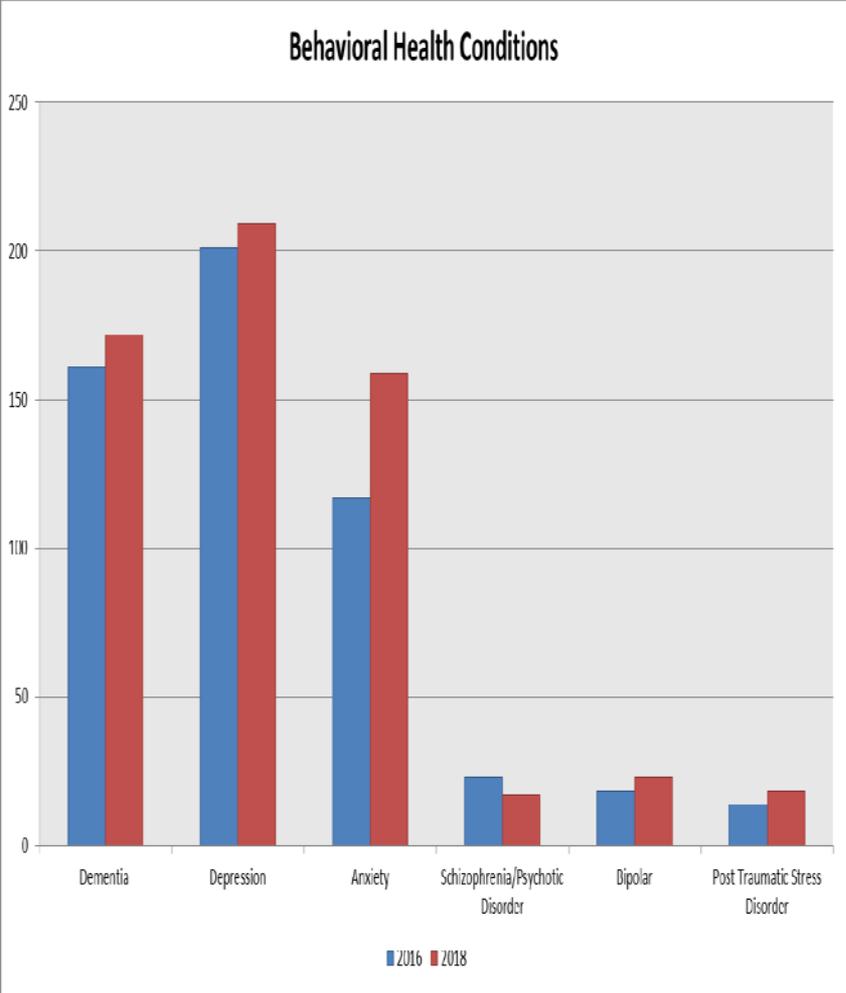
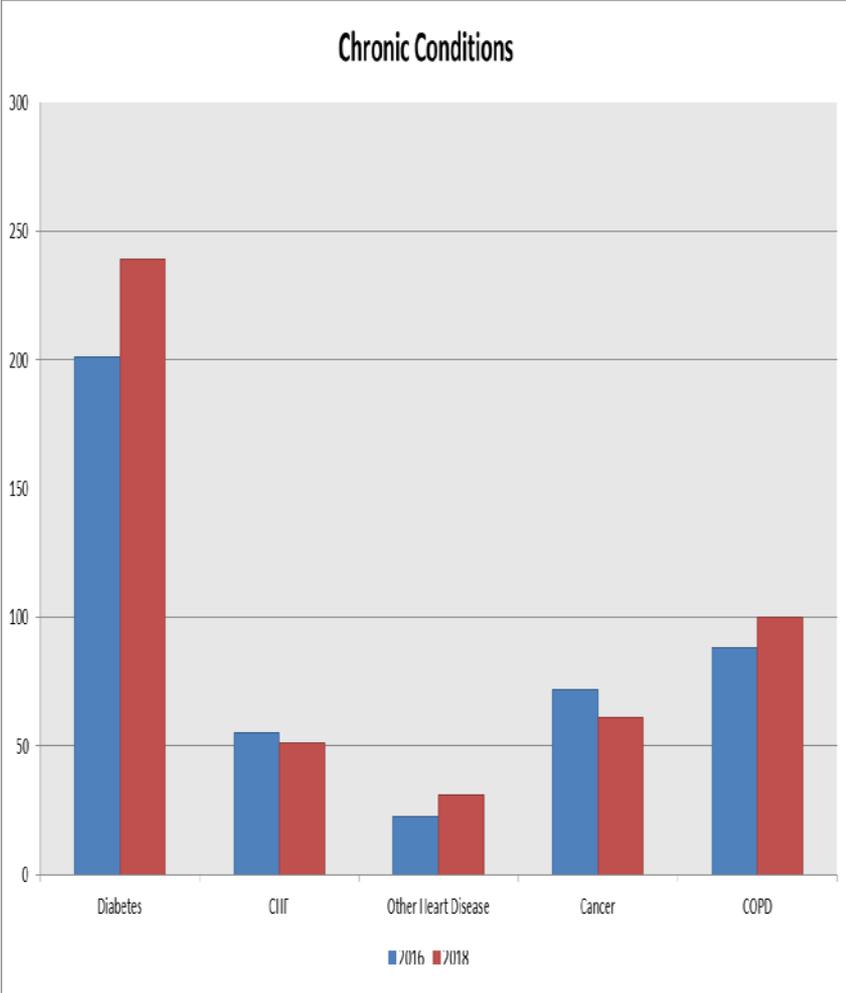
# Participant Profile and Programming Considerations



### Programming Considerations:

- Meals
- Activities and Holidays
- Interpreters
- Medical treatment cultures, e.g. Nurse Practitioners, end of life, alternative treatments

# Participant Profile and Programming Considerations



# Case Example: Transitions of Care

Mrs. S, 85 years old, who lives in PACE Supported Housing, was recently hospitalized for a bout of pneumonia. The PACE hospital-based nurse partner reports that she is fearful about going home.

Transitions of Care Neighborhood PACE options include:

- Transport from hospital to PACE Center for immediate visit with primary care, nursing, and rehabilitation; AND
- Discharge to Home with options to increase: days at PACE site (max of 7), home care nursing visits, evening and overnight health aide visits (any combination);\* OR
- Short stay in PACE transitional housing

\* Different alternatives are available for participants who don't live in PACE Supported Housing



# Case Example: Integrated BH

57 year old man with history of depression, PTSD, chronic pain, and substance abuse disorder who lives with family and prefers not to come to PACE Center regularly.

PACE Neighborhood PACE options include:

- Medication assisted treatment for substance abuse by PACE PCP
- Talk therapy as often as needed by PACE LICSW
- Medication management for depression, PTSD by PACE Psychiatric Clinical Nurse Specialist
- Physical and Alternative therapies (massage, acupuncture, yoga, chronic pain management support group)
- Intensive Outpatient or Inpatient treatment with contracted BH partner facilities



*Keeping Older Adults Healthy and Independent*

# Case Example: Coverage for “Designer Drugs”

70 year old man with Short-Bowel Syndrome with history of frequent hospitalization for IV and other nutritional supports. The participant is treated successfully with Gattex©, a “designer drug” costing about \$36,000 per month. He had no hospitalizations during the course of his drug treatment. The participant has recently experienced some re-emergence of symptoms. The specialist is recommending a second round of treatment. A second treatment course is considered off label (not currently approved by FDA).

How does Neighborhood PACE Organization decide whether to cover the treatment?

- Policy on Approval of Specialty Drugs
  - Clinical Pharmacist researches the participant’s current clinical condition in light of current drug trials and best practices
  - PACE Medical Director in his Health Plan capacity reviews clinical notes, discusses case with specialist and PCP, and issues
  - Ethics Committee Discussions
  - Issue authorization, deny authorization, or develop an alternative plan in discussion with Specialist, Medical Director, PCP, and Clinical Pharmacist





# Thank You/Questions Message



“Jump and you will find out how to unfold your wings as you fall.”

*Ray Bradbury*

“The people are crazy enough to think they can change the world are the ones who do it.”

*Steve Jobs*

“I have the best job in the world. There is something new and different every day. And I get to see those people’s lives transformed.”

*Debra Connor*