



PACE **Program of All-Inclusive Care** **for the Elderly**

Para solicitar este documento en español, comuníquese con Servicios al Afiliado al teléfono 1-800-338-8366, de lunes a viernes desde las 8:00 a.m. hasta las 5:00 p.m.

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What Is PACE?

PACE (Program of All-Inclusive Care for the Elderly) is a program designed for members who meet these requirements:

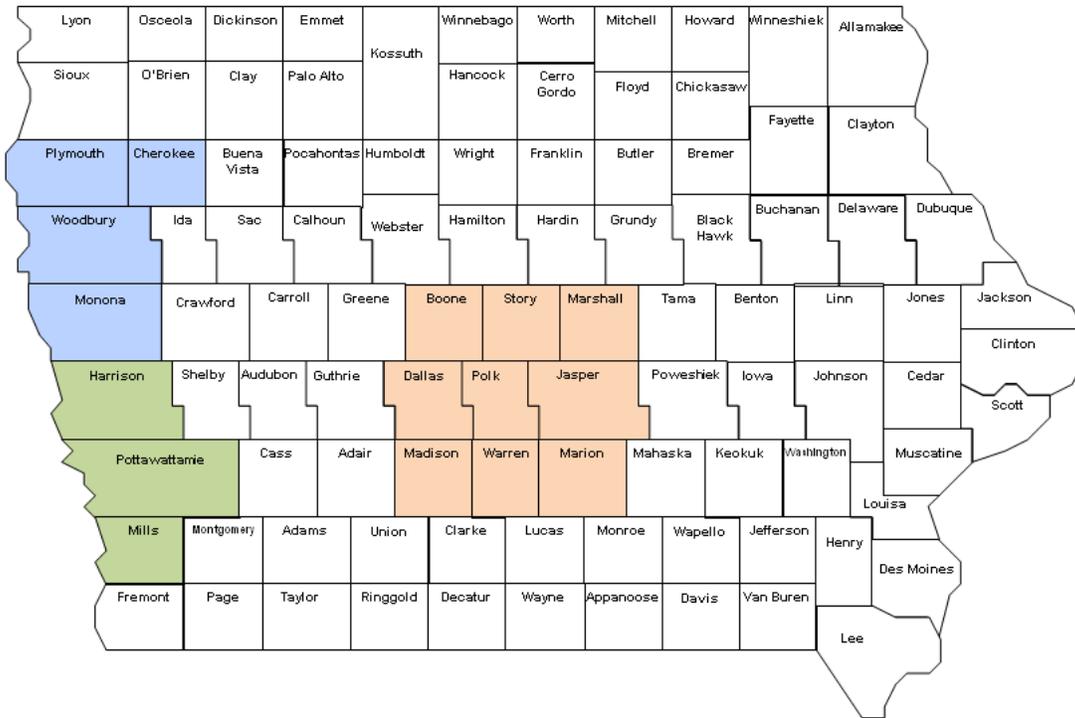
- Are age 55 or older
- Live in select Iowa counties
- Meet a level of care that is equal to nursing facility services because of chronic illnesses or disabilities
- Can live safely in your home with help from PACE services

PACE is an Iowa Medicaid managed care program that will help you to stay in your home and stay as healthy as possible. Inside this booklet, you will find more specific information about Iowa Medicaid Programs of All-Inclusive Care for the Elderly (PACE). Please take a few minutes to review the information.

The PACE physician and medical staff will provide preventive and primary care; but PACE will also provide any other medical care that you may need such as hospitalizations, specialty care, nursing facility care, hospice or emergency care. Besides medical and personal care support, a PACE social worker will help you with non-medical problems; and also coordinate admission and discharge if you need care outside of your home. Transportation is also provided to make sure you can attend your medical appointments and come to the PACE center. You will always be able to contact your PACE provider 24 hours a day, seven days per week.

What Is a PACE Service Area?

Each PACE provider has select counties in which it may provide services. The service area is approved by the Centers for Medicare and Medicaid Services (CMS). On the next page, is an Iowa map that shows the counties in which PACE is provided. There is also a chart that includes contact information for each of the current PACE programs in separate columns. If you are interested in learning more about the PACE program, contact the PACE provider for the county where you live.



PACE Programs in Iowa		
Immanuel Pathways Southwest Iowa	Immanuel Pathways Central Iowa	Siouxland PACE
PACE Center Address: 1702 N. 16 th . Street Council Bluffs, IA 51501	PACE Center Address: 7700 Hickman Road Windsor Heights, IA 50324	PACE Center Address: 1200 Tri View Avenue Sioux City, IA 51103
Telephone: 712-256-7284 TTY: 1-800-537-7697	Telephone: 515-270-5000 TTY: 1-800-537-7697	Telephone: 712-224-7223 Toll Free: 1-888-722-3713 TTY: 712-224-7253
Email: info@immanuelpathways.org	Email: IPinfo@immanuelpathways.org	Email: Sio_Paceinfo@unitypoint.org
Web Address: www.immanuelcommunities.com/pathways	Web Address: www.immanuelcommunities.com/pathways	Web Address: www.unitypoint.org/siouxcity/services-pace.aspx
Counties in service area: Harrison Mills Pottawattamie	Counties in service area: Boone Dallas Jasper Marshall Madison Marion Polk Story Warren	Counties in service area: Cherokee Monona Plymouth Woodbury

How Can I Apply for the PACE Program?

Contact the PACE provider for the county in which you live. A representative will explain the PACE program and the application process to you. The PACE representative can assist you with application information that your DHS income maintenance worker will need to process a Medicaid application, if it is necessary.

Can I Disenroll From the PACE Program?

It is always your choice to stop receiving services from the PACE program at any time. Notify your PACE social worker at your PACE center phone number (see page 2).

What Happens If I Move?

If you move to a new county, notify your PACE social worker at your PACE center phone number (see page 2).

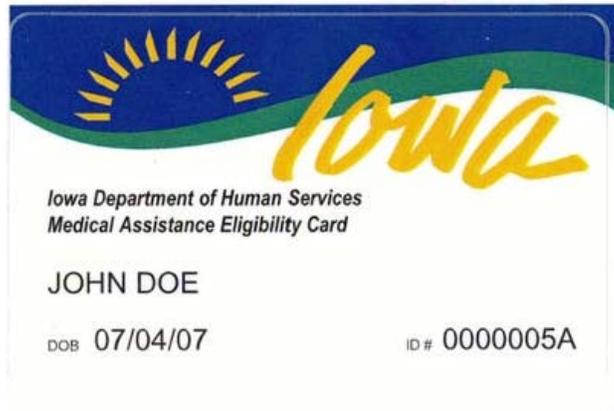
What If I Am Not Medicaid Eligible?

A person who is Medicare eligible may also receive PACE services. If you are interested, contact the PACE provider and a PACE representative will be able to explain how the PACE program works if you are Medicare eligible or both Medicare and Medicaid eligible.

What Is My Iowa Medical Assistance Eligibility Card?

When you are eligible for Medicaid in Iowa, you will receive a Medical Assistance Eligibility Card that identifies you as being a Medicaid member. Each person eligible for Iowa Medicaid will get a Medical Assistance Eligibility Card and two key chain cards.

Your PACE provider will cover your medical needs, including prescriptions, as long as you are enrolled in the PACE program. **You will need your Medical Assistance Eligibility Card for emergencies only. Keep this card with you for this purpose.** Your PACE provider will also give you stickers for your Iowa Medical Assistance Eligibility Card and your two key chain cards. The PACE stickers will include the telephone number of your PACE provider so any follow-up care can be provided to you promptly after your emergency.



A sample of the Medical Assistance Eligibility Card is shown above. Please remember that this card will only be needed for emergencies.

This card will be printed with the following information:

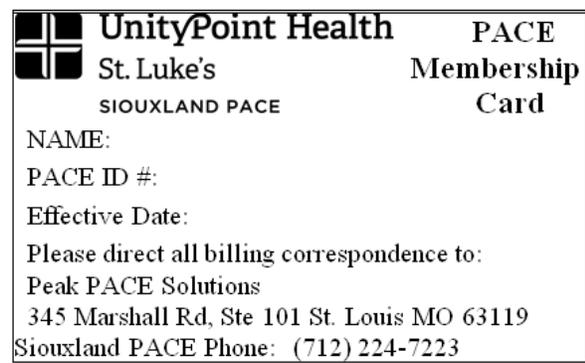
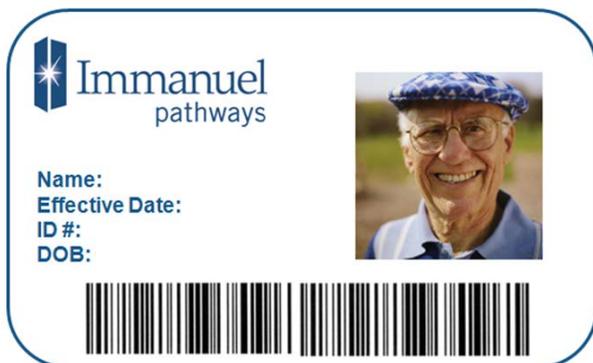
1. Your name, birth date, and your Medicaid personal ID number.
2. Instructions for your provider to determine eligibility and managed care enrollment.
3. The telephone number for the Iowa Medicaid Member Services Call Center on the back side.

The Member Services Call Center is available from 8 a.m. to 5 p.m. at 1-800-338-8366 or 515-256-4606, weekdays from 8 a.m. to 5 p.m.

Your Medical Assistance Eligibility Card should be sent to you within a few days after your application and approval for the PACE program is completed. If you did not get a Medical Assistance Eligibility Card, you can contact Member Services at 1-800-338-8366 or in the Des Moines area at 515-256-4606, weekdays from 8 a.m. to 5 p.m.

Will I Get a PACE Card?

Once you are enrolled in the PACE program, your PACE provider will give you a PACE membership card. The PACE membership card will have the PACE provider's telephone number on it. Samples of PACE cards are shown below:

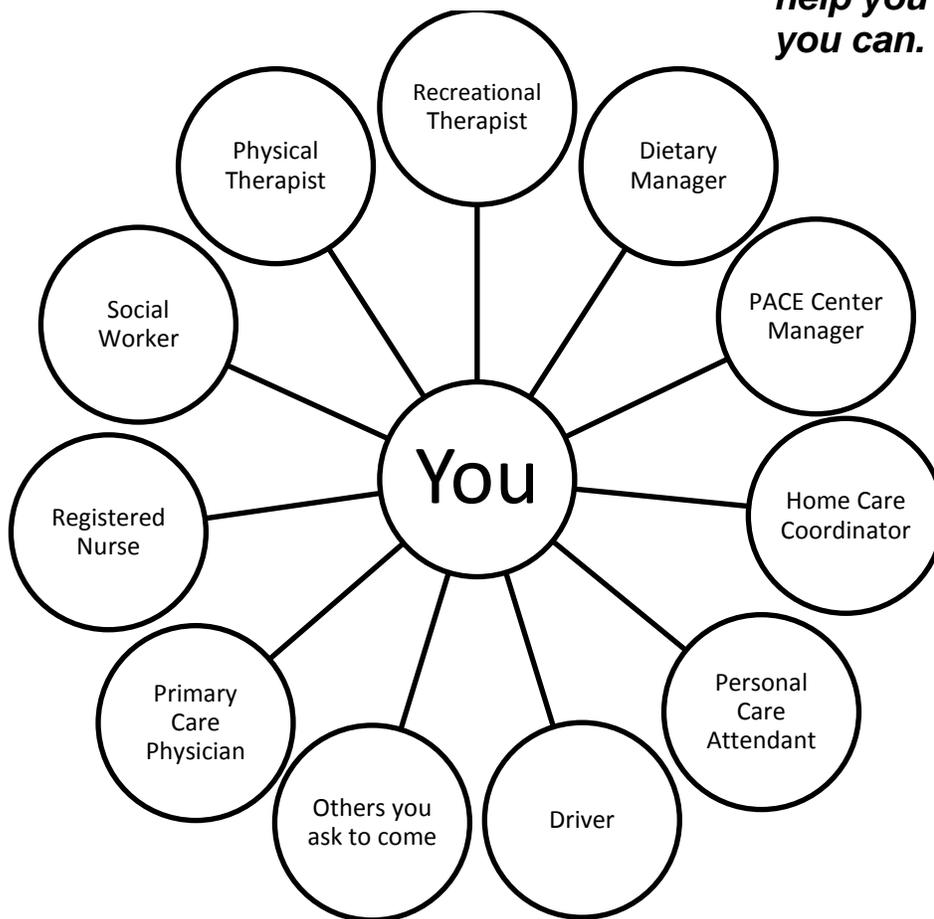


Be sure to keep your PACE membership card and your Iowa Medical Assistance Eligibility Card safe but easily available. Your PACE card will be needed for all other PACE services when an insurance card is needed. This excludes emergency services. All services will be authorized by your PACE interdisciplinary team (IDT). PACE will schedule appointments for you and schedule transportation to your appointments, if needed.

How Do I Get Care?

You will have a medical home when you are enrolled with the PACE program. You will be part of a professional team, also known as your interdisciplinary team (IDT), that will coordinate and ensure that your entire medical and, if necessary, long-term care needs are met for as long as you are enrolled with the PACE program. Depending on the needs that you have, there may be more professionals involved. Your PACE professional team or IDT works to help you stay as healthy as you can.

Your PACE team works to help you stay as healthy as you can.



What Is a PACE Center?

Each PACE provider must have at least one PACE center in their service area. The PACE center includes a number of supports that may be of assistance to you. To maintain your best health, the PACE center includes a medical clinic that includes physician and nursing services. Some of the other supports that must be available in the PACE center, if you need them, are physical therapy, occupational therapy, speech therapy, personal care, nutritional counseling, recreational therapy, social activities and meals. Other medically necessary services, identified by you and your team, that cannot be provided at the PACE center or in your home, will be coordinated for you by the PACE provider.

What Services Will be Covered by PACE?

Services include, but are not limited to the following:

Services Available at the PACE Center	Other PACE Benefits
<ul style="list-style-type: none">• Meals• Nutritional counseling• Personal care services• Physical therapy, occupational therapy, and other restorative therapies• Primary medical care (including physician and nursing services)• Recreational therapy and social activities• Social work services• Transportation• Prescription drugs	<ul style="list-style-type: none">• Ambulance services• Audiology services• Dental services• Home health services• Hospice services• Inpatient hospital services• Laboratory and X-ray services• Medical equipment and supplies• Nursing facility services• Optometric services• Outpatient hospital services• Palliative care services• Podiatry services

What If I Don't Live Near the PACE Center?

If you do not live near the PACE Center you have the option to:

- Receive services in your community,
- Receive transportation to the PACE center from the PACE provider,
- Receive services from PACE providers that come to your home, or
- Agree on another option that works for you and your PACE team.

What If I Need Emergency Care?

Emergent Care

An emergency is any condition that places your life in danger or causes permanent disability if not treated immediately.

If you have a serious or disabling emergency, call 911, go directly to the nearest hospital emergency room, or call an ambulance. Bring your Iowa Medicaid card. **You do not need to call your PACE provider first.** However, call, or ask someone to call, your PACE provider as soon as possible to let the PACE staff know that you needed emergency care. Your PACE provider will assist you with any follow-up care that you need. The following are examples of emergencies:

- A serious accident
- Poisoning
- Heart attack
- Stroke
- Severe bleeding
- Severe burns
- Severe shortness of breath

Follow-Up Care After an Emergency

You must contact your PACE provider for all follow-up care. Do not return to the emergency room for follow-up care. Your PACE provider will either provide or authorize this care for you. Please remember that you will need to pay for services that are not authorized by your PACE IDT.

Urgent Care

Urgent care is when you are not in a life threatening or a permanently disabling situation and have time to call your PACE provider.

You must call your PACE provider if you have an urgent care situation.

Some examples of urgent care are:

- Fever
- Stomach pain
- Ear aches

What Are My Rights and Responsibilities?

My Rights

- I have the right to be treated with respect.
- I have the right to be protected against discrimination.
- I have the right to information and assistance.
- I have the right to choice of providers.
- I have the right to emergency services.
- I have the right to confidentiality.
- I have the right to make treatment decisions.
- I have the right to file grievances and appeals.
- I have the right to disenroll from the PACE program.

Your PACE provider will provide you with a copy of your rights and discuss them with you.

My Responsibilities

- I need to communicate with my PACE provider regarding my needs, any changes in my care, and my choices.
- I need to understand that all medically necessary services are provided through my PACE provider.
- I need to understand that any unauthorized services (**except emergency care**) will be my financial responsibility.
- I need to contact my PACE provider if I received emergency care.
- I need to contact my PACE provider if I am going to move out of the PACE service area.

What Is Estate Recovery?

Estate Recovery Legal reference: 441 IAC 75.28(7)

The cost of medical assistance is subject to recovery from the estate of certain Medicaid members. Members affected by the estate recovery policy are those who:

- Are 55 years of age or older, regardless of where they are living; or
- Are under age 55 and:
 - Reside in a nursing facility, an intermediate care facility for persons with an intellectual disability, or a mental health institute, and
 - Cannot reasonably be expected to be discharged and return home

What Is a PACE Provider Grievance?

A grievance is a complaint. It means that you are unhappy with how PACE services are provided to you; or you are unhappy with the quality of care that you are receiving from PACE. A grievance or complaint can be given to PACE staff in writing or just verbally. It could be a small concern that, most likely, can be corrected pretty easily such as “It is too cold in here.” A grievance could also be something that is more serious or complicated such as “The PACE staff did not come to my home to help me today.”

Any kind of grievance or complaint that you have must be documented and resolved. Your PACE provider must discuss the specific steps that will be taken to resolve the grievance or complaint with you. The steps will include timelines for response. This must be given to you in writing.

If you feel that the PACE provider is not trying to work with you to resolve your complaint, you may contact the Iowa Medicaid Member Services Call Center at 1-800-338-8366 toll free or 515-256-4606 in the Des Moines area. Member Services will record and send your concern to the PACE team who will contact you.

What Is a PACE Provider Appeal?

You can file an appeal if you don't agree with the PACE provider's decision to reduce a service, deny a service; or terminate a service that you receive or would like to receive through the PACE program.

Your PACE provider must give you written information on how to file an appeal and what steps the PACE provider will take to address your appeal.

If the PACE provider does not agree with you, you must receive a written decision within three days from PACE and a chance to give your side of the story in person or in writing.

If PACE still does not agree with you, you can choose to file a DHS appeal. A DHS appeal hearing will be held by telephone with an administrative law judge. You will present your side of the disagreement and the PACE provider will, also, present its side. The administrative law judge will write a decision. You may have family or friends help you with your appeal. You may also contact the Office of Long Term Care Ombudsman or legal services for assistance.

What Is a DHS Appeal?

A DHS **appeal means you are** asking for a hearing because you do not like a decision the Department of Human Services (DHS) makes. Generally, there are two common DHS decisions with which you may disagree:

- Denial of your Medicaid eligibility for the PACE program. This would be related to financial income requirements that a DHS income maintenance worker would make.
- Denial of the nursing facility (NF) level of care.

A DHS appeal is different than a PACE provider appeal. For information about a PACE provider appeal see the section called "What is a PACE Provider Appeal?"

You have the right to file an appeal if you disagree with a DHS decision. You do not have to pay to file an appeal. [441 Iowa Administrative Code Chapter 7]

How do I appeal?

Filing a DHS appeal is easy. You can appeal in person, by telephone, or in writing for the PACE program. To appeal, do one of the following:

- Complete an appeal electronically at <https://dhssecure.dhs.state.ia.us/forms/>, **or**
- Write a letter telling us why you think a decision is wrong, **or**
- Fill out an Appeal and Request for Hearing form. You can get this form at your county DHS office or from your PACE social worker.

Send or take your appeal to the Department of Human Services, Appeals Section, 5th Floor, 1305 E Walnut Street, Des Moines, Iowa 50319-0114. If you need help filing an appeal, ask your county DHS office or your PACE social worker.

How long do I have to appeal?

You have 90 calendar days to file an appeal from the date of a decision.

If you file an appeal 90 days after the date of a decision, we cannot give you a hearing.

Can I continue to receive PACE services while I am waiting for my hearing?

You may keep your PACE services until your appeal is final or through the end of your Medicaid certification period if you file an appeal:

- Within 10 calendar days of the date the notice is received. A notice is considered to be received 5 calendar days after the date on the notice, or
- Before the date a decision goes into effect.

Any services you receive while your appeal is being decided may have to be paid back if you lose your appeal.

How will I know if I get a hearing?

You will get a hearing notice that tells you the date and time a telephone hearing is scheduled. You will get a letter telling you if you do not get a hearing. This letter will tell you why you did not get a hearing. It will also explain what you can do if you disagree with the decision to not give you a hearing.

Can I have someone else help me in the hearing?

You or someone else, such as a friend or relative, can explain in writing why you disagree with the Department's decision.

You may also have a lawyer help you, but the Department will not pay for one.

Your county DHS office or your PACE social worker can also give you information about legal services.

What If I Believe That I Have Been the Victim of Discrimination or Harassment?

It is the policy of the Iowa Department of Human Services (DHS) to provide equal treatment in employment and provision of services to applicants, employees, and clients without regard to race, color, national origin, sex, sexual orientation, gender identity, religion, age, disability, political belief or veteran status.

If you feel DHS has discriminated against or harassed you, please send a letter detailing your complaint to:

Iowa Department of Human Services, Hoover Building, 5th Floor – Bureau of Policy Coordination, 1305 E Walnut, Des Moines IA 50319-0114 or via email contactdhs@dhs.state.ia.us

Important Contact Information

Write the contact information of your PACE provider below along with any other important information that you may need. Then keep this book in a place that you will remember.

PACE Provider:	
Emergency:	911
DHS Income Maintenance Office:	

Iowa Medicaid Member Services Call Center	
Telephone:	1-800-338-8366 or 515-256-4606
Address:	PO Box 36510 Des Moines, IA 50315
Web site:	http://dhs.iowa.gov/ime/members
Email:	IMEMemberServices@dhs.state.ia.us