PACE Education



Your home. Your care. Your pace.

 PACE program within the Immanuel organization and centered on the belief that:



It is better for the well-being of seniors with chronic care needs to be served in their homes and communities whenever possible,



What is PACE[®]?

Program of All-inclusive Care for the Elderly







Who does PACE® serve?

- 55+ years of age living in a PACE® service area
- Assessed to meet nursing facility level of care
- Able to live safely in the community with the services of the PACE®
- Most participants are eligible for Medicare & Medicaid











In the PACE® Model

- Participants receive all health and social services through the PACE® organization
- 24 hours a day, 7 days a week, 365 days a year
- The services follow the participant across all care settings
- home o assisted living o hospital o nursing home o back home again
- An interdisciplinary team, including physicians, provides and coordinates all services for the participant

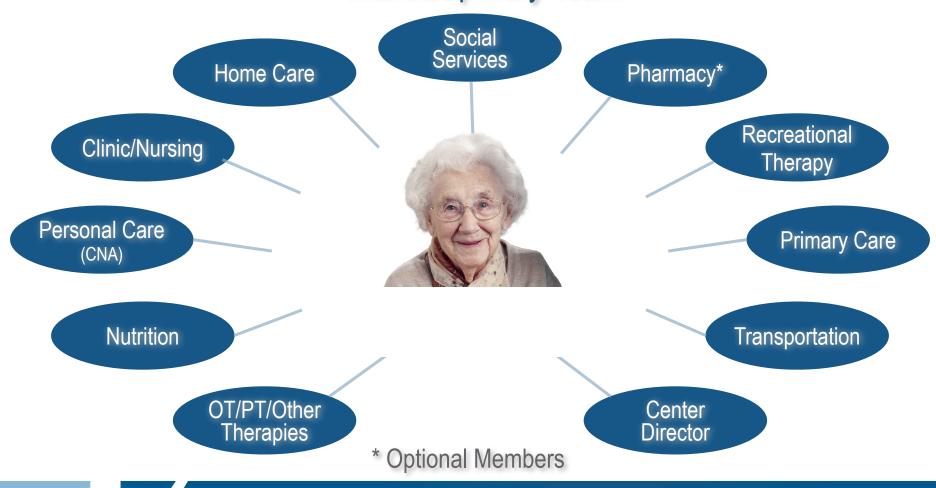


PACE® Reimbursement

- PACE® receives capitated monthly amounts from Medicare and Medicaid to provide *all* medical services to participants
- PACE® is a full risk model if costs exceed capitated amounts, Immanuel Pathways cannot recoup funds from participants, Medicare, or Medicaid
- Although PACE® must provide all services Medicare and Medicaid provide, we have the ability to provide so much more. PACE® is proactive and preventative providing a "common sense" approach to senior healthcare.



Integrated Team, Coordinated Care Interdisciplinary Team





PACE[®] Center Provides

- Primary Care
- PT/OT
- Medical Transportation
- Home Care
- Prescriptions
- Participant Day Center
- Nutritional Services
- Social Services
- Spiritual Care
- Recreational Therapy
- Caregiver Support





Other PACE® Provided Services

- Medical Specialist Services
- Dental Care
- Eye Care
- Audiology Services
- Hospital Services
- SNF rehabilitation
- Assisted Living
- Medical Equipment
- Over the counter products that are related to health issues
- Meal Services
- And More!









PACE® Approach to Health Care



- Proactive/preventative
- Predictable health care costs
 (Medicare capitation rates are 42-46% lower than estimates of fee-for-service expenditures.)
- Careful coordination of health care



Key Features of PACE®

FLEXIBILITY

• PACE® organizations have the ability to provide services to participants as they need them and not according to Fee-for-Service schedules

ALL-INCLUSIVE CARE

• PACE® organizations fully integrate all Medicare and Medicaid services into one program for at-risk older adults rather than the fragmented Fee-for-Service system

INTERDISCIPLINARY CARE

• The principal care management mechanism in PACE® is the interdisciplinary team which directly provides and coordinates all care for the individual



On Average PACE® Participants...

- have better overall satisfaction rates, with a perceived overall better quality of life.
- have better coordinated access to much needed healthcare and services.
- spend 75% less time (# of days) in hospitals (when admitted).
- spend 21% less time (# of days) in nursing homes (when admitted).
- live 1.3 years longer

www.npaonline.org

http://www.census.gov/compendia/statab/cats/health_nutrition/health_care_utilization.html http://www.npaonline.org/website/download.asp?id=1933&title=CMS: Impact_of_PACE_on_Participant_Outcomes



Benefits of being In-Network PACE ® Providers

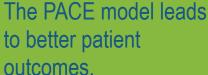
- Timely payment without all the difficulty or red tape other insurance companies can come with.
- If we authorize a service, we pay for that service - to include traditional and holistic care.
- Coordination of care for PACE® participants is very efficient.
- Local provider relations staff enable an open and responsive partnership



The reimbursement is consistent and the people at the PACE centers are easy to work with.











Authorizations and Claims





Item or Service Authorizations

- We ask that all services be <u>pre-approved</u> by Immanuel Pathways prior to the appointment.
- Pre-approval is easy---using the phone number listed on the back of the participant's identification card, call the Immanuel Pathways Center clinic for eligibility and to obtain an authorization number for the service.

PACE Iowa



Name: CASE TEST Effective Date: 08/01/2017

ID#: 99399

Group ID #: IPPIA



Payer ID #: 53534

Group ID #: IPPIA

Prior Authorizations are required for all services. Unauthorized non-emergency services will not be paid by Immanuel Pathways. Only Emergency Services may be provided without prior authorization; however notice must be provided to Immanuel Pathways within 24 hours. In an emergency call 911 or go to the nearest emergency room. Note: This card does not guarantee coverage.

Mail Claims to: 1044 North 115th Street, Suite 500 Omaha, NE 68154

Participant Services: 712-256-7223

Claims: 402-829-3293



Clinic Follow-Up

- We make scheduling follow-up appointments simple. Send provider recommendations for follow up, procedures, medications, etc., to Immanuel Pathways via clinic fax and Immanuel Pathways will ensure follow-up steps are taken.
- The Immanuel Pathways center will work with your office and the participant to schedule follow up and referral appointments based on provider recommendations.



Submitting Claims

- Because there are no patient responsibilities, co-payments, or deductibles for PACE® participants—no statements or bills need to be sent to either the participant or submitted to Medicare or Medicaid.
- We do ask that claims to be submitted on standard CMS UB-04 or CMS 1500 form:
 - Unique authorization number listed on the claim
 - Appropriate CPT/HCPCS and modifier (if necessary)
 - Diagnosis code(s) provided
- Claims will be denied for missing medical records and authorization numbers.



Claims Information

- Immanuel Pathways requests that all claims be submitted electronically, if possible.
- Claims must be submitted within one hundred eighty (180) days of date of service. Claims submitted after the one hundred eighty (180) day period, will be denied for timely filing.
- Immanuel Pathways will pay claims within thirty (30) days of receipt of a clean claim.
- Claims Inquiries: (402) 829-3293 PACEClaims@Immanuel.com



Medical Records

- Medical records and therapy notes must be submitted to Immanuel
 Pathways at <u>SWI-PACEMedicalRecords@immanuel.com</u> / <u>IPO-PACEMedicalrecords@Immanuel.com</u> within seven (7) days of a routine consultation.
- For urgent consultations, a verbal report will be provided same day with the written documentation provided within seven (7) days. Your claim will be denied if documentation is missing.
- If your claim has been denied for any reason, you must resubmit a claim to receive payment.



PACE® Contracted Provider Obligations

- Our PACE® program is regularly audited by CMS and during that audit, CMS may request personnel records from you.
- If CMS does request these records from your organization, our Provider Network Manager will reach out to you at that time to request the necessary information for submission to CMS on your behalf. CMS may request documentation that the following were completed prior to your employees' initial contact with our participants:
 - OIG Exclusion check
 - Background check
 - Competency evaluations
 - Current and unrestricted licenses, certificates, permits, registrations and other authority needed under state or federal law to provide services
 - Employees are free of communicable diseases and up-to-date with immunizations before performing patient care responsibilities



Pathways Video





PACE® Contracted Providers

We look to partner with providers who can assist Immanuel Pathways PACE® and our participants in the goal of staying in their home with their chronic health care needs. This is the mission of our program and with strong network providers like you, the PACE® program can remain an important resource in the community.

