

**Program of All Inclusive Care for the Elderly (PACE)  
Policy and Procedure for  
Deemed Continued Eligibility**

**I. Requirement**

§ 42 CFR 460.160 (b) (2)

*If the State administering agency determines that a PACE participant no longer meets the State Medicaid nursing facility level of care requirements, the participant may be deemed to continue to be eligible for the PACE program until the next annual reevaluation, if, in the absence of continued coverage under this program, the participant reasonably would be expected to meet the nursing facility level of care requirement within the next 6 months.*

**II. Policy**

Upon annual reassessment, if the Louisiana Office of Aging and Adult Services (OAAS) determines that a PACE participant no longer meets the nursing facility level of care eligibility criteria, the participant may be deemed to continue to be eligible for PACE services until the next annual reassessment.

The PACE provider may request “deemed continued eligibility” within five (5) business days from the date of the OAAS Level of Care (LOC) ineligibility determination notification. The request for continued deemed eligibility status must be based on the following criteria:

- a. Upon annual reassessment, the participant no longer meets the nursing facility level of care eligibility criteria, **and**;
- b. He/she would reasonably be expected to become eligible within the next six (6) months in the absence of continued coverage under the program, **and**;
- c. The participant’s medical record and plan of care support deemed continued eligibility.

**Prior to requesting deemed continued eligibility, it is critical that the PACE provider follow all OAAS policies and procedures related to the annual reassessment and Level of Care review process.**

As part of the decision making process, OAAS may request an onsite visit to meet with the participant, conduct its own level of care assessment, and/or to request additional supporting information.

### III. Procedure

The procedure noted below will be followed by the PACE provider and OAAS:

#### A. PACE Provider Responsibilities:

1. Within five (5) business days of notification of a PACE participant not having met nursing facility level of care eligibility criteria, the PACE provider will submit a request for deemed continued eligibility to the OAAS Regional Office on form **OAAS-PF-13-009**.
2. The PACE Interdisciplinary Team (IDT) will provide a brief **Justification Summary Statement** that includes the reason(s) why, *in the absence of continued coverage under PACE program, the participant reasonably would be expected to meet the nursing facility level of care eligibility requirement within the next six (6) months.*
3. Supporting documentation from the participant's medical record, and/or Plan of Care (POC) must be included to support the **Justification Summary Statement**. Supporting documentation includes any information that clearly demonstrates that in the absence of PACE services, the participant would reasonably be expected to experience a decline in functioning or health, to the degree that he/she would meet the nursing facility level of care criteria within the next six (6) months. Examples of **supporting documentation** may include, but is not limited to:
  - a. Diagnosis of a chronic, and/or disabling condition;
  - b. Physician and/or nursing progress notes documenting the treatment and impact of same on chronic, and/or disabling condition(s);
  - c. List of services currently provided to the participant (e.g., PT, OT, dietary management, blood pressure checks, etc.);
  - d. Frequency of medical appointments, and/or frequency of medical treatments/interventions for unstable or fragile medical conditions that require treatment, and/or monitoring to prevent/avoid complications.
4. A copy of the participant's Plan of Care (POC) must accompany the Request for Deemed Continued Eligibility.

5. Once the OAAS Regional Office receives and reviews the request and supporting documentation, including the participant's POC, they may determine that additional supporting documentation is needed from the PACE provider before a final determination can be reached. **If this occurs, the PACE provider must submit the requested information no later than five (5) business days from the date of receipt of OAAS' request.** If OAAS does not receive the requested information by the required timeline, the OAAS will proceed with the denial process.
6. If OAAS approves the PACE provider's request for continued eligibility status, PACE will continue to conduct annual reassessments for level of care determination, and may request deemed continued eligibility each year, as applicable.

**B. Responsibilities of OAAS Regional Office (RO) Staff**

1. OAAS RO staff will:
  - a. review the submitted request for deemed continued eligibility **Justification Summary Statement** and supporting documentation;
  - b. determine if the submitted **Justification Summary Statement** and supporting documentation is adequate;
  - c. determine if an on-site visit is warranted;
  - d. determine if the participant has a need that requires the services rendered at the PACE center;
  - e. determine if participant's health status is unstable, chronic, and/or disabling;
  - f. determine if participant's current health status is maintained, at least partially, because of the services PACE currently provides; and
  - g. Determine if the participant's health and/or functional status are likely to decline over the next six (6) months without PACE services.
2. OAAS RO staff will respond within ten (10) business days from receipt of an adequate *Request for Deemed Continued Eligibility* form (**OAAS-PF-13-009**), supporting documentation, and participant's POC.
3. If OAAS RO determines that the participant meets deemed continued eligibility criteria, the PACE provider and PACE participant will be notified in writing by the OAAS Regional

Office (OAAS notifies provider via *Deemed Continued Eligibility Form – OAAS-PF-13-009*), and enrollment in PACE continues until the next annual reassessment.

4. The OAAS RO will make a notation in the **Notebook** of the applicable MDS-HC assessment, located in the OAAS assessment database, that states the following:

**Deemed Continued Eligibility criteria met on \_\_\_\_\_  
(date goes in blank space) for continuation of PACE  
program services until next annual reassessment.**

5. If the OAAS RO staff determines that the participant does not meet deemed continued eligibility, a denial notice and appeal rights will be issued to the participant. A copy of the denial notice will be sent to the PACE provider.
6. The OAAS RO will make a notation in the **Notebook** of the applicable MDS-HC assessment, located in the OAAS assessment database, that states the following:

**Request for Deemed Continued Eligibility and  
supporting documentation reviewed by OAAS. Criteria  
for deemed continued eligibility not met on \_\_\_\_\_  
(date goes in blank space) for continuation of PACE  
program services.** (Include all actions on the part of OAAS  
in making this determination, e.g., on-site visit to meet with  
PACE participant/staff, follow up telephone  
conversations/emails requesting more info., etc.)

7. If the participant files an appeal on or before the date of the proposed adverse action, PACE services shall continue until the Division of Administrative Law (DAL) renders a decision. OAAS staff will notify the PACE provider via email message to continue services until the appeal is heard and a decision is rendered.
8. If a timely appeal is not filed, services will be terminated effective at the end of the month in which the denial notice was issued.