



Request for Information (RFI)
New York State Department of Health
Division of Long Term Care
for
PACE MODEL EXPANSION

PACE RFI # 1

The New York State (NYS) Department of Health (DOH) hereby issues this “Request for Information” (RFI) to solicit suggestions about the Programs of All-inclusive Care for the Elderly (PACE) model of services and supports. Through this RFI the NYS DOH is seeking to explore strategies and concepts to enhance and expand this unique, alternative approach for providing Long Term Services and Supports (LTSS).

1. BACKGROUND

Both NYS and the Centers for Medicare and Medicaid Services (CMS) have policy goals designed to offer and provide community-based long-term services and supports as an alternative to institutional care and to improve access to non-institutionally based LTSS. NYS has implemented a variety of initiatives to increase the access to and the capacity for serving individuals in the community and to eliminate barriers to community-based LTSS. A key feature of some of these initiatives is the integration of benefits and services, and the PACE program clearly fits this model.

NYS remains committed to rebalancing and reforming the LTSS delivery system. To date, some of the most successful approaches have come from encouraging providers and stakeholders to take a dynamic role in creating service solutions that have a lasting impact on regional LTSS delivery systems. Providers have been invited to share their expertise and challenged to “think differently” about how to best address barriers in transitioning from institutional to community-based settings, or assisting individuals to remain living within their communities.

2. CURRENT ENVIRONMENT

Reports and research demonstrate that as people age it is their desire to receive medical services and assistance with their needs in their own homes and communities. There is considerable data suggesting that it is often more efficient and effective to provide such services in these settings.

The PACE model has been identified as an approach to LTSS that closely reflects many of the key aspects and objectives of the Balancing Incentive Program (BIP), the MRT Initiatives and the Olmstead Decision. PACE is a federal managed care model that includes LTSS as well as acute care and physician services. PACE programs receive a capitated payment for both Medicare and Medicaid. The PACE model revolves around an interdisciplinary care management team that works to provide social and medical services primarily at a PACE center

which includes clinic and day services. PACE targets frail and impaired elders. Enrollees must be 55 years old or older, live in the service area of a PACE organization, need a nursing home-level of care (as certified by each state) and be able to live safely in the community with help from PACE. The PACE program is also available to Medicare beneficiaries that are not Medicaid eligible and choose to pay the Medicaid portion of the premium. As of January 1, 2016, there are eight (8) PACE plans operating in NYS serving 5,464 enrollees.

On November 5, 2015, President Obama signed the PACE Innovation Act (the Act) which amends Public Law 114-85 Section 1, regulating PACE programs. This change authorizes the Secretary of Health and Human Services (HHS) to waive requirements under section 1934 of the Social Security Act to design and test new models. As a result CMS allows providers and other entities not currently PACE providers to consider adapting the model to serve new populations in innovative ways. The Act creates opportunity for these new populations previously not qualified for PACE programs to be served by this model. In addition, in June of 2015 CMS used its waiver authority to allow for-profit entities to operate PACE demonstration programs.

Responses to this RFI will help the DOH to develop a comprehensive analysis of the impact of PACE on LTSS in NYS and develop possible strategies to expand the current PACE model. One barrier may be the lack of general information about the PACE model and this initiative is also seeking input about how to better educate the public, both currently eligible and possible new populations, on the value of PACE.

3. CONTENT / INFORMATION REQUESTED

3.1 General

- 3.1.1 This RFI seeks input from all interested parties, including, but not limited to:
1. Organizations that have experience providing PACE model services;
 2. Organizations that are interested in becoming PACE model service providers;
 3. Individuals receiving PACE model services;
 4. Individuals interested in receiving PACE model level of care and services;
 5. DSRIP Performing Provider System Leads;
 6. Family members and caregivers of individuals receiving PACE model services; and
 7. Family members and caregivers of individuals interested in receiving PACE model services.
- 3.1.2 DOH will use the information submitted at its discretion and is under no obligation to provide comment, acknowledgement or feedback to any respondent's submission. This RFI is for planning purposes only and should not be construed as a solicitation or obligation on the part of the NYSDOH.
- 3.1.3 No proprietary, classified, confidential or sensitive information should be included in any response.
- 3.1.4 DOH reserves the right to use any information submitted for this or resultant solicitation(s).

3.2 Structure/Instructions/Requirements

- 3.2.1 Please provide responses using the template provided in Attachment A – Response PACE RFI Request for Information questionnaire.

4. GENERAL TERMS

- 4.1 DOH may contact respondents directly to discuss input and/or seek further clarification.
- 4.2 This is not a solicitation for Proposals. Information gathered from responses to this RFI may be used by the NYS DOH at an unspecified future time to develop a potential procurement.
- 4.3 All responses are non-binding and will be used for information purposes only.
- 4.4 The NYS DOH is under no obligation to use any information or material submitted in response to this RFI.
- 4.5 This RFI is issued solely for information gathering purposes and does not constitute a procurement or solicitation.
- 4.6 Responses to this RFI, about overall PACE model design and services, are not related to nor preclude respondent participation in any future funding opportunity.
- 4.7 This RFI is available on Thursday, February 18. Completed questionnaires are requested by Monday, April 29, 2016 and should be sent to BIP@health.ny.gov.
- 4.8 Reimbursement – DOH will not reimburse respondents for any costs associated with preparation of their responses to this RFI.
- 4.9 Ownership - Ownership of all data, material and documentation originated and prepared pursuant to this response will belong exclusively to NYSDOH.
- 4.10 Public Information Requirements - Disclosure of information submitted in response to this RFI shall be permitted consistent with the laws of the State of New York and specifically the Freedom of Information Law (FOIL) contained in Article 6 of the NYS Public Officers Law.

The State shall take reasonable steps to protect from public disclosure any of the information submitted in response to this RFI which is exempt from disclosure pursuant to FOIL. Information constituting trade secrets, or information which if disclosed would cause substantial injury to the competitive position of the respondent, or other information exempt from disclosure under FOIL shall be clearly marked and identified as such by the respondent upon submission.

If the respondent intends to seek an exemption from disclosure of materials under FOIL, the respondent shall at the time of submission, request the exemption in writing and provide an explanation of why the information qualifies for exception from disclosure pursuant to §87(2) of the Public Officers Law.

Acceptance of the identified information by the State does not constitute a determination that the information is exempt from disclosure under FOIL. Determinations as to whether the materials or information may be withheld from disclosure will be made in accordance with FOIL at the time a request for such information is received by the State.

5. RFI CONTACT INFORMATION

- 5.1 Interested parties are encouraged to submit responses to the questionnaire in Attachment A by April 29, 2016 to BIP@health.ny.gov.

6. GLOSSARY OF TERMS

BBA Balanced Budget Act which authorized the establishment of PACE.

BIP	Balancing Incentive Program – Federally funded program which provides financial incentives to states to offer community long-term care services as an alternative to institutional care.
CMS	Centers for Medicare and Medicaid Services
DOH	Department of Health
FOIL	Freedom of Information Law
HHS	Health and Human Services
LTSS	Long Term Services and Supports
MFP	Money Follows the Person – Federally funded program which helps states rebalance their Medicaid long-term care systems by increasing the use of home and community based services and reducing the use of institutionally-based serves.
MLTC	Managed Long Term Care
MRT	Medicaid Redesign Tem
NYS	New York State
PACE	Programs of All-Inclusive Care for the Elderly – A Medicare and Medicaid program. PACE organizations provide care and services in the home, the community, the PACE center and if it becomes necessary, a nursing home. They have contracts with many specialists and other providers in the community to make sure that you get the care you need. Many PACE participants get most of their care from staff employed by the PACE organization in the PACE center. PACE centers meet state and federal safety requirements.
RFI	Request for Information
SS Act	Social Security Act

ATTACHMENTS

A: PACE RFI questionnaire