

173-50-02

PACE: Eligibility criteria requirements.

(A) A person may enroll in PACE only if the person meets all the following requirements:

- (1) ~~Is~~ The person is at least fifty-five years of age;.
- (2) ~~Resides~~ The person resides within a PACE organization's service area;.
- (3) ~~Requires~~ The person requires intermediate level of care under rule ~~5101:3-3-05~~ 5160-3-05 of the Administrative Code or skilled level of care under rule ~~5101:3-3-06~~ 5160-3-06 of the Administrative Code;.
- (4) ~~Resides~~ The person resides in a non-institutional setting (e.g., house, apartment) without jeopardizing ~~his/her~~ his or her health or safety;.
- (5) ~~Maintains~~ The person maintains medicaid eligibility either under the financial eligibility standard or under a needs allowance if the person has moved from an institutional setting to a non-institutional setting, or pays for the premiums and patient-liability costs;.
- (6) ~~Agrees~~ The person agrees to obtain medicaid services, if any, or medicare services, if any, only through the PACE organization during the period of enrollment in PACE; ~~and~~;
- (7) ~~Is~~ The person is not enrolled in one or more of the following (or will discontinue ~~being enrollment~~ enrolled in one or more of the following upon enrollment in PACE):
 - (a) A medicaid managed-care program other than PACE;.
 - (b) A hospice program;.
 - (c) The primary alternative care and treatment (PACT) program;.
 - (d) A medicaid waiver program (e.g., PASSPORT, ~~choices~~, or assisted living);.
 - (e) The residential state supplement (RSS) program; ~~or~~;
 - (f) A nursing facility ~~that is~~ certified by medicaid while medicaid is covering the person's nursing facility expenses.

- (B) At least once per year, ODA shall assess whether each participant continues to require an intermediate level of care under rule ~~5101:3-3-05~~ 5160-3-05 of the Administrative Code or a skilled level of care under rule ~~5101:3-3-06~~ 5160-3-06 of the Administrative Code. ODA may permanently waive the requirement to perform the assessment if ODA does not reasonably expect the participant's health to improve or significantly change.
- (C) If, at any time, a participant in PACE no longer meets the ~~criteria~~ requirements in paragraph (A) of rule 173-50-05 of the Administrative Code, the PACE organization may use the process for involuntary disenrollment described in that rule. However, a participant who may no longer meet the financial eligibility ~~criteria~~ requirements for medicaid may remain eligible for PACE as long as the participant pays the premiums and the patient-liability costs incurred while using PACE. (For more information see rule 173-50-05 of the Administrative Code; 42 C.F.R. 460.150 (d) and 42 C.F.R. 460.160 (a) (October 1, ~~2011~~ edition 2015.)

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Certification

Date

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