Fact sheet

Quick Facts: Program of All-inclusive Care for the Elderly (PACE)

What's PACE and how does it work?

Program of All-inclusive Care for the Elderly (PACE) is a Medicare and/or Medicaid comprehensive medical and social services program available in some states. PACE helps eligible older adults who need nursing home-level care meet their health care needs in the community, by giving them coordinated care and support services (instead of having them go to a nursing home or other care facility).

If you join PACE, a team of health care professionals will work with you and your family (as appropriate) to develop an effective and coordinated plan of care. Your interdisciplinary care team usually cares for a small number of people, so they get to know you, your living situation, and your care preferences.

PACE includes all medically necessary Medicare- and Medicaid-covered care and services when your health care team approves them. If you need care and services that Medicare and Medicaid don't cover, PACE may still cover them when your interdisciplinary care team approves them. When you join PACE, you must use providers within the PACE organization's network.

Who can join PACE?

Joining the PACE program is voluntary. Even if you don't have Medicare and/or Medicaid, you can join PACE if you meet these 4 conditions:

- You're 55 or older
- You live in the service area of a PACE organization
- Your state certifies that you need nursing home-level care
- You're able to live safely in the community with the help of PACE services

What does PACE cost?

It depends on your financial situation. If you have Medicaid, you won't have to pay a monthly premium for PACE.

If you don't qualify for Medicaid but you have Medicare, the amount you pay will depend on whether you have Medicare Part A (Hospital Insurance) and/or Part B (Medical Insurance), and will also include:

- A monthly premium to cover the long-term care part of the PACE benefit
- A monthly premium for Medicare drug coverage (Part D)

If you don't have Medicare or Medicaid, you can pay the PACE premium yourself. Regardless of your financial situation, you won't have a deductible, copayment, or co-insurance for any drug, service, or care your PACE team approves.

What do PACE programs cover?

PACE covers all of the care and services that your interdisciplinary care team agrees you need. PACE services include (but aren't limited to):

- Adult day care (including meals/special dietary needs and recreational therapy)
- Dentistry
- Emergency services
- Home care
- Hospital care
- Laboratory/x-ray services
- Medical specialty services
- Mental health counseling
- Nursing home care
- Nutritional counseling
- Occupational therapy
- Personal care/support services
- Physical therapy
- Prescription drugs
- Preventive care
- Primary care (including doctor and nursing services)
- Social services
- Speech therapy
- Transportation to and from the PACE center and medical appointments

Do I need to join a separate Medicare drug plan if I get PACE?

No. PACE organizations offer Medicare drug coverage (Part D). If you have Medicare and join PACE, you'll get your Part D-covered drugs and all other necessary medication from PACE. Joining a separate Medicare drug plan will disenroll you from PACE.

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