

PENNSYLVANIA DEPARTMENT OF AGING


AGING.PA.GOV

PACE/PACENET and Related Program Services

Becky Lorah, Outreach and Enrollment Manager
relorah@pa.gov

1

1

PACE Program

- Comprehensive drug benefit for older adults
- Offers low-cost prescription medication to qualified Pennsylvania residents
- Qualified State Pharmacy Assistance Program (SPAP)
- Creditable coverage

2

PACE Program



First dollar coverage



No deductibles



Open formulary



Nominal copays



No caps



Seamless wrap with
Medicare Part D



Drug utilization
review

3

Program Eligibility Requirements

- Age **65** or older
- Reside in Pennsylvania for at least **90** consecutive days
- Meet the **prior year** income guidelines
- Cannot be enrolled in Medicaid/Medical Assistance prescription benefit

4

Program Eligibility Requirements

- Previous year gross income required
- Income Exclusions (Part B premiums, e.g.)

PACE: \$14,500 or less for single person
\$17,700 or less for married couple

PACENET: \$27,500 or less for single person
\$35,500 or less for married couple

*Assets are not counted



5

Drug Coverage

PACE and **PACENET** cardholders have their prescription drugs covered under an open formulary.

PACE

30 day supply:

- **\$6.00** Generic co-pay
- **\$9.00** Brand co-pay

PACENET

30 day supply:

- **\$8.00** Generic co-pay
- **\$15.00** Brand co-pay

Note: A 90-day supply is available but only if the cardholder has a participating Part D plan.



6

PACE and Part D

PACE provides benefits when Medicare Part D does not:

- During the Part D Deductible Period & Donut Hole
- When drugs are not on the Part D plan's formulary
- Assist with full Late Enrollment Penalties (LEP)
 - Lifetime penalty of 1% of base beneficiary premium for every month eligible and not enrolled in Medicare Part D
 - Program pays full LEP costs for PACE and PACENET if enrolled in a premium payment agreement plan

7

PACE and Part D

Other benefits:

- Lower copays with some plans (generic specific)
- Lower monthly premium vs. having to pay the monthly benchmark premium payment (specific to PACENET)
- 90-day supply (if offered by the Part D plan)
- Offsets Program costs

8

Annual Request for Information (RFI)

- Released in early August
- Plans must respond to the RFI and indicate that they can meet specific parameters defined in the RFI
 - Premium below CMS regional benchmark
 - Broad formulary
 - PDP's retail pharmacy network must contain at least 90% of the pharmacies in the PACE network

2021 Part D Partner Plans

Wellcare

\$33.80

SilverScript

\$32.90

Assigning Cardholders to Partner Plans

Claims Experience
and
Preferred pharmacy
choice over the past 12
months



Pharmacy Network
and
Part D Plan Formulary

11

Exclusions for Assigning Cardholders

- Medicare Advantage Employer, union or retiree plan with creditable drug coverage
- Individuals who opt-out of the assignment
- Individuals enrolled in SPAP with less than 12 months of prescription drug utilization

12

2021 Non-Partner Plans

Aetna	
Bravo Health Pennsylvania, Inc	Highmark Senior Health
Capital Blue Cross	HM Health Insurance
Cigna Health & Life Insurance	Keystone Health Plan East
Elixir Insurance Company	Keystone Health Plan West
Gateway Health Plan	QCC Insurance Company
Geisinger Health Plan	United Health Care
Geisinger Indemnity Insurance	UPMC Health Plan
Health Assurance	Vibra Health Plan, Inc
Health Partners Plans, Inc	Wellcare Prescription Insurance Inc

<https://pacecares.magellanhealth.com/documents/PartDContractLog-2021.pdf>



13

Part D Premium – PACE Enrollee

The Program pays the monthly premium, up to the regional premium benchmark, for PACE cardholders enrolled in a plan that has a signed premium payment agreement with the Department.

→ 2021 CMS regional benchmark is \$37.45



14

Part D Premium – PACENET Enrollee

The **Program** does not pay monthly Part D premium payments for **PACENET** cardholders.

If a PACENET cardholder does NOT have a Part D plan, then they will be charged the monthly benchmark premium payment of \$37.45 at the pharmacy.

Medicare Extra Help/Low Income Subsidy (LIS)

- Must be enrolled in a Part D Plan
- Provides financial assistance for paying Part D premiums, annual deductibles & drug copays
 - * Requires a review of both income & assets to qualify

Automatic Annual Renewal



17

Automatic Annual Renewal

Income changes:

- PACE ↔ PACENET
- No longer eligible for the Program

Cardholders receive correspondence indicating any changes to their enrollment.

Note: If the cardholder becomes ineligible, then they can re-apply by completing a new application on January 1st of the following year.

18

How to Apply

- **Phone: PACE Customer Service:** 1-800-225-7223
- **Online: PACEcares Website**
<https://pacecares.magellanhealth.com>
- **PACE Email:** papace@magellanhealth.com
- **Mail:** P.O. Box 8806, Harrisburg, PA 17105-8806
- **Fax:** 1-888-656-0372
- **PACE Application Center:** 1-866-712-2060



19

PACE Application Center

Partnership with the Department of Aging since 2005

BDT:

- Screens and applies Pennsylvanians for public benefit programs using innovative technology
- Offers in-person assistance in certain areas of PA
- Conducts outreach to state and local nonprofit lists
1-866-712-2060 Monday – Friday, 9am to 5pm



20

PACE Application Center

PACE, Low-Income Subsidy, SNAP, LIHEAP, and PTRR Outreach

- Performing effective outreach
 - Letters (4th grade reading level)
 - Outbound calls
 - Multiple attempts or follow-up
- Giving in-depth application assistance
 - Submit applications on behalf of consumers
 - Collect verification documents where needed
- Using other state agency benefit lists to identify individuals who are eligible for the benefits but not enrolled

**Help for those who don't qualify
for PACE or PACENET**

The Clearinghouse

Assists under-insured or uninsured individuals with the cost of prescription drugs:

- Manufacturer patient assistance programs
- Attorney General Settlement Programs
- Copay assistance and generic mail-order programs, coupons for specific meds, and other outside agencies

The Clearinghouse is **NOT** a prescription insurance plan.

1-800-955-0989



23

The Clearinghouse

Qualifications

- Pennsylvania resident, 18 or older
- **Without** prescription insurance
OR
- Individuals **with** prescription insurance must--
 - Be in the Medicare Part D Coverage Gap/Donut Hole
 - Have a medication that is not on the prescription plan's formulary
 - Experience high copayments over \$100 per month for a 30-day supply of medications
- Cannot have Medical Assistance with prescription coverage, Low Income Subsidy (LIS) / Extra Help, Veterans Administration (VA) Prescription Benefits, or any other state or federally-funded prescription program



24

The Clearinghouse

Our help does more...

Assists PA residents over age 18 with social and life services

- **Medical and prescription programs** – medication and medical expense assistance programs, medical and dental clinics with sliding scale and no cost services, Medicare, Medical Assistance, Veteran’s benefits and other private plans, local rehabilitation, counseling and support groups



25

The Clearinghouse

- **Food programs** – local food pantries and sources of meal assistance, SNAP and food stamp programs
- **Housing assistance** – state and federal programs, rental properties and shelters, and transitional housing
- **Employment** – listing of employers or emp agencies, online employment agencies, or training
- **Social and life services** – local bus lines and transportation, legal aid, furniture and clothing donation programs



26

The Clearinghouse

- Must be over the age of 18
- PA resident
- No fee to use the Clearinghouse
- Some assistance programs have fees
- No defined income limit – each program benefit sets income guidelines

27

State Funded Pharmacy Programs

The PACE program administers pharmacy benefits for other state agencies including the Department of Health and the Department of Human Services.

- Programs include:
 - Chronic Renal Disease Program
 - Special Pharmaceutical Benefits Program for HIV/AIDS
 - Special Pharmaceutical Benefits Program for Mental Health

28

Chronic Renal Disease Program (CRDP)

CRDP provides life-saving care & treatment for those with end-stage renal disease & assists with the cost for:

- Medications
 - Dialysis services
 - Renal transplantation
 - Inpatient and outpatient service
 - Home dialysis supplies & equipment
 - Limited patient transportation
 - Part D Coverage
- (Must be enrolled in one of the premium payment agreement plans.)



29

Chronic Renal Disease Program (CRDP) Eligibility

CRDP criteria for eligibility:

- Lived in PA for at least 90 consecutive days before the date on the application;
- U.S. Citizen or legal alien;
- Must be 21 or older;
- Gross income at or below 300% of the Federal Poverty Level (FPL)

Applications:

- <https://www.health.pa.gov/topics/programs/Chronic-Renal-Disease>



30

Special Pharmaceutical Benefits Program Mental Health (SPBP-MH)

SPBP-MH assists with payment of specific atypical antipsychotic medications for qualified participants who are not eligible for pharmacy services under the Medical Assistance Program.

Formulary:

Abilify, Clozaril, Clozapine, Geodon, Invega, Risperdal, Risperidone, Seroquel or Zyprexa



31

Special Pharmaceutical Benefits Program Mental Health (SPBP-MH)

SPBP enrollees are also eligible for clozaril support services provided by physicians, outpatient psychiatric clinics or psychiatric partial hospitalization providers.



32

Special Pharmaceutical Benefits Program Mental Health (SPBP-MH) Eligibility

Income Limits

Individuals - \$35,000 gross income per year

Families - \$35,000 gross income per year, plus an allowance of \$2,893 for each additional family member. (Example: family of two \$37,893 combined gross; family of three \$40,786 combined gross)

Pennsylvania resident living in Pennsylvania and not institutionalized.

Must have a **medical need** with an ICD-10-CM diagnosis of schizophrenia.



33

Becky Lorah, MPA
Outreach and Enrollment Manager

PA Department of Aging
PACE Program
555 Walnut Street – 5th Floor
Harrisburg, PA 17101
Ph. 717-787-7313
relorah@pa.gov



34