

Office of Health Insurance Programs

Division of Long Term Care

MLTC Policy 14.03: Consumer Directed Personal Assistance Service (CDPAS) and Program of All Inclusive Care for the Elderly (PACE)

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Consistent with the Medicaid Redesign Initiative #90, the Department implemented the transition of consumers receiving fee-for-service CDPAS into partially capitated MLTC plans, Medicaid Advantage Plus (MAP) plans, and PACE plans. In addition to receiving enrollments for transitioning CDPAS users, all operational MLTC plans were directed to offer CDPAS as an option to all new and current enrollees.

PACE plans are required to comply with PACE regulations at 42 CFR Part 460. At the direction of the Centers for Medicare and Medicaid Services (CMS), we are providing some clarification regarding the utilization of CDPAS by participants enrolled in a PACE plan.

PACE plans must offer the option of CDPAS along with an explanation of the steps that a consumer must agree to follow in order to participate in the CDPAS as a PACE participant.

- The PACE plan must conduct a Criminal History Background Check on any proposed personal assistance caregiver. This is required by PACE regulations at 42 CFR § 460.68.
- The personal assistance caregiver will be subject to PACE orientation, member specific plan of care competencies and ongoing supervision, conducted by the PACE plan. Competencies should be revised at each assessment, or with change in participant's condition / plan of care. The PACE plan is responsible, consistent with federal PACE regulations, for ensuring the competency of any individual rendering care to the participant.

PACE plans are responsible to provide participants with a clear understanding of these expectations, if the participant is interested in CDPAS.