

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

What's PACE and how does it work?

PACE is a Medicare and Medicaid program available in some states that helps people meet their health care needs in the community, instead of going 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 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 the care and services Medicare and Medicaid cover, as authorized by your health care team. If your health care team decides you need more care and services that Medicare and Medicaid don't cover, PACE may still cover them. When you join PACE, you must use providers within the PACE organization's network.

Who can join PACE?

You can join PACE, even if you don't have Medicare and/or Medicaid, if:

- You're 55 or older
- You live in the service area of a PACE organization
- Your state certifies that you need a nursing home-level of 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 the long-term care portion of the PACE benefit.

If you don't qualify for Medicaid but you have Medicare, you'll pay:

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

You won't have a deductible or copayment for any drug, service, or care your PACE team approves. If you don't have Medicare or Medicaid, you can pay for PACE yourself.

What do PACE programs cover?

PACE covers all your medically necessary care and services. If you don't have Medicare or Medicaid, you can pay for PACE privately. PACE services include (but aren't limited to):

<ul style="list-style-type: none"> • Adult day care • Dentistry • Emergency services • Home care • Hospital care • Laboratory/x-ray services • Meals • Medical specialty services • Nursing home care • Nutritional counseling 	<ul style="list-style-type: none"> • Occupational therapy • Personal care • Physical therapy • Prescription drugs • Primary care (including doctor and nursing services) • Recreational therapy • Social services • Social work counseling • Transportation to medical appointments or activities at the PACE center
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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 join PACE, you'll get your Part D-covered drugs and all other necessary medication from the program. Joining a separate Medicare drug plan will disenroll you from PACE.

Where does PACE provide services?

PACE organizations may give care and services in the PACE center, at your home, and in inpatient facilities (like nursing homes).

PACE centers must:

- Meet state and federal safety requirements
- Include adult day programs, primary care from doctors and nurses, activities, and occupational and physical therapy facilities

At a PACE center, you'll get care from PACE organization employees or contractors. PACE organizations also have contracts with many specialists and other providers in the community to make sure you get the care you need.

For more information

Visit [Medicare.gov/pace](https://www.Medicare.gov/pace) to find a PACE plan in your area or learn more about PACE at [Medicare.gov/health-drug-plans/health-plans/your-coverage-options/other-medicare-health-plans/PACE](https://www.Medicare.gov/health-drug-plans/health-plans/your-coverage-options/other-medicare-health-plans/PACE). You can also visit [Medicare.gov](https://www.Medicare.gov), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.



Medicare

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