PACE Request for Deemed Continued Eligibility

To request that a participant have Deemed Continued Eligibility for PACE, complete the information below and submit all required documentation listed on this form to DHS, DoAS, at least 45 days prior to the last annual recertification authorization date.

From (Name/Title): 
PACE Organization: 
Email Address: 
Telephone Number: Fax Number: 

Date of Request: Recertification Due Date: 
Participant Name: Date of Last Assessment: 

DoAS will only initiate the review of this request when all of the following documentation has been received. Omitting any information requested below will delay approval and jeopardize a participant’s eligibility for continued enrollment in PACE:

- Justification summary from IDT
- Initial and updated LOC assessment
- Diagnosis of chronic or disabling condition
- Last comprehensive assessment by all relevant disciplines
- Last 2 IDT care plans
- History and Physical
- Physician and nursing progress notes
- All specialty consultant notes (any discipline)
- Social work notes
- Diagnostic tests supporting request
- Medication and treatment record
- Other relevant documentation supporting the request

Above request is:

- Authorized/Date: Not Authorized/Date: 

Name and Title of Reviewer: 
Signature: Date: Telephone: 