



Business Planning Checklist for New PACE Programs



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Responding to the Unique Needs of Seniors and their Families

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Disclaimer

“The Business Planning Checklist for New PACE Programs” is intended to assist a user in organizing information, assumptions and analyses related to the initiation or expansion of a PACE program. The checklist does not represent a comprehensive listing of all issues and considerations an organization may need to assess and evaluate when making a decision regarding the initiation or expansion of PACE. While the examples provided in the checklist are based on observations of current PACE programs, these examples should not be taken as representative of overall PACE performance. Users will need to consider their own unique circumstances in order to develop their own business plan for PACE.

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Business Planning Checklist for New PACE Programs

The decision to establish a new PACE program requires a formal, written business plan. The purpose of this document is to present the elements of a business plan that should be prepared for consideration by the board of directors of the sponsoring organization for approval to move forward. The process of developing a business plan will help you and your planning team understand what it will take to make PACE a reality in your organization. The completed business plan can serve as a means of communication with your board, foundations and other external sources of start-up funding.

Each section of the business plan is presented with specific issues for consideration that are relevant to a new PACE program and a list of resources that are available from the National PACE Association (NPA). In addition, the statements about financial performance were derived from the PACE Financial Proforma Model that also is available from NPA. As you utilize the planning and decision-making resources available through NPA, you should consider carefully how each of these issues will be addressed within your PACE program.

The business planning checklist contains two attachments. Attachment 1 lists general resources available to all interested persons. Attachment 2 lists the resources by each section of the checklist and their availability to various access categories.

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|---|---|
| 1. Guide to Writing the Executive Summary | 8. Start-Up and Operations Plan |
| 2. Explanation of PACE Program and the Target Population | 9. Goals, Risk Assessment and Exit Strategy |
| 3. Environmental Assessment | 10. Financial Analysis |
| 4. New PACE Program and Management | 11. Decision Requested |
| 5. Service Area and Site Location | Appendix |
| 6. Program Components and Service Arrangements | Attachment 1: General Information Sources |
| 7. Marketing and Enrollment Plan | Attachment 2: Resources by Membership Category |

1. Guide to Writing the Executive Summary

The executive summary is the most important section of a business plan. An executive summary should be a condensed version of the business plan that leaves the reader excited about the unique benefits of a PACE program and comfortable with the financial viability of the program. While the specific facts will differ, the executive summary should convey the following points as persuasively as possible:

- The PACE program fills an unmet need for community-based long term care and is different than any other provider in the marketplace serving the frail elderly.
- The PACE program is a good fit with our sponsoring organization's current mission, strategic direction and services.
- The PACE program is financially viable and offers a reasonable return on investment for a non-profit health care organization.
- The financial projections in this business plan are realistic and attainable. Sensitivity analysis has been undertaken which shows the range of financial performance.
- The management team is capable of achieving the desired financial and operating results.
- Our organization can manage the identified risk, but an exit plan has been developed if unforeseen circumstances arise.

The conclusion of the executive summary should request board approval to establish a new PACE program and the necessary start-up funds (including start-up capital and working capital). If external financing is sought, then the business plan should be utilized to present the business opportunity to external sources of financing.

2. Explanation of PACE Program and the Target Population

This section of the business plan should explain to the reader the business and service/product concept and answer the question: What service/product are we bringing to the market? Therefore, this section of the business plan should focus on the uniqueness of the PACE program and the federal regulatory requirements which define the service/product. The specific target population should be described in detail. Supporting information should be included in the appendices of the plan.

- Describe the key components of the PACE program, as defined by federal regulations.
- Identify any state issues that are applicable, such as enrollment limitations, limitations on the number of PACE programs or geographic limitations.
- Describe the benefits of PACE to the participants and their families.
- Describe the specific **target population**:
 - Describe Medicaid clinical and financial eligibility criteria in the state where the new program will operate. PACE enrollees must meet clinical eligibility for nursing home level of care. In most states, financial eligibility is based upon eligibility for home and community-based care under the Medicaid waiver program.
 - Describe characteristics of current participants in terms of age, gender and health status (activities of daily living, instrumental activities of daily living, cognitive status).

NPA Resources Available

- PACE Frequently Asked Questions – summarizes important opportunities and challenges faced in PACE development
- Program of All-inclusive Care for the Elderly (PACE) Fact Sheet – provides an overview of the PACE model
- PACE and Traditional Long Term Care: The Experience of Family Caregivers with Older Family Members Who Have Long Term Care Needs (Executive Summary) – summary of results of reports on focus groups of family caregivers utilizing and not utilizing PACE
- PACE and Traditional Long Term Care: The Experience of Family Caregivers with Older Family Members Who Have Long Term Care Needs (Full Report) – reports on focus groups of family caregivers utilizing and not utilizing PACE
- PACE Profile – collection of PACE program data submissions (program census, enrollee characteristics, utilization, etc.) throughout a calendar year
- Summary of the PACE Provider Regulation (11/99 and 10/02)

3. Environmental Assessment

This section of the business plan will assess the overall environment in which a new business will operate, and should include an industry trends analysis, a competitive analysis and a demand analysis. The final section should reach a conclusion about the market-specific demand for the PACE program and the strategic opportunity that exists for PACE services in your particular market/state.

Industry Trends Analysis

Every business operates as part of a larger industry. The purpose of this section is to describe the industry in which the new PACE program will operate, which includes both institutional and community-based long term care.

- Identify and assess general consumer trends such as the growing consumer demand for care in home and community-based settings, and its impact on the local marketplace. For example, are private pay alternatives to nursing homes such as assisted living or more comprehensive home care providers entering the market?
- Identify and assess federal trends affecting the future development of PACE, such as risk adjustment to Medicare capitation and the desire for flexibility in the interpretation of various provisions of the federal regulation.
- Assess the strength of state support for a PACE program, including commitment to home and community-based programs in general and PACE in particular. Ongoing state support will be a critical determinant of the viability of any PACE program, such as the state's methodology for setting Medicaid capitation and decisions on eligibility criteria.
- Other evolving state and federal issues, such as the implementation of the Olmstead mandate to serve disabled persons in community-based settings, will have an impact on the regulatory environment in which a PACE program operates.

Competitive Analysis

Although a PACE program is unique as compared to other providers when it enters a market, it will face competition from existing providers of service to the frail elderly. Key considerations in a competitive analysis include the following:

- Assess the extent to which nursing homes are a competitor in your market. For example, determine the nursing home occupancy rate in the market area. If nursing homes are full, then there will be a greater demand for community-based alternatives such as PACE. What are the costs to consumers relative to PACE?
- Assess the extent to which there already are home and community-based alternatives in your market. For example, is there a Medicaid home and community-based waiver program in your state? Is there a waiting list for this program? Are the benefits generous? Is assisted living available as a covered service? What are the costs to consumers relative to PACE?
- Assess the extent to which other providers in the market are developing community-based alternatives. For example, are there any existing assisted living programs for low to moderate income populations? What are the costs to consumers relative to PACE?

- Identify the top 5-10 competitors for PACE services. Determine the populations they serve, identify how those populations differ from PACE and assess the likely strength of the competitive threat. A competitor might be a nursing facility or a community-based provider of long term care (adult day care, home care provider, assisted living provider or other provider of services). In some cases, a competitor might be a demonstration program with Medicaid and/or Medicare funding serving the frail elderly population.
- Consider the entry of future competitors, particularly if a private pay PACE market will be targeted. For example, publicly traded home care companies are beginning to offer a wider variety of home care services for baby boomers and their aging parents.

Demand Analysis

The standard demand analysis should be adjusted to reflect market realities using informed judgment about the local market and the likely response to the introduction of PACE services.

- The first step in this process is to obtain information regarding the state's specific clinical eligibility criteria for nursing home care and financial eligibility for Medicaid. For clinical eligibility, PACE enrollees must meet the state's eligibility criteria for nursing home admission. For financial eligibility, most states utilize the same eligibility criteria for PACE as they do for home and community-based waiver programs. However, the statute does allow states to apply spousal impoverishment rules. Therefore, specific state Medicaid clinical and financial eligibility criteria must be obtained before proceeding with the demand analysis.
- Undertake a standard demand analysis using demographic data and projections from the 2000 census to determine the potential size of the PACE eligible population. The size of the target population is estimated using functional limitation indicators to approximate clinical eligibility and household income levels to estimate financial eligibility in the state of interest. The rule of thumb is that 15-20 percent of the frail elderly population meeting clinical and financial eligibility for PACE will enroll.
- Evaluate and adjust the standard demand analysis using the understanding gained about the local market to select a realistic penetration rate for this specific PACE program. This penetration rate can be above or below the traditional rule of thumb, depending upon the findings of the environmental assessment.
 - For example, in one of the case study states, the market was characterized by waiting lists for nursing homes, a very small number of home and community-based programs, and no low income assisted living providers. The demand for PACE services was very strong and exceeded the traditional rule of thumb for PACE market penetration.
 - Additional consideration should be given to whether additional demand can be generated for private pay PACE through the development of relationships with long term care insurance companies, large employers with retiree benefit programs and other payers (e.g., the Veteran's Administration, health plans).
- The demand for PACE services will be reflected in the financial proforma model as the net monthly enrollment growth over a five-year period. Changes in the assumptions for census growth will have a significant impact on the number of months before positive net income is achieved and break-even occurs. The break-even month occurs when accumulated losses since month 1 of start-up equal accumulated gains since the month positive net income is achieved.

- ❑ In the baseline scenario, census starts at five per month (net), grows to seven per month (net) in year 4 and remains at that level. Positive net income is achieved in month 18 and break-even occurs in month 38.
- ❑ However, when census starts at four per month (net) in year 1 and grows to six per month (net) in year 4 and remains at that level. Positive net income is achieved in month 21 and break-even is achieved in month 45.

The Strategic Opportunity

Based upon the analysis above, the business plan should reach a conclusion about the market demand for PACE services in the local market over a five-year period. In general, successful PACE programs strive for a census of about 300-400 with multiple centers in order to achieve long term financial stability. Assuming that a strategic opportunity is determined to exist, the next section of the business plan describes the new PACE program that will be created.

NPA Resources Available

- An Overview of Self-Assessment Considerations – summarizes key considerations in an organization’s review of PACE (see below)
- Organizational and Market Self Assessment for PACE – reviews in detail key factors in evaluating PACE for your organization
- Demographic Report – a custom report of the population, income and health factors shaping the organization’s PACE enrollment projections; available through NPA membership
- State Assessment – a brief summary of the current situation in a specific state
- PACE Providers by State – a document listing where current PACE and pre-PACE providers are located, their contact information, service areas, service start dates, census and capitation rates

4. New PACE Program and Management

This section of the business plan should describe the new PACE program that is going to be created, with a focus on management and organization. If external financing is to be sought, investors will focus on the management team that will lead the program and execute the business plan. It should be noted that at present only non-profit organizations can become a permanent PACE provider. However, Congress did authorize a demonstration of up to 10 for-profit PACE programs, and the Centers for Medicare and Medicaid Services (CMS) currently is accepting applications.

Organizational Structure

- Describe the organization(s) that will sponsor the new PACE program and have legal responsibility for its operations. The section should include a description of all services provided by the sponsoring organization, the subset of services that the new PACE program will obtain from the sponsoring organization, and the strategic fit of PACE with the sponsoring organization(s). If there are multiple sponsors, describe each sponsoring organization separately.
- State the legal name of the PACE program and identify the members of its board of directors.

Mission

- State the mission of the new PACE program.
- Describe how the mission of the new PACE program will serve the mission of the sponsoring organization(s).

Management

- Identify the key members of the management team. At a minimum, key individuals should include the project director and the medical director. In addition, other key members of the management team, such as the director of operations and the director of marketing, should be identified in the business plan if these individuals are known.
- Given the complexity of the regulatory process, consultants to the new PACE program also should be identified and described in the business plan. Identifying qualified consultants or management expertise is particularly important if you are seeking external financing.
- Include an organizational chart showing the board, CEO, management staff and program staff.

NPA Resources Available

- CRSP Operating Resources, Binder 1, "PACE Organization": includes Sample PACE Mission Statements, Sample PACE Organizational Charts, Sample PACE Board Member Description, Sample Board Policy and Procedures, Sample Board Conflict of Interest Statement, Sample Consumer Advisory Committee Description

5. Service Area and Site Location

This section of the business plan will describe the service area which the PACE program will serve and where the potential PACE enrollees currently reside. Driving distances will affect the definition of the service area and the site selection. The general rule of thumb is that the PACE center should be located within a 45-minute drive for most PACE enrollees.

Service Area

- Describe the service area in terms of location, physical characteristics such as bridges and rivers, ethnic groups, and other factors that will affect the development of the PACE program. For example, a bridge may divide a service area, regardless of the distance involved. In other service areas, the ethnic makeup of the area may drive marketing approaches. (The service area that is described should match the service area in the demographic analysis above.)

Site Location

- Describe the actual or potential site for the location of the first day center. If a decision has been made about whether to lease or purchase the initial site, this decision should be reflected in the financial proforma model.
- Describe possible locations and the timeline for expansion if multiple day center locations are included in this business plan.
- Consider desirability of location for all payer sources, if pursuing multiple payer sources such as private pay enrollees is a future strategic direction.
- Attach a map that shows the location of the day center(s) as well as hospitals, nursing homes and assisted living facilities with which the PACE program will contract for services.

NPA Resources Available

- An Overview of PACE Site Selection and Center Development – highlights the major considerations necessary for site selection, center development and costs (see below)
- A Guide to PACE Site Selection and Center Development - the full guide to assessing possible PACE locations and existing facilities that could be adapted for PACE; available through NPA membership
- PACE Providers by State – a document listing where current PACE and pre-PACE providers are located, their contact information, service areas, service start dates, census and capitation rates

6. Program Components and Service Arrangements

This section of the PACE business plan describes the services that must be provided to a PACE enrollee. The PACE model combines into one delivery system all of the medical, restorative, social and supportive care needed by a PACE enrollee and provided by the PACE program. The PACE program assumes full responsibility for care and continues to provide care regardless of changes in health status as long as program eligibility requirements are met.

The PACE regulation specifies the required services as well as the members and function of the interdisciplinary team. The regulation allows the members of the interdisciplinary team to be contract employees.

The following decisions must be made about program components and service delivery:

- The location of the PACE center must be determined first. The PACE center will house the interdisciplinary team, the core of the PACE program.
- Determine what services if any will be provided by the sponsoring organization(s). Establish contracts for these services. For example, if the sponsoring organization is a health system, the PACE program can contract for acute care from the sponsoring organization.
- Determine which services will be provided by contract employees, as permitted by the PACE regulation.
- Establish contracts for all necessary services. Assess the appropriateness of risk sharing, particularly for hospital or pharmacy contracts.

NPA Resources Available

- Summary of the PACE Provider Regulation (11/99 and 10/02)

7. Marketing and Enrollment Plan

This section of the business plan will describe the marketing and enrollment plan. Marketing and enrollment are critical to the success of a new PACE program. Start-up capital is needed to fund operations while the PACE program grows enrollment, so faster enrollment growth will reduce the need for working capital prior to achieving break-even.

- Describe plans to identify and hire a director of marketing during the start-up period.
- Quantify the enrollment projection to be used in the financial proforma model, which will be expressed as monthly net enrollment growth. Support this projection based upon an analysis of local market factors and comparison to PACE programs with recent start-up experience.
- Design a marketing plan and specify the marketing message and marketing channels. Experience has shown that initial marketing efforts are targeted towards more traditional community referral sources, such as hospital discharge planners, Area Agencies on Aging and home care providers. When the PACE program is established, participants, family members and self-referral become important referral sources.
 - Formulate the marketing message for prospective participants, families and referral resources.
 - Describe the marketing channels that will be used and the relative priority of the approaches. Examples include professional networking, print media, broadcast media and direct mail.
 - Determine the potential for gaining enrollees through referrals from the sponsoring organization(s).
 - Determine the potential for gaining enrollments through referrals from the Medicaid agency, Area Agency on Aging or state agency assessing potential nursing home or community-based long term care placements.
 - Develop marketing approaches from other likely sources of enrollment, such as social service agencies, assisted living facilities, nursing homes, physicians and hospitals.
 - Consider a strategic partnership. For example, one case study program developed a partnership with the Single Entry Point (SEP) in its state. SEP assesses nursing home admissions and recommends alternatives. Providing staff to the SEP resulted in more appropriate referrals and a higher conversion rate from referrals to enrollees.

NPA Resources Available

- CRSP Operating Resources, Binder 4, "PACE Marketing," includes A Guide for Preparing An Effective PACE Marketing Plan, Model PACE Marketing Materials, Model PACE Enrollee Agreement (in draft form – under CMS review); available through NPA membership

8. Start-Up and Operations Plan

This section of the business plan will describe the start-up period before beginning operations and enrolling participants. The federal regulation recognizes a PACE program as an entity that receives a Medicare and Medicaid capitation for serving a frail elderly individual in the community. Although the federal demonstration has ended, some states (such as Pennsylvania) still are requiring a period of Medicaid-only operations prior to becoming a PACE provider.

Key start-up considerations include the following:

- Determine if your state requires that operations begin as a prepaid Medicaid health plan prior to receiving full Medicare and Medicaid capitation.
- Determine the state licensing requirements and assess requirements to secure necessary licenses to operate the components of a PACE program.
- Negotiate a Medicaid capitation rate with the state.
- Determine the state solvency requirements for PACE and determine if they differ from federal solvency requirements. Make arrangements to meet solvency requirements, securing letters of credit, reinsurance or lines of credit as needed.
- Develop a timeline of start-up tasks and identify lead responsibility.
- Finalize the site selection and begin construction or renovation of site.
- Identify who will be responsible for preparing the provider application, which must be approved prior to beginning operations and enrollment. In addition, describe consulting assistance to supplement staff efforts.
- Develop a start-up staffing plan, which should be incorporated into the financial proforma of the business plan.
- Identify the external contracts that are needed and begin negotiating contracts (hospitals, nursing homes, etc.).
- Determine the extent of start-up management assistance needed. Services can range from turn-key start-up management to assistance on an as-needed basis.

NPA Resources Available

- Program Start-Up and Development Costs - reviews the start-up cost experiences of PACE programs
- Staffing Ratios Report; available through NPA Membership
- Summary of Staffing Ratios Report
- Case Studies

9. Goals, Risk Assessment and Exit Strategy

This section of the business plan sets forth the roadmap for the new business, including the goals, the strategies to achieve these goals, the risk involved and an exit strategy if these expectations are not achieved.

Goals

This section should identify an overall goal for a new PACE program, specific goals for year 5, and then strategies that will be utilized to achieve these goals. For example, a PACE program can establish an overall goal of becoming the long term care provider of choice in the market area. It can establish specific goals to achieve total revenues of \$15 million and a 15 percent return on net revenue. A specific strategy might be to develop a significant private pay census in order to achieve an adequate return.

Risk Assessment

A PACE program brings several critical areas of risk that should be mentioned in a business plan. Overall, one of the greatest risks to the viability of a PACE program is the state's level of commitment to PACE, which is reflected in the adequacy of the Medicaid capitation, policies allowing adequate enrollment growth and other state policies. In general, the following risks should be considered in the business plan:

- Develop strategies for managing census risk. Census risk occurs if the planned census growth is not achieved. Consistent census growth has a dramatic positive impact on working capital needs and profitability.
- Develop strategies for managing utilization risk. PACE programs are at complete financial risk for providing all Medicare and Medicaid covered services to enrollees. Utilization risk occurs if the key areas of expense such as hospital and nursing home utilization are not controlled effectively. Effective utilization management is key to financial success of a PACE program.
- Develop strategies for responding to Medicaid revenue risk. Medicaid revenue risk occurs due to the uncertainty of state funding and support for PACE. Budget shortfalls can lead to limits on enrollment and/or the growth rate of the Medicaid capitation.
- Acknowledge Medicare revenue risk. Medicare revenue risk occurs as a result of the uncertainty of future risk adjustment methodologies and their impact on Medicare revenues.

Exit Strategy

The business plan should specify the circumstances under which participation in the PACE program will be terminated. For example, the business plan may specify that the organization should exit the PACE program if break-even is not achieved within five years or if the Medicaid capitation does not cover anticipated costs for a period exceeding one year. The business plan also should quantify the funds that were expended on PACE program development and operation through that point of exit from the PACE program.

10. Financial Analysis

The financial analysis is a key component of the business plan and a section that will be reviewed carefully by external financing sources. Establishing a new PACE program requires as much as \$3 million in start-up capital to cover capital costs and working capital needs. The needs of a given program will vary depending upon the specific factors. Therefore, the decision to establish a new PACE program should be based upon a thorough financial analysis.

The financial proforma analysis to be included in a business plan should reflect the specific decisions that have been made about the start-up of this particular PACE program. Prospective PACE sites should consider securing business consultants and/or actuarial assistance to analyze utilization parameters and develop a customized financial analysis for the business plan.

The financial proforma analysis should include the following key components:

Financial Analysis

The financial analysis of the business plan should include the following financial statements. A summary of the financial analysis should be prepared, with the detailed financial statements upon which the summary is based included in the Appendix.

- Income Statement – This determines when the PACE program begins to show positive net income. Assumptions about the Medicare and Medicaid capitation, census growth, inpatient utilization and nursing home utilization drive the income statement. The net income month and break-even month should be determined.
- Balance Sheet – This statement shows how much the PACE program is worth.
- Cash Flow Statements – This statement shows whether the PACE program has the cash to operate and determines the working capital needs for the new program.
- Break-even Analysis – This break-even point is the month in which the accumulated losses since month 1 of start-up equal the accumulated gains since the month that positive net income was first achieved.
- Start-up costs should be specified, including capital costs and working capital needs.

Sensitivity Analysis

- Key assumptions, including Medicare and Medicaid revenue estimates, census growth, hospital utilization and nursing home utilization should be varied for best case, baseline case and worst case scenarios.

Financial Solvency Requirements

- Federal requirements establish federal solvency requirements. Some states impose additional requirements. The business plan should address how federal and/or state solvency requirements will be met.
- Consideration should be given regarding whether to purchase reinsurance for hospital utilization. Reinsurance will not fulfill the federal solvency requirements completely.

Start-Up Funding

- Determine the total start-up funds that will be needed to establish a new PACE program.
- Determine the source of start-up funding. Will funds be sought from the sponsoring organization, partners, foundations or an external financing source? What are the terms of the financing? Will these funds be secured as an equity transfer or will they need to be repaid? What are the terms of the financing arrangements?

NPA Resources Available

- PACE Providers by State – a document listing where current PACE and pre-PACE providers are located, their contact information, service areas, service start dates, census and capitation rates
- Sources of Financing – a brief description of financing sources for start-up costs associated with PACE
- PACE Financial Proforma and Users Guide - an interactive tool for creating an organization's financial projection; available through NPA membership or working with a PACE Technical Assistance Center
- PACE Baseline Financial Scenario - a detailed financial scenario reflecting the cost and revenue experience of successful operating PACE programs; available through NPA membership

11. Decision Requested

This concluding section of the business plan should make a recommendation to the board of directors about how to proceed with the development of a new PACE program. The recommendation should include the following:

- Timing for the start-up of a new PACE program.
- Request for start-up funding and/or financial reserves necessary to meet solvency requirements.
- Request to seek outside funding for start-up and identification of which organizations will be approached for funding.
- Any other actions needed by the board in order to proceed.

Appendix

As a general rule of thumb, a business plan should be no longer than 15-20 pages, including an executive summary of 3-5 pages. More detailed supplemental information for the interested reader should be included in the appendix. Appendices can include the following:

- Detailed financial statements referenced above.
- Copy or summary of the federal PACE regulation.
- Resumes of key management team.
- Description and pictures of the day center site or location. Include actual lease or purchase terms if available.

Attachment 1

General Information Sources

- NPA web site – www.npaonline.org
- New PACE Providers: The Path from Interest to Start-Up – a guide to the planning process for initiating a PACE program
- Recorded Developing PACE Education Series – features topics in the decision-making and PACE development process
- Core Resource Set for PACE (CRSP) – a compendium of tools to assist developing and operational PACE programs, including a guide to preparing the PACE Provider Application; available through NPA membership
- PACE Planning Resource Checklist – a checklist designed to help organizations track what information they have received and suggestions for possible next steps for action
- DataPACE – a database of PACE program participant characteristics, service utilization and health status/conditions

Attachment 2

Resources by Access Category

Business Plan Section	#	NPA Resource	Provider Member	Prospective Provider Member	Exploring PACE Member	TAC Member	Other Capitated Provider Member	Public
2	1	PACE Frequently Asked Questions	x	x	x	x	x	x
2	2	Program of All-inclusive Care for the Elderly (PACE) Fact Sheet	x	x	x	x	x	x
2	3	PACE and Traditional Long Term Care: The Experience of Family Caregivers with Older Family Members Who Have Long Term Care Needs (Executive Summary)	x	x	x	x	x	x
2	4	PACE and Traditional Long Term Care: The Experience of Family Caregivers with Older Family Members Who Have Long Term Care Needs (Full Report)	x	x	x	x	x	
2	5	PACE Profile	x	x	x	x	x	x
2	6	Summary of the PACE Provider Regulation (11/99 and 10/02)	x	x	x	x	x	x
3	1	An Overview of Self-Assessment Considerations	x	x	x	x	x	x
3	2	Organizational and Market Self-Assessment for PACE	x	x	x	x		
3	3	Demographic Report	x	x	x			
3	4	State Assessment	x	x	x	x		
3	5	PACE Providers by State	x	x	x	x	x	x
4	1	Core Resource Set for PACE (CRSP) - Binder 1, "PACE Organization"	x	x		x		

Business Plan Section	#	NPA Resource	Provider Member	Prospective Provider Member	Exploring PACE Member	TAC Member	Other Capitated Provider Member	Public
5	1	An Overview of PACE Site Selection and Center Development	x	x	x	x		
5	2	A Guide to PACE Site Selection and Center Development	x	x	x	x		
5	3	PACE Providers by State	x	x	x	x	x	x
6	1	Summary of the PACE Provider Regulation (11/99 and 10/02)	x	x	x	x	x	x
7	1	Core Resource Set for PACE (CRSP) - Binder 4, "PACE Marketing"	x	x		x		
8	1	Program Start-Up and Development Costs	x	x	x	x	x	x
8	2	Staffing Ratios Report	x	x				
8	2	Summary of Staffing Ratios Report	x	x	x	x	x	x
8	3	Case Studies	x	x	x	x	x	x
10	1	PACE Providers by State	x	x	x	x	x	x
10	2	Sources of Financing	x	x	x	x	x	x
10	3	PACE Financial Proforma and Users Guide	x	x		x		
10	4	PACE Baseline Financial Scenario	x	x	x	x		
Att. 1	1	NPA Web Site	x	x	x	x	x	x
Att. 1	2	New NPA PACE Providers: The Path From Interest to Start-Up	x	x	x	x	x	x
Att. 1	3	Recorded Developing PACE Education Series	x	x	x	x	x	x
Att. 1	4	Core Resource Set for PACE (CRSP)	x	x		x		
Att. 1	5	PACE Planning Resources Checklist	x	x	x	x	x	x
Att. 1	6	DataPACE	x					