



PACE Development Best Practices

For Policy Makers and
Program Sponsors

PRESENTED BY
Health Management Associates

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MEET THE TEAM



Don Novo

Managing Principal
San Francisco, CA

Dnovo@healthmanagement.com

- Nationally recognized expert in the Program of All-Inclusive Care for the Elderly (PACE)
- Over 20 years of direct experience in Medicaid policy and program administration.
- Has led much of HMA's national PACE work, supporting organizations nationwide with program development, strategic growth, and regulatory compliance.



Jason Pettry

Senior Consultant
Tallahassee, FL

Jpettry@healthmanagement.com

- Dedicated healthcare executive
- Over 10 years of experience with the Programs of All-Inclusive Care for the Elderly (PACE).
- Experience in operations, strategy, state and federal regulatory compliance, Dual Eligible, Medicare Advantage, Medicaid, Part D, and pharmacy benefit management (PBM).



Kristine Barrientos

Senior Consultant
Los Angeles, CA

Kmalana@healthmanagement.com

- Performance driven leader
- Over 10 years of experience in the Program of All-Inclusive Care for the Elderly (PACE) and Medicare Advantage, several in management roles.
- Background in clinical and operations senior leadership as well as social work.



PRESENTATION OVERVIEW

- » PACE Overview
- » Study Overview
- » Survey Results Discussion
 - » Non-Procurement States
 - » Procurement States
- » Appendix
 - » PACE Profile of Each State

“If you have seen one
Medicaid program, you
have seen one
Medicaid program.”



We compare states and
Medicaid programs to
inform, shape, and create
better policies and
programs, even though
every state is different.

INTRODUCTION

HMA conducted a
comparative analysis of
the PACE programs
across 10 states to learn
more about the **variation**
in state-level practices
and identify **best
practices**.



PACE OVERVIEW

WHAT IS THE PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY?



- » The Program of All-Inclusive Care for the Elderly (PACE) is a comprehensive, fully integrated, provider-based program for the frailest and costliest Seniors – those who require a nursing facility level of care and are able to live independently with the help of the PACE program.
- » The PACE philosophy is centered on the belief that it is better for frail individuals and their families to receive care in the community whenever possible. Although all PACE participants are eligible for nursing home care, over 95% continue to live at home.
- » PACE serves over 82,000 participants aged 55 or older and certified by their state as needing a nursing home level of care.
- » Congress authorized PACE as a permanent Medicare provider and Medicaid state option in the Balanced Budget Act of 1997 by establishing Sections 1894 (42 U.S.C. 1395eee) and 1934 (42 U.S.C. 1396u-4) of the Social Security Act.

WHY PACE?



KEEPS PEOPLE IN THE COMMUNITY

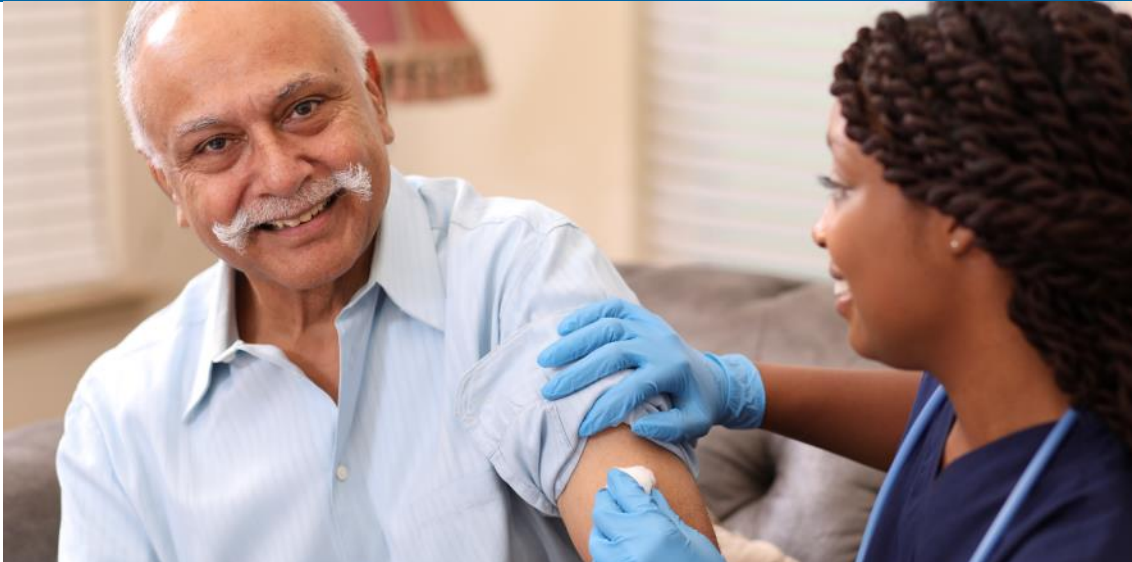
- » Decrease in participant hospitalizations, emergency department visits, or becoming institutionalized
 - » Average less than one ED visit per year⁵
 - » 60% lower preventable hospitalization rate⁶
 - » 16% lower readmission rates⁷

COST EFFECTIVE

- » 13-17% less expensive compared to what the federal government would otherwise spend on this population
- » 12-15% cost savings for states for dual participants⁸
 - » Expected \$369.4 million savings in CA in 2024⁹
- » Saves at least \$10,000 per participant per year



WHY PACE?



SATISFACTION

- » 92% satisfaction rate among enrolled PACE participants¹⁰
- » 97% of family caregivers would recommend PACE

QUALITY OF LIFE

- » 33% increase in life expectancy¹¹
- » 4 additional years of independence for older frail adults who are eligible for nursing home-level of care¹²
- » 80% reduction in depression scores¹³

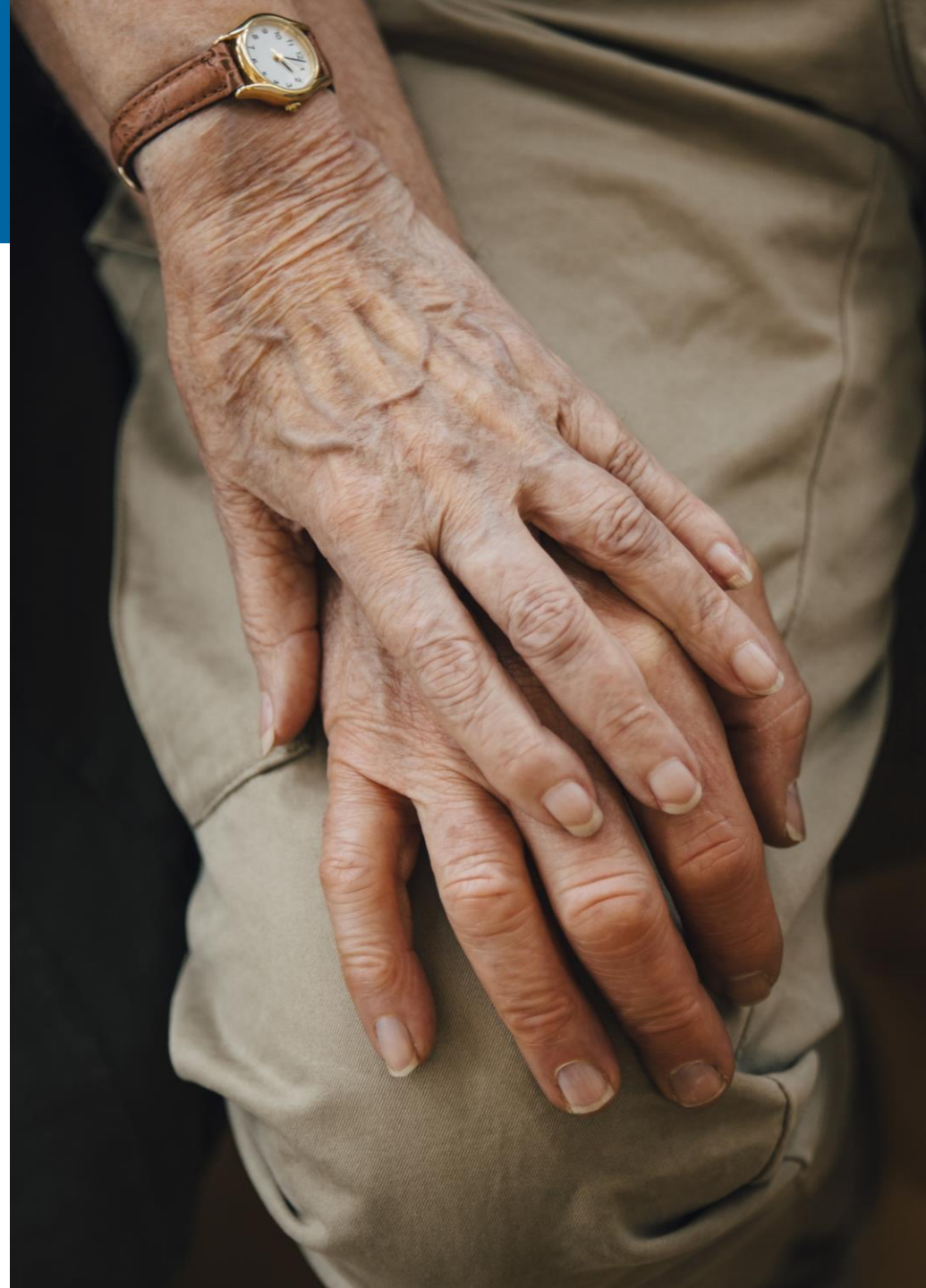




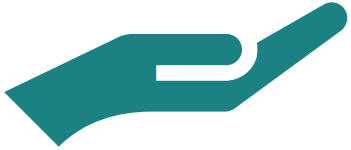
STUDY OVERVIEW

PROJECT OVERVIEW: ABOUT THE STUDY & SURVEY

- » **Purpose:** To examine PACE implementation across 10 active PACE states that have implemented new PACE programs or expanded existing state program capacity designed to answer the following questions:
 - » What is the opportunity to expand PACE programs in states, based on state practices governing the process to operate in a state?
 - » Why does this question matter today?
- » **Scope:** Understanding state-level practices, challenges, and opportunities for improvement.
- » **Methods:** Comprehensive survey distributed to state PACE administrators via Qualtrics.
- » Study of publicly available state and federal program data and policies



PRESENTATION OBJECTIVES



Unmet Need Identification

Implications on PACE
access and growth



State-by-State Differences

Non-procurement model
—
Request for Proposals



Financial Standards

Impact on program growth
and sustainability



Best Practices

Recommendations
and justifications

DEFINING “NON-PROCUREMENT” VS. “PROCUREMENT” STATES



NON-PROCUREMENT STATES

Defined as states that do not use an RFP or RFI

- » Allows interested organizations to submit a letter of intent and initial market needs analysis, followed by an application
- » Non-competitive contracts that meet strict federal and state provider requirements that enable the delivery of comprehensive, integrated care.
- » Referred to as “non-procurement” states throughout this presentation

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PROCUREMENT STATES

Defined as states that use a structured tool like an RFP

- » RFPs facilitate PACE development through new programs or existing PACE program expansions
- » Competitive procurement is a structured process where organizations are evaluated based on predefined contracting criteria
- » Referred to as “procurement” states throughout this presentation

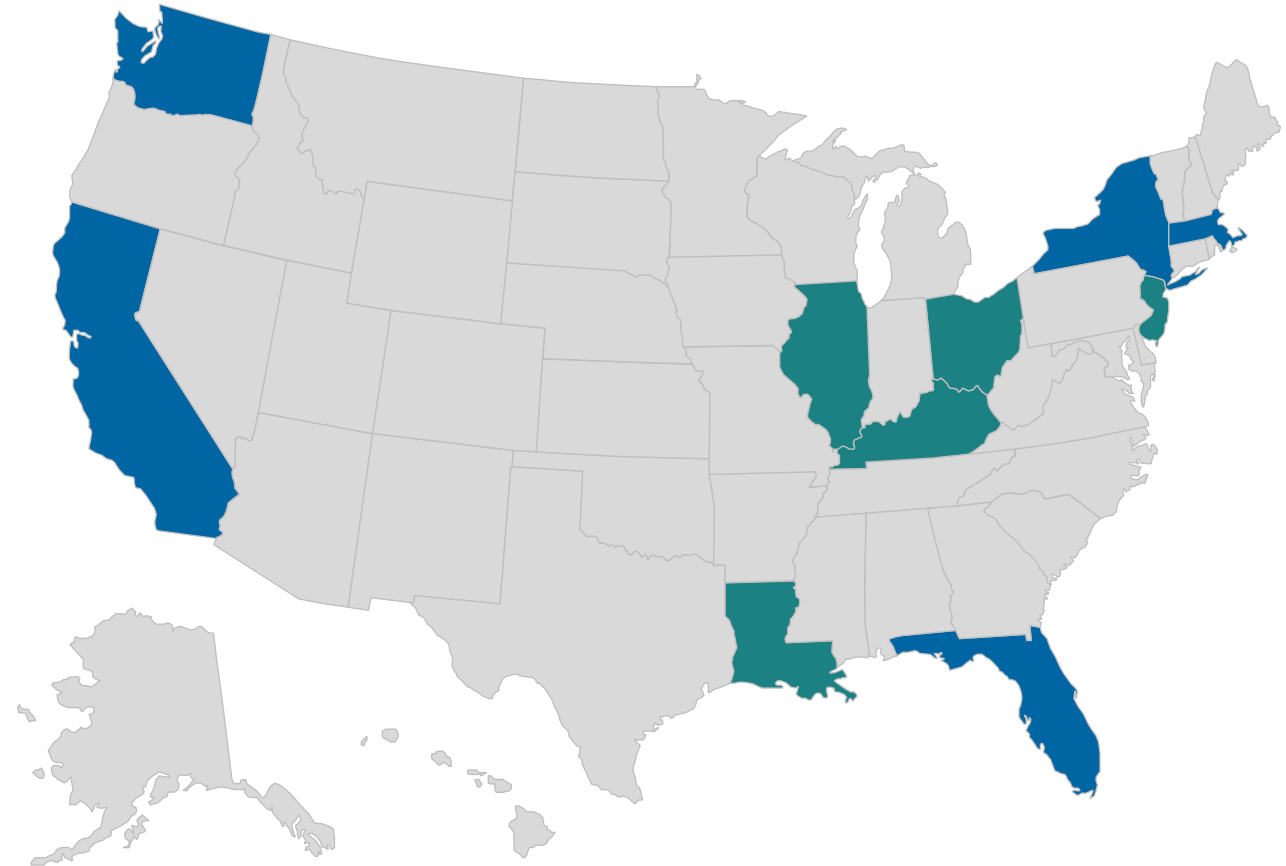
STATES COVERED IN STUDY

Non-Procurement States

- » California
- » Florida
- » Massachusetts
- » New York
- » Washington

Procurement States

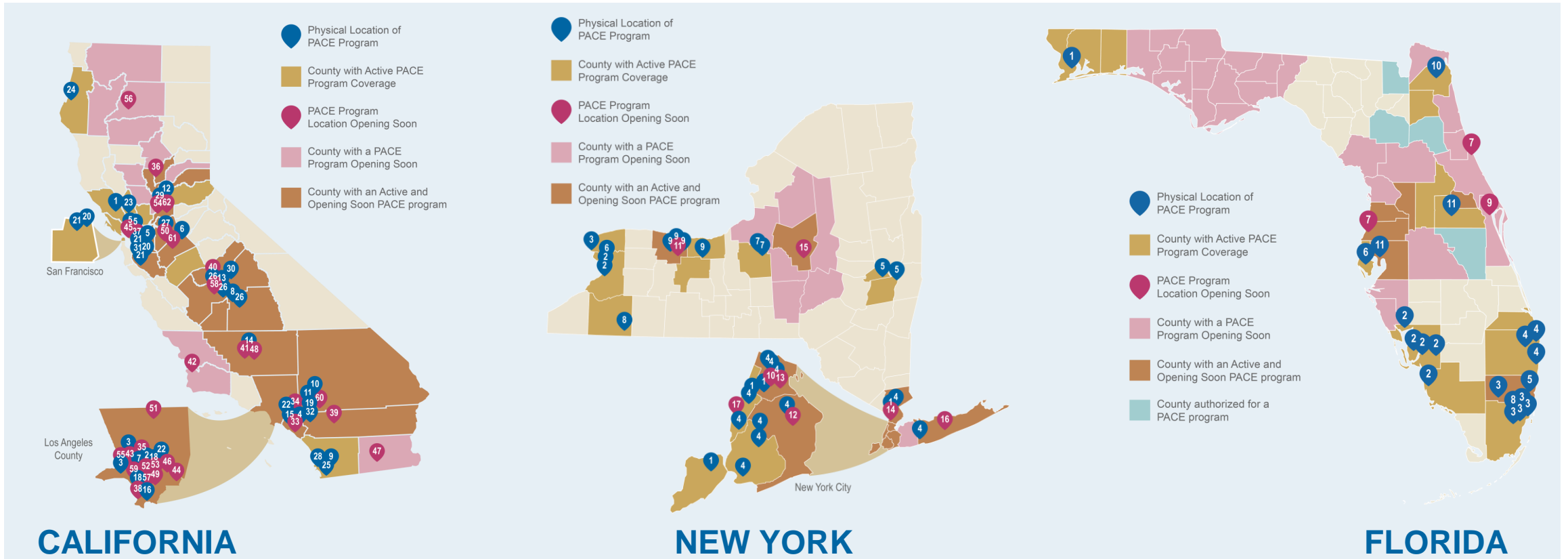
- » Illinois
- » Kentucky
- » Louisiana
- » New Jersey
- » Ohio





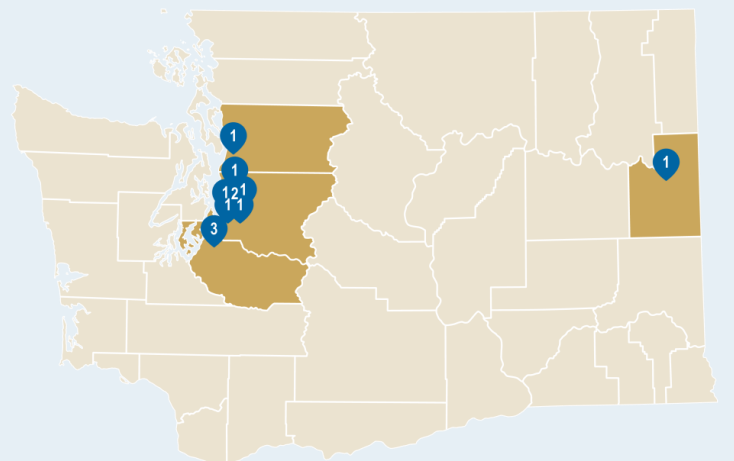
**HOW DO
STATES
IDENTIFY
UNMET
NEED?**

NON-PROCUREMENT STATES

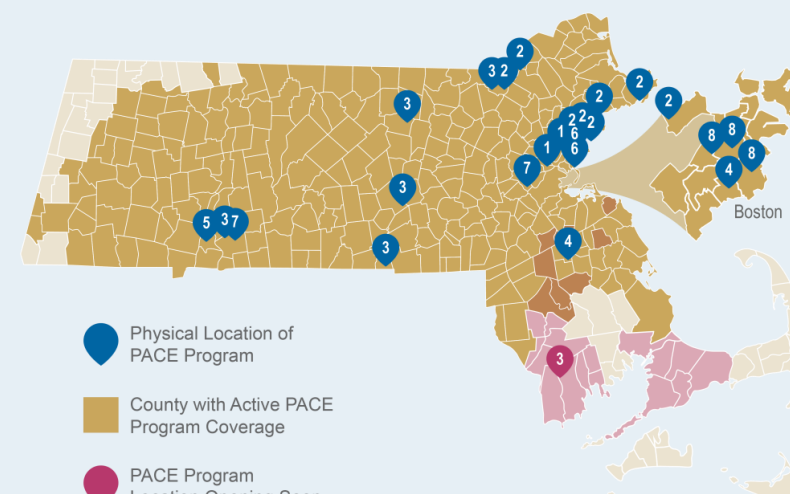


Formal process: PACE Program-driven feasibility study with market estimate data

NON-PROCUREMENT STATES



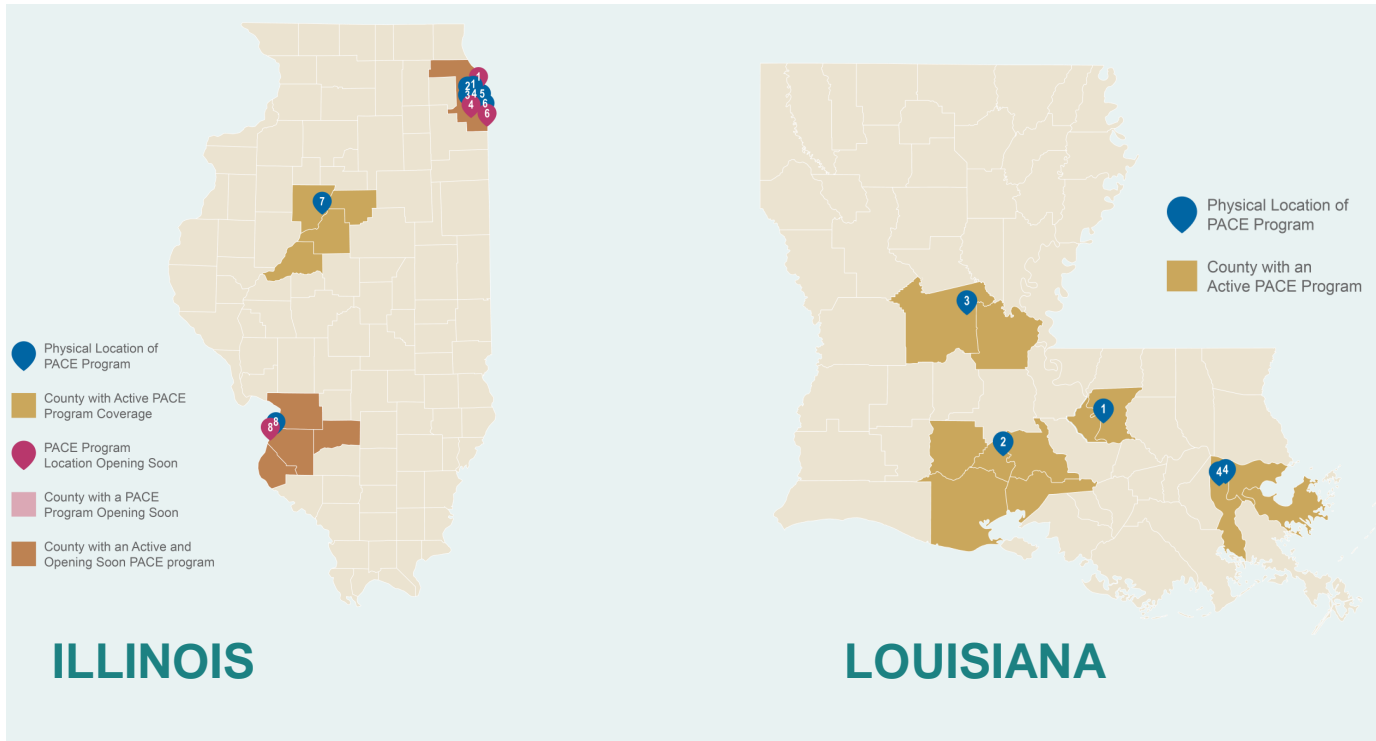
WASHINGTON



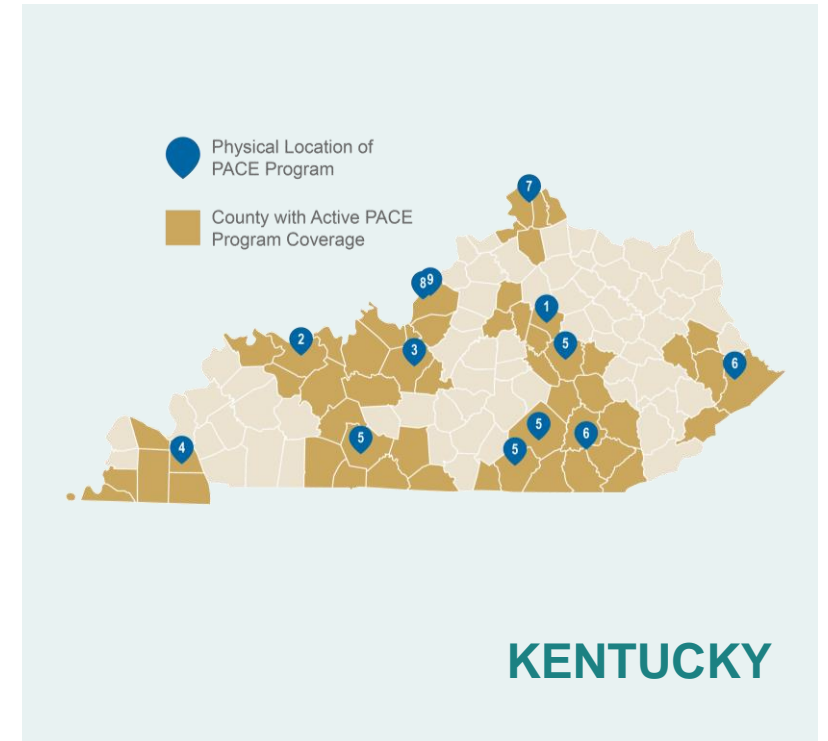
MASSACHUSETTS

Formal process: PACE Program-driven feasibility study with market estimate data

PROCUREMENT STATES

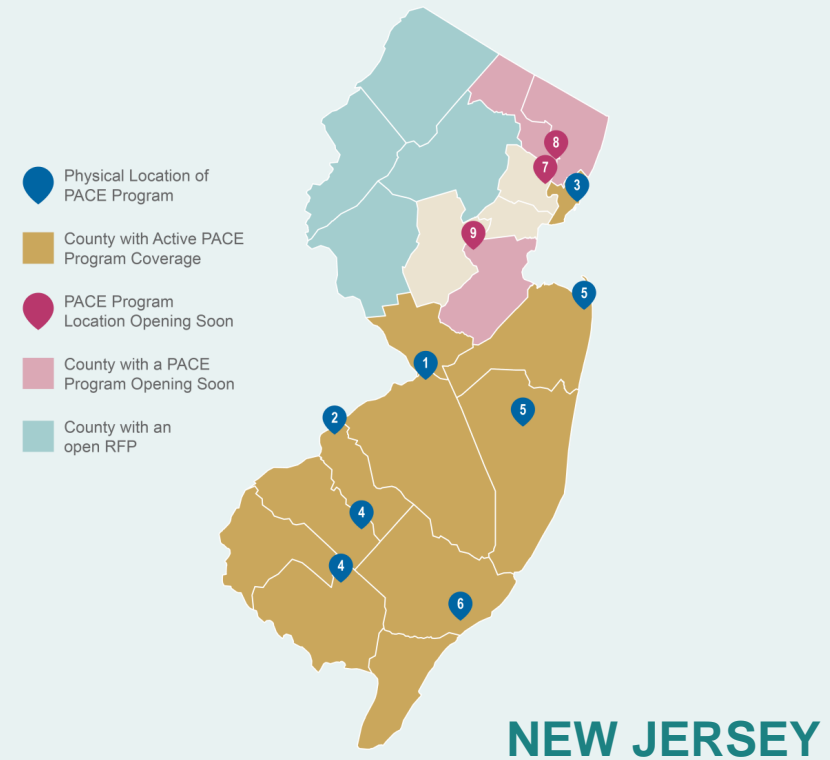
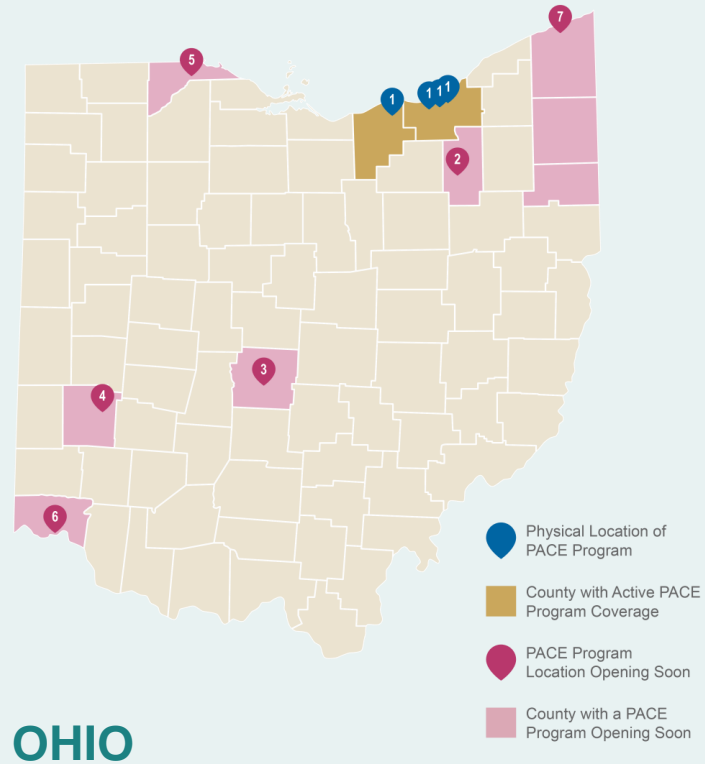


Formal process:
state provided feasibility data and market estimates



Interpreted to mean
“lack of a PO in a [service] area”

PROCUREMENT STATES



Formal process: state provided feasibility data and market estimates

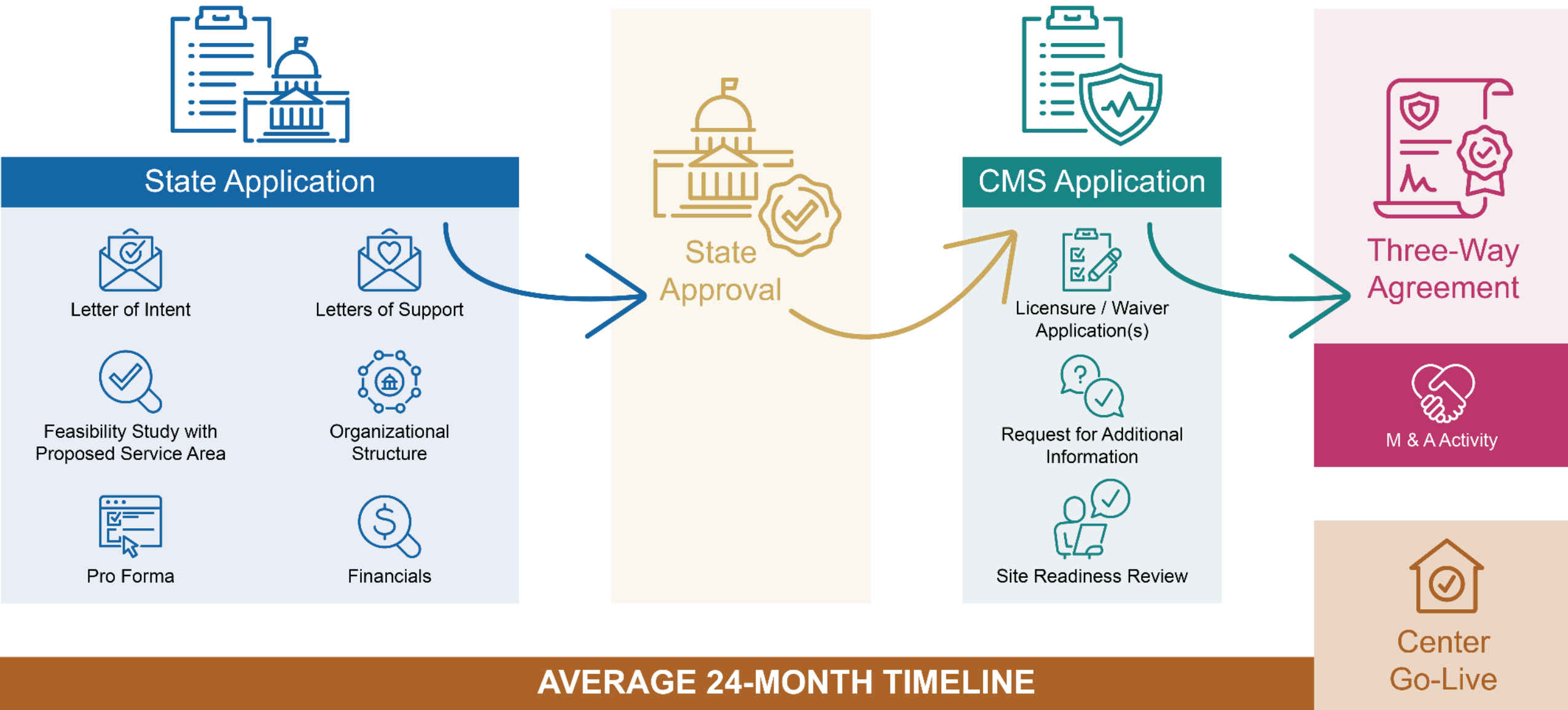
IMPLICATIONS FOR IDENTIFYING UNMET NEED

- » States that **predetermine** “unmet need” have experienced **slower** PACE growth
 - » OH did not open a new PO between 1997-2024
 - » NJ has not opened a new PO since 2017
 - » IL opened 3 new PACE sites in 2024, with 4 additional POs still in development
- » States that allow **PACE applicants to present** “unmet need” experienced **more rapid** PACE growth
 - » CA, FL, and WA have opened a combined 23 centers between new and existing operators in the last five years

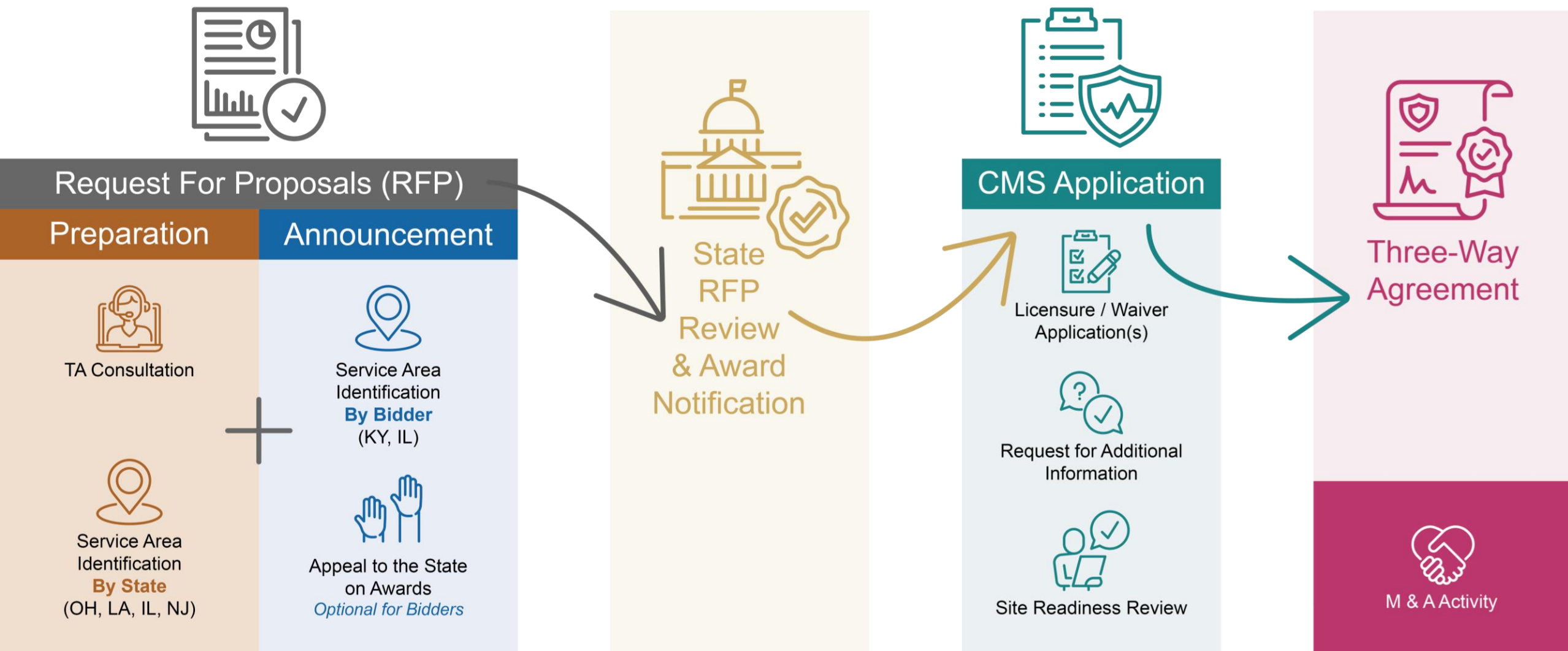


STATE-BY- STATE DIFFERENCES

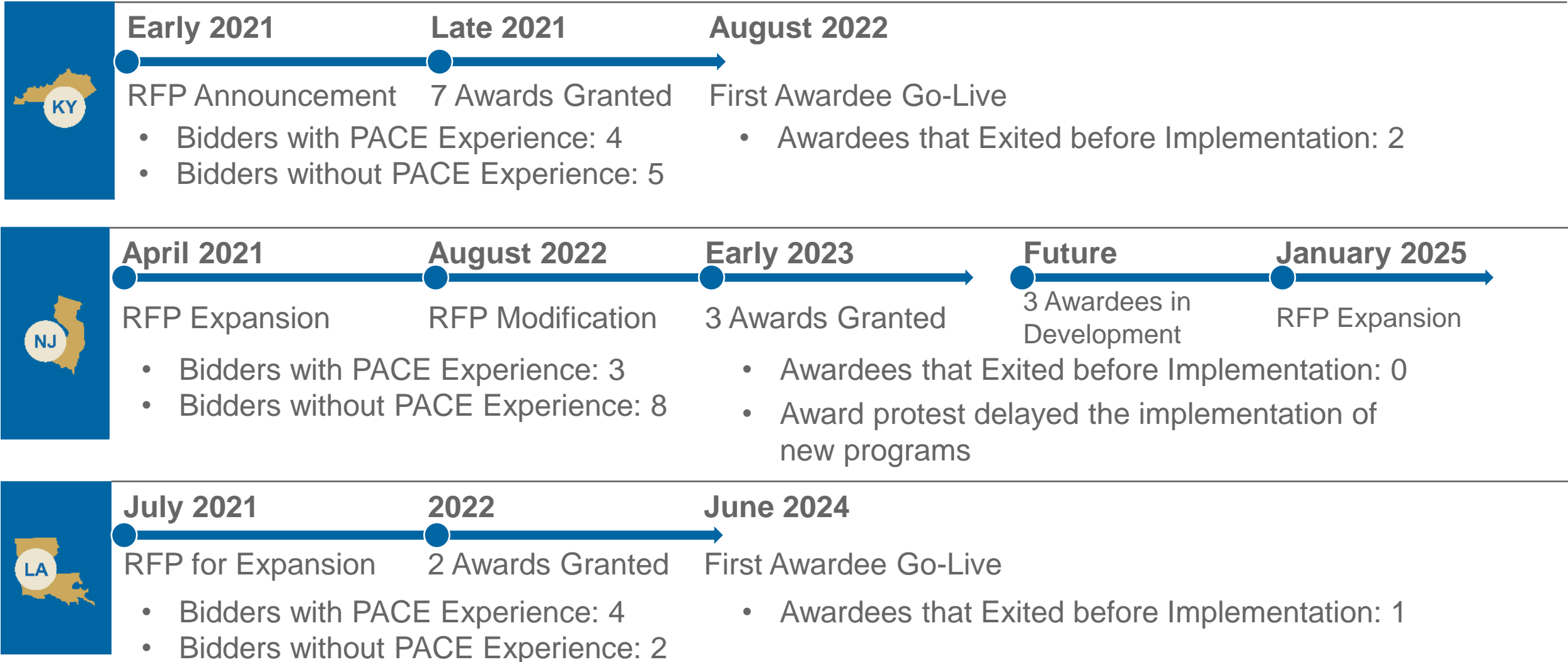
STANDARD APPLICATION PROCESS IN NON-PROCUREMENT STATES



STANDARD APPLICATION PROCESS IN PROCUREMENT STATES



RFP HISTORY IN PROCUREMENT STATES



PROCUREMENT HISTORY IN CLOSED STATES CONT.



UNDERSTANDING MERGER AND ACQUISITION ACTIVITY

- » States utilizing RFPs have a history of awarding service areas to non-experienced PACE operators
 - » This has resulted in awardees which exit prior to opening, or never open
 - » Merger and acquisition (M&A) activity is more prevalent amongst non-experienced operators
 - » M&As prolong the opening of PACE sites and can result in geographic regions being unserved, further increasing the unmet need population
- » Giving experienced PACE operators greater consideration during the RFP evaluation process would decrease market exits and M&As



RFP LIMITATIONS

- » Limits growth, access, and coverage
- » Inexperienced awardees exiting prior to opening
 - » No solution for replacing/re-awarding if exits occur
- » Longer timeline from RFP announcement to go-live

SERVICE AREA OVERLAP - *Definition*


How Service Area Overlap is interpreted

- » POs offering PACE services in the same area
- » Multiple POs covering the same zip codes
- » PO competition

No universal policy that defines Service Area Overlap

- » Some states have a formal process as long as a viable market feasibility study is included, where it's allowed unilaterally across the board like CA

SERVICE AREA OVERLAP - *California*

Category	Subcategory	Criteria
 Service Area Overlap with Existing PACE Operator	Service Area Overlap	Overlap includes less than 25% of potential participants in existing service area
		Overlap includes between 25% and 50% of potential participants in existing service area
		Overlap includes between 50% and 75% of potential participants in existing service area
		Overlap includes over than 75% of potential participants in existing service area
	Facility Overlap	Proposed service area includes existing PACE facility or alternative care setting
		Proposed service area does not include existing PACE facility or alternative care setting

SERVICE AREA OVERLAP – *Non-Procurement States*

Allows Overlap

- » Overlap has primarily been in larger, urban service areas where penetration rates are higher
 - » Guardrails are in-place to avoid impacting other POs serving the same area
- » CA allows overlap without restriction
- » MA and NY allow overlap in some specific service areas
 - » MA allows overlap where economically feasible



Does Not Allow For Overlap

- » FL has some approved counties with overlap that pre-dates the state's current policy (Hillsborough and Miami-Dade)
 - » FL reported upholding this process to ensure stability amongst existing POs
- » WA only allows overlap in one (Kings) County in limited zip codes



SERVICE AREA OVERLAP - *Procurement States*

Service area overlap is not permitted among any of the procurement states

» There were no reported policies that support this

Procurement states attributed this process towards ensuring stability amongst existing POs

» There were no reported definitions or processes shared to determine stability amongst existing POs

SERVICE AREA OVERLAP - *Takeaways*

Allowing overlap of PACE programs:



Promotes faster growth



Promotes access



Promotes freedom of choice



Increases service area capacity



LICENSURE / WAIVER REQUIREMENTS

Varying differences in what each state requires above and beyond the Federal PACE regulations



Adult Day Center Licenses

REQUIRED BY

- >> 1 “non-procurement” state (FL)
- >> 2 “procurement” states (KY, LA)

CA requires an Adult Day Center Waiver



Primary Care Clinic Licenses

REQUIRED BY

- >> 1 “non-procurement” state (NY)

CA requires a Primary Care Clinic Waiver



Home Health Licenses

REQUIRED BY

- >> 2 “non-procurement” states (NY, WA)
- >> 1 “procurement” state (OH)

CA requires a Home Health Waiver



Ambulatory Care Center Licenses

REQUIRED BY

- >> 1 “procurement” state (NJ)



Health Plan Licenses

REQUIRED BY

- >> 1 “non-procurement” state (NY)



POTENTIAL BARRIERS THAT MAY DELAY PACE GROWTH

Varying State Policies Regarding Budgetary/Enrollment Caps



Enrollment Caps



Funding Slots

BUDGETARY FUNDING/ENROLLMENT CAPITATION - *Open States*

Does Not Impose Funding/Enrollment Caps

- » While CA does not limit enrollments, the state requires new applicants to complete an enrollment projection forecast. POs that exceed their forecast may be subject to enrollment limitations



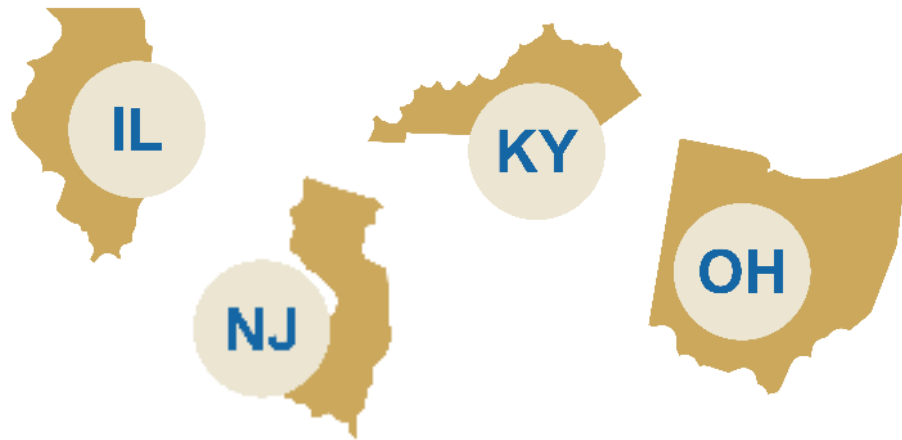
Imposes Funding/Enrollment Caps

- » PO level enrollment caps based on funded slots
- » On average, newer POs have an enrollment cap of approximately 200
- » With the addition of an enrollment cap, there is potential for a greater unmet need population



BUDGETARY FUNDING/ENROLLMENT CAPITATION - *Closed States*

Does Not Impose Funding/Enrollment Caps



Imposes Funding/Enrollment Caps

- » On average, newer POs from this state had an enrollment cap of approximately 200
- » LA does not allow service area overlap. With the addition of an enrollment cap, there is potential for a greater unmet need population



PARTICIPANT ELIGIBILITY FOR PACE



LEVEL OF CARE (LOC) ASSESSMENTS

- » LOC Assessments ensure participants meet nursing level of care criteria (a PACE eligibility requirement)
- » Required for all PACE programs
 - » Responsibility for completion varies state by state
- » States can choose to do the LOC Assessments themselves, or allow the POs to complete with the state's retrospective review





**FINANCIAL
STANDARDS
IMPACTING**
*PACE GROWTH +
SUSTAINABILITY*

FINANCIAL ELIGIBILITY STANDARDS

\$ Participant must have a monthly income **at or under** a percentage of the **Federal Poverty Level** (FPL) or **Federal Benefit Rate** (FBR)

	Medicaid Eligibility Income ⁴	% of the FPL/FBR
Non-Procurement States	CA \$1,801	138% FPL
	NY \$1,801	138% FPL
	FL \$2,901	300% FBR
	WA \$2,901	300% FBR
	MA \$2,901	300% FBR
Procurement States	IL \$1,304	100% FPL
	LA \$2,901	300% FBR
	KY \$2,901	300% FBR
	OH \$2,901	300% FBR
	NJ \$2,901	300% FBR



DIFFERENCES IN MEDICAID ELIGIBILITY AFFECTING ENROLLMENT

- » States with lower income qualifications (FPLs/FBRs) have smaller market estimates
- » Limits access to PACE Services
- » Increases unmet need population

LEVEL OF CARE (LOC) ASSESSMENTS







Participants must meet nursing level of care criteria (a PACE eligibility requirement)



Required for all PACE programs



States can choose to do the LOC Assessments themselves, or allow the POs to complete with the state's retrospective review

	Who initiates the LOC assessment	Average time for determination
Non-Procurement States	 PACE Organization	5 days
	 PACE Organization	5 days
	 PACE Organization with 3rd Party Review	30 days
	 State	3-5 weeks
	 State	30 days
Procurement States	 PACE Organization	2 Weeks
	 PACE Organization	5-7 Days
	 PACE Organization	48 Hours
	 PACE Organization	10-15 Days
	 State	TBD

DIFFERENCES IN LOC ASSESSMENT PROCESSES AFFECTING ACCESS

- » States who require the LOC to be conducted by the state directly versus the POs experience much higher determination timeframes
- » Bottlenecks growth – potential enrollees find alternative coverage during the waiting period
- » Potential enrollees experience decreased or worsening conditions during the waiting period
- » Limits access for potential PACE enrollees



ANNUAL RATE DEVELOPMENT PROCESS

All non-procurement states surveyed

have a defined annual rate development process

- » Utilize actuarial support
- » **Massachusetts:** rates shared with PACE organizations and complete mid-year meeting to announce adjustments
- » **New York:** follows other public health insurance program rate-setting requirements
- » **Washington:** rebase rates and adjust for fee schedule changes yearly

4 of 5 procurement states do not have a defined annual rate development process:

- » **Illinois**
- » **Kentucky**
- » **Louisiana**
- » **New Jersey**



Implications for Lacking an **ANNUAL RATE DEVELOPMENT PROCESS**

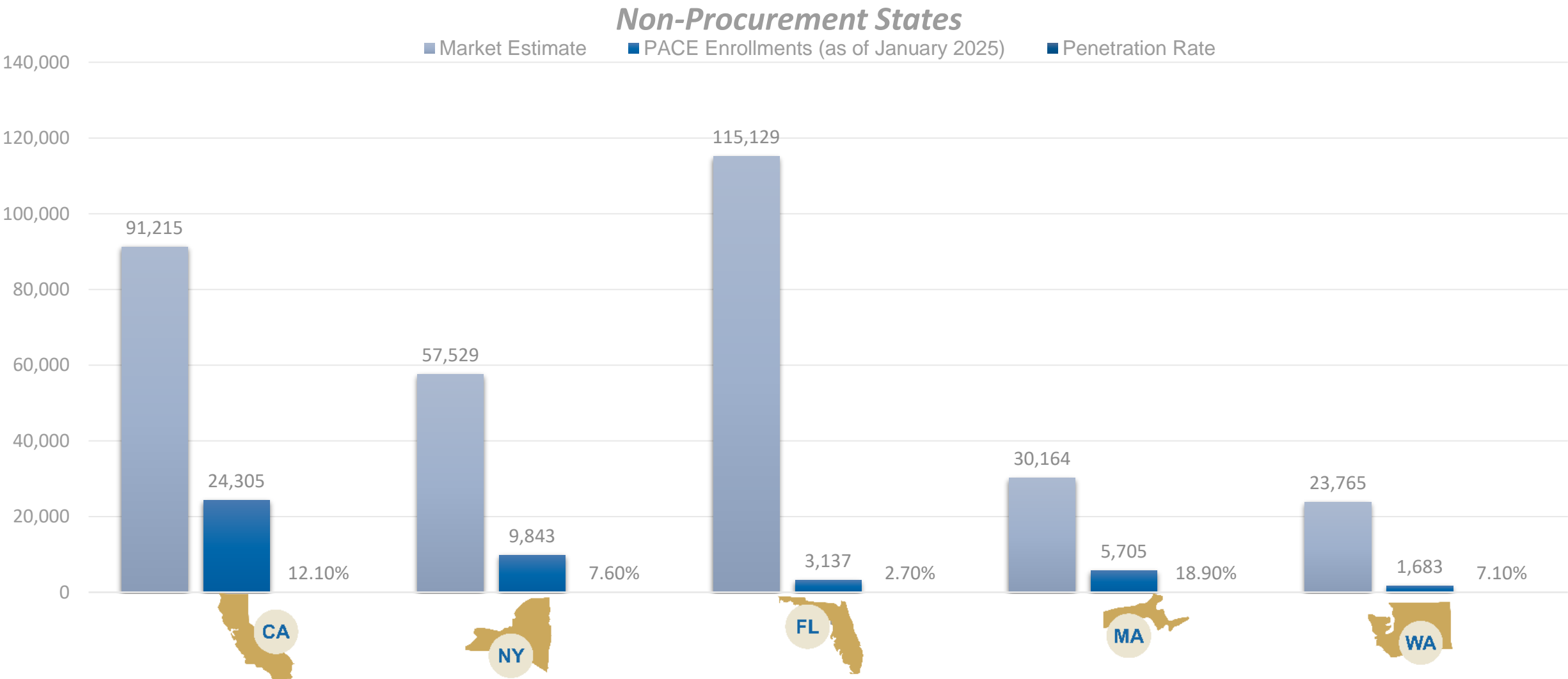
- » Financial strain on POs
 - » Rates not keeping up with the medical cost of care
- » Diminished interest in new PACE entrants
- » Lack of trust in state support



STATE DIFFERENCES + FINANCIAL STANDARDS:

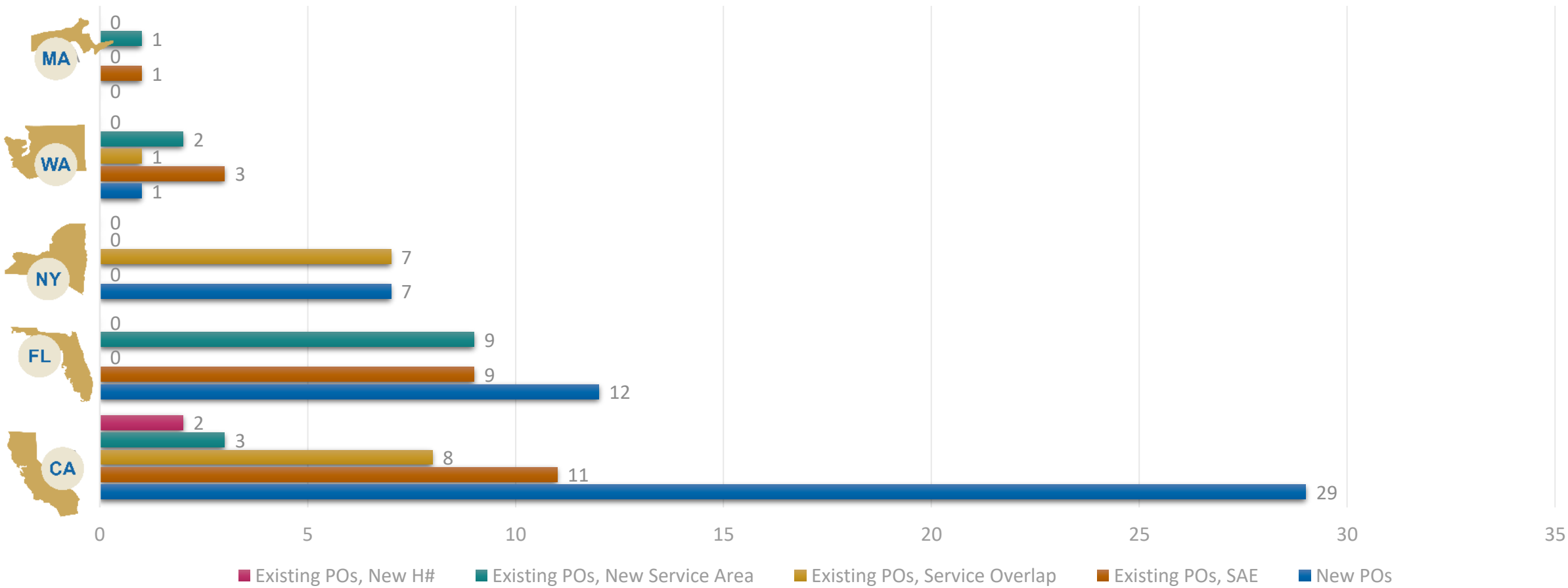
*Impact on Service
Delivery to the
Unmet Need
Population*

MARKET ESTIMATES

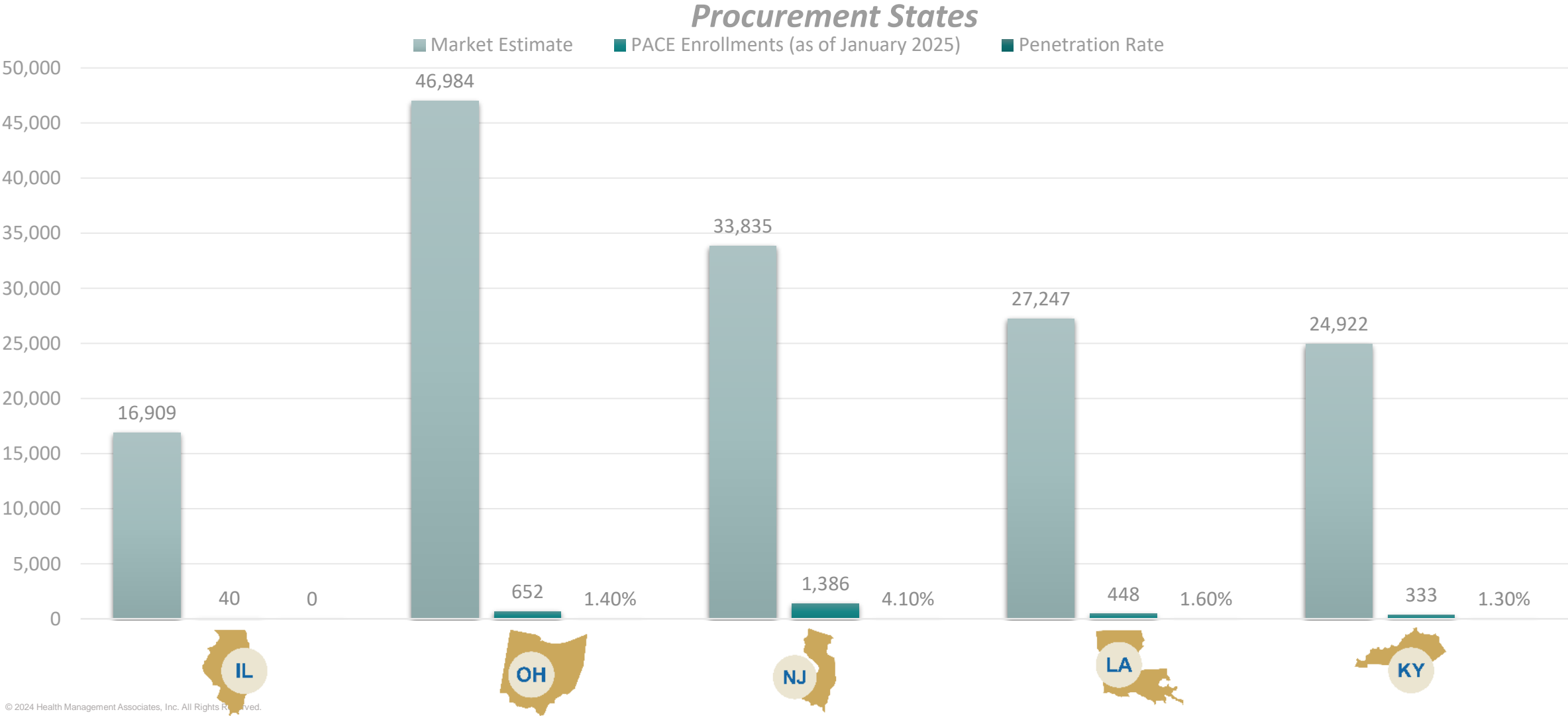


CURRENT PACE GROWTH – *Non-Procurement States*

Current Applications

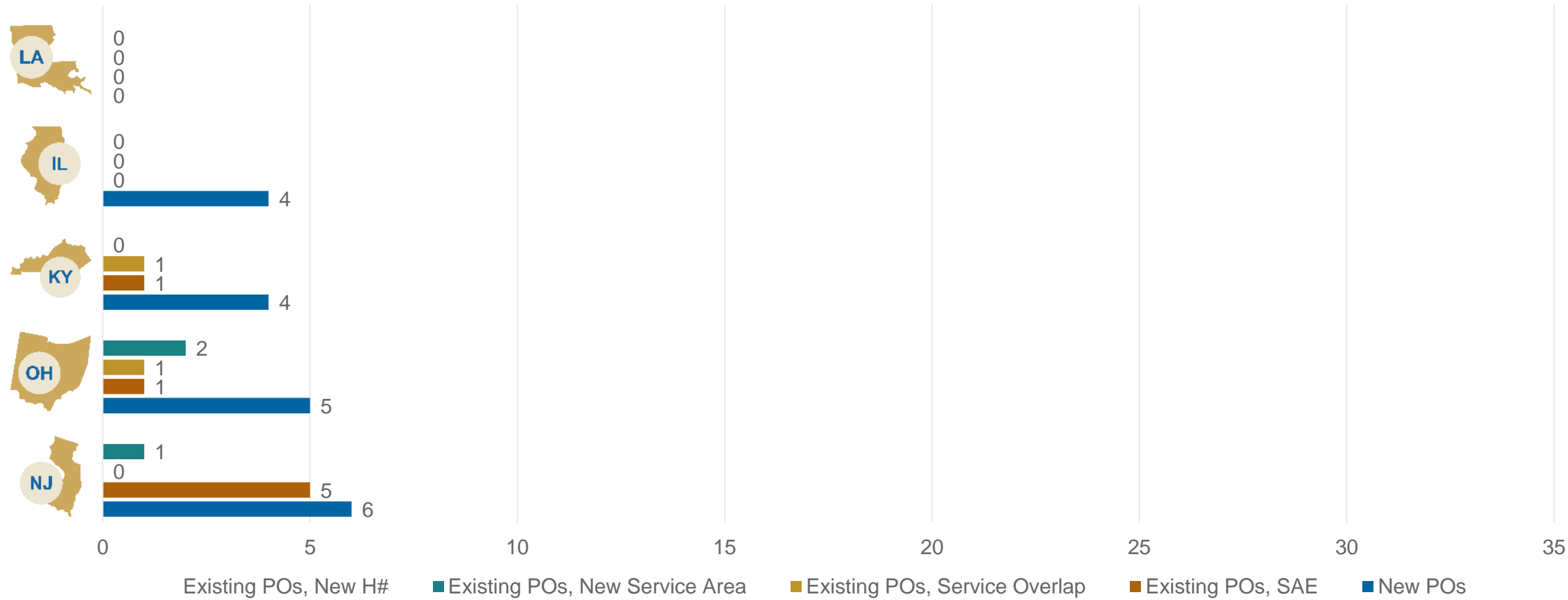


MARKET ESTIMATES



CURRENT PACE GROWTH - *Procurement States*

Current Applications



CORRELATION OF ACCESS TO PACE SERVICES



NON-PROCUREMENT STATES

- » Higher market penetration rates, closing the gap for the “unmet need” population
- » Provides support in facilitating the connection to access starting with a well-defined process for identifying unmet need and through an efficient application process



PROCUREMENT STATES

- » Lower market penetration rates
- » Limits PACE access and growth
- » Expands care gaps for the aging population

BEST PRACTICES



CONSISTENT APPLICATION PROCESSES ACROSS STATES

- » Creates operational consistencies for PO's, especially those who operate in multiple states

OPEN APPLICATION FORMAT

- » Allows for increased access and faster growth

IMPROVING AND STANDARDIZING THE RFP PROCESS

- » Prioritize PACE experience in the evaluation process
- » Ensuring a plan for replacement awardees in the event of exits before implementation
 - » Ensure a plan that makes awardees responsible for implementation and operation



BEST PRACTICES *Continued*



CONSISTENT ANNUAL RATE DEVELOPMENT

- » Ensures financial feasibility and commitment to the program

ELIMINATING IMPOSED BUDGETARY FUNDING / ENROLLMENT CAPITATIONS

- » Bridges the gap in serving the unmet need



BEST PRACTICES *Continued*



FORMALIZE THE PROCESS FOR IDENTIFYING UNMET NEED THROUGH PO-DRIVEN MARKET FEASIBILITY

- » Facilitates enhanced access and growth of PACE
- » Allows states to set service area saturation thresholds (ex. 50% or higher)

ALLOW SERVICE AREA OVERLAP

- » Promotes access
- » Promotes freedom of choice
- » Increases service area capacity
- » Provides multiple provider options for the community

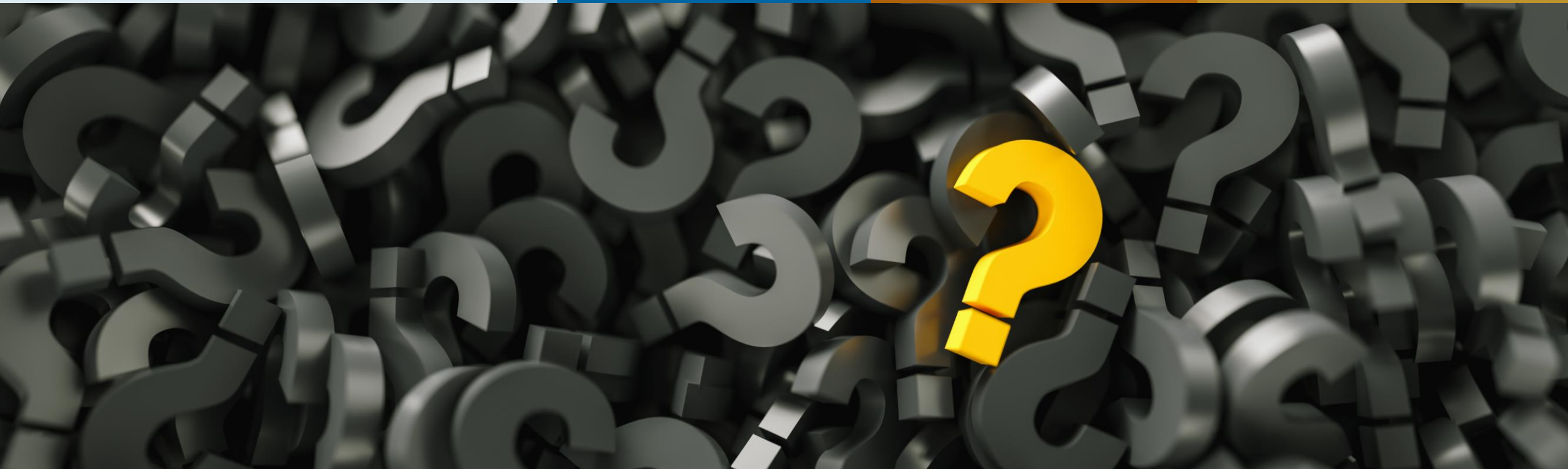


Looking Ahead – Engagement Questions

Why do these
findings
matter?

Do the findings
resonate with
you?

What would you
like to see HMA
explore further?





THANK YOU!

We wish to thank
the following states
for participating in
this research:

*California, Florida,
Massachusetts, New York,
Washington; and, Illinois,
Kentucky, Louisiana, New
Jersey, Ohio*



QUESTIONS?

Please reach out to HMA if you are interested to learn more



Don Novo

Managing Principal

Dnovo@healthmangement.com



Jason Pettry

Senior Consultant

JPetry@healthmanagement.com



Kristine Malana

Senior Consultant

Kmalana@healthmanagement.com



APPENDIX

NON-PROCUREMENT STATE PROFILES



Brief History

- » California plays a key role in the development of the PACE model and the launch of PACE replication efforts.
- » 1973 - On Lok opened one of the nation's first adult day centers and began receiving Medicaid reimbursement for adult day services in 1974.
- » 2003 - AB 798, established PACE as an optional Medi-Cal benefit and making PACE a permanent provider in California.
- » 2007 - CalPACE was formed as the nation's first state PACE trade association.
- » 2016 - California Legislature passed the PACE Modernization Act Trailer Bill that included updates to the payment and regulatory structure of PACE.

STATE PROFILE - *California*



Brief History

- » 2019 - Governor Brown signed into law the legislation approved by the legislature under Assembly Bill (AB) 1128, referred to as the PACE Modernization Act, which included:
 - » Removal of the cap on the total number of PACE Organizations that operate in CA
 - » The allowance of for-profit entities to participate in the PACE program
 - » Set operations implementation date for new or expansion PACE programs to be Jan 1st or July 1st annually to coincide with CMS, and the state budget and financial rate setting development processes
 - » Moved the PACE licensing functions from the CA Department of Public Health to the Department of Health Care Services
- » 2022 - Medi-Cal Older Adult Expansion granted full-scope Medi-Cal benefits to adults 50 years of age or older without regard to meeting the federal requirements of having a satisfactory immigration status that qualifies residents for federally funded Medi-Cal services.
- » 2024 - 91 PACE centers and alternative care sites serve California. Enrollment surpasses 20,000.
- » Most recent PACE program start date: 1/1/2025 (Asian Heritage PACE, Chinatown Service PACE, Habitat Health, and Seen Health)



Brief History Cont.

2024 - Enrollment surpasses 20,000 with 91 PACE centers and alternative care sites serving California

Most recent PACE program start date: 1/1/2025 (Asian Heritage PACE, Chinatown Service PACE, Habitat Health, and Seen Health)

State PACE Details

- » Approximate time to site a new PACE facility: 24 + months.
- » PACE enrollment: five business days.
- » No caps on PACE growth.
- » PACE Waiver Requirements: Adult Day Care, Primary Care, and Home Health
- » February 2025 Enrollment: 24,635

STATE PROFILE - *California*

California PACE Operators	Counties Served
AgeWell PACE	Marin County, Sonoma County
AltaMed Senior Buena Care	Los Angeles County, Orange County
BoldAge PACE	Fresno County
Brandman Centers for Senior Care PACE	Los Angeles County
CalOptima PACE	Orange County
Center for Elders' Independence PACE	Alameda County, Contra Costa County
Central Valley PACE	San Joaquin County, Stanislaus County, Merced
Family Healthcare Network	Kings County, Tulare County
Family Health Centers of San Diego PACE	San Diego County
Gary and Mary West	San Diego County
Habitat Health Sacramento	Sacramento County
HeritAge PACE	Los Angeles County
High Desert PACE	Los Angeles County, Riverside County
InnovAge PACE	Riverside County, San Bernardino County, Los Angeles County, El Dorado County, Placer County, Sacramento County, San Joaquin County, Sutter County, Yuba County
Innovative Integrated Health	Fresno County, Kern County, Tulare, Orange



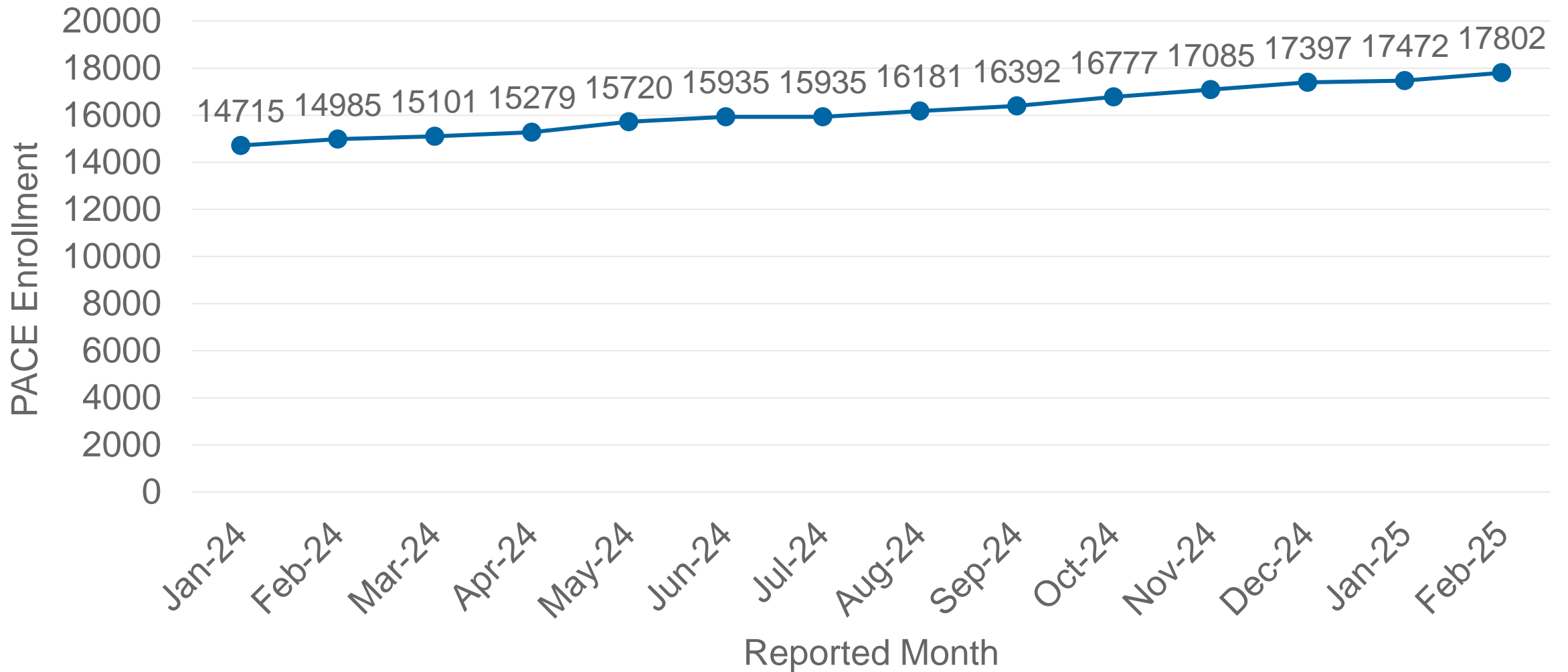
Source: Cal PACE

STATE PROFILE - *California*

California PACE Operators	Counties Served
Loma Linda University Health PACE	Riverside County, San Bernardino
myPlace PACE	Los Angeles County
Neighborhood Healthcare PACE	San Bernardino County
North East Medical Services (NEMS)	San Francisco County
On Lok PACE	Alameda County, San Francisco County, Santa Clara County
Providence PACE	Napa County, Solano County, Sonoma County
Redwood Coast PACE	Humboldt County
San Diego PACE	San Diego County
St. Paul's PACE	San Diego County
Sutter SeniorCare PACE	Sacramento County
Valley PACE	Fresno County, Madera County
Welbe PACE	Alameda County, Santa Clara County, Los Angeles County, Fresno County, Kings County, Madera County, Tulare County, San Joaquin County, Stanislaus County, Riverside County, San Bernardino County



CALIFORNIA 2024 MONTHLY PACE ENROLLMENT





Brief History

- 1998: The Florida Legislature authorized PACE programs to operate in the state's Medicaid program SB 778 codifies the Program of All-Inclusive Care for the Elderly (PACE) in s. 430.84, F.S.
- 2003: The first PACE program became operational in Miami-Dade County.
- By the 2010s, more organizations, including nonprofit providers and healthcare systems, began implementing PACE programs in Florida.
- Most recent PACE program start date: 5/1/2024 (Trinity Health PACE of Pensacola)

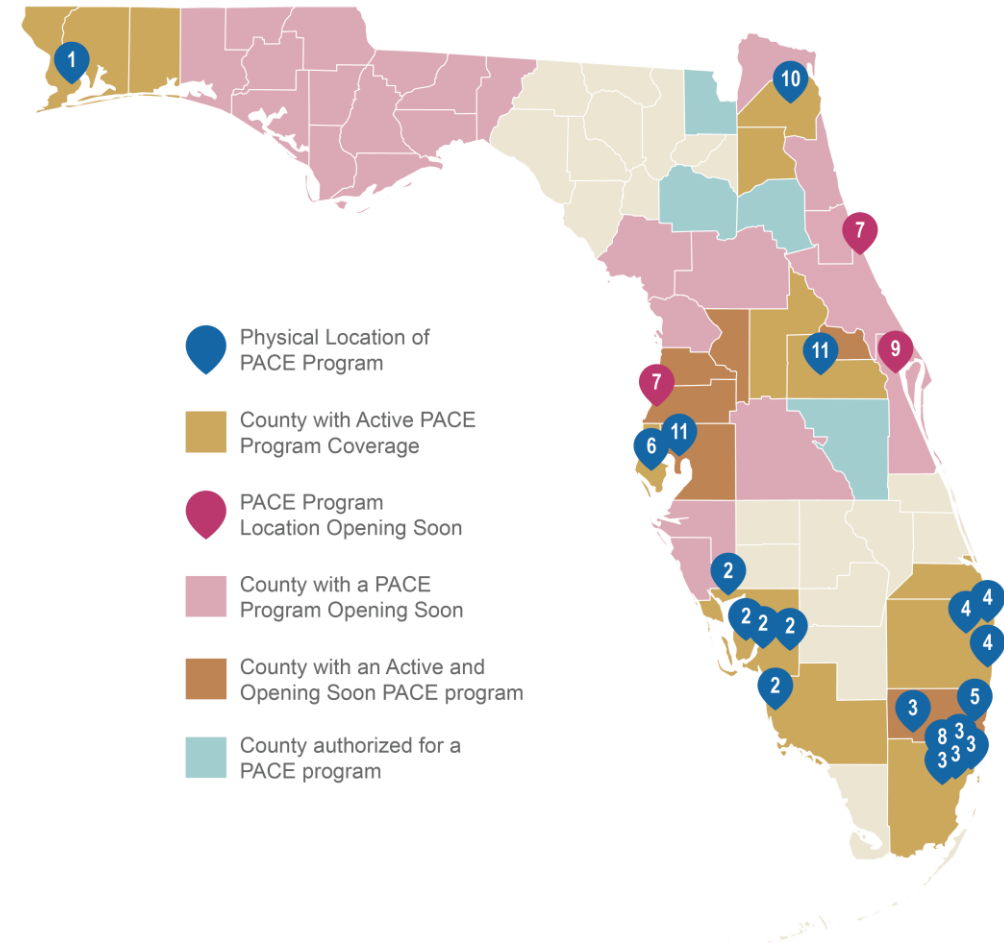


State PACE Details

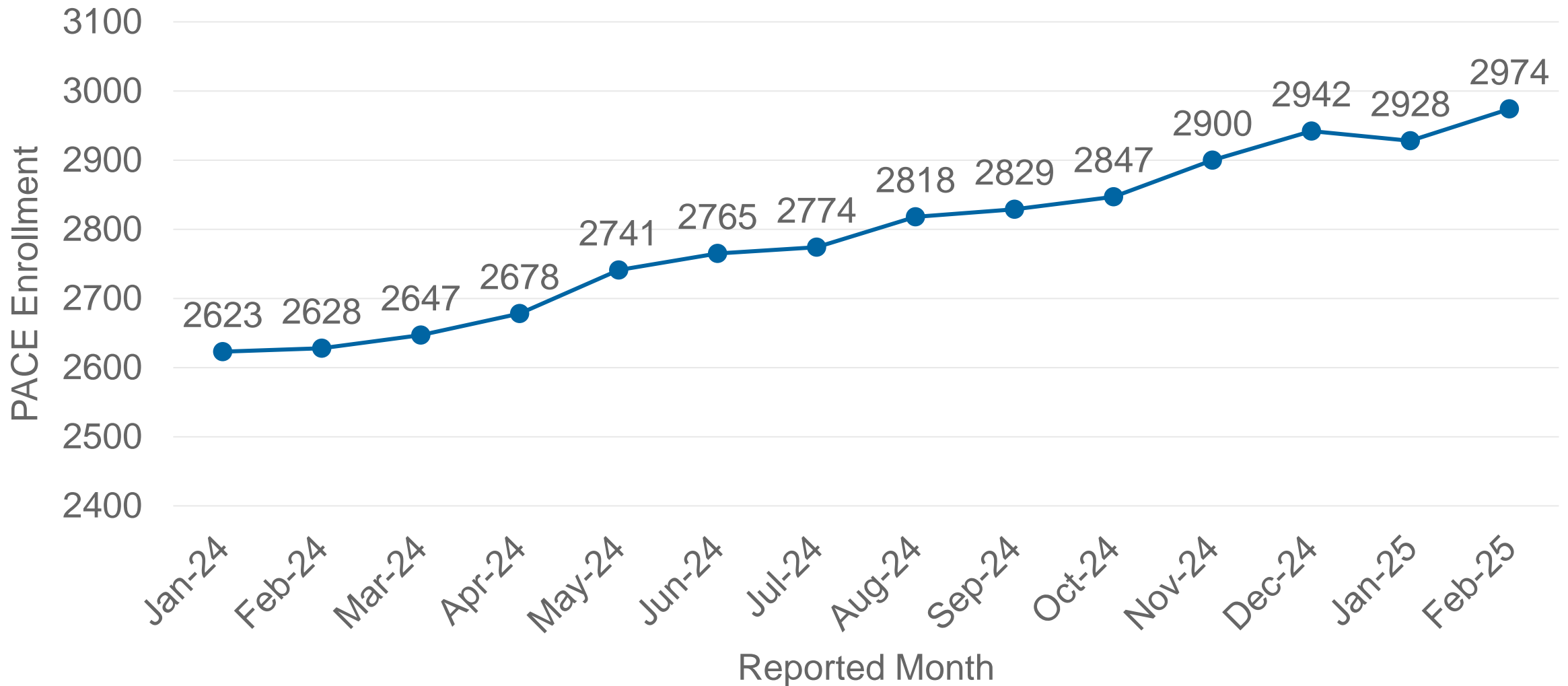
- » The Agency for Health Care Administration (AHCA) and the Department of Elder Affairs (DOEA) to provide monitoring and oversight of PACE organizations
- » Approximate time to site a new PACE facility: 18 to 24 months.
- » There are caps on PACE growth - The state legislature and Medicaid program establish limits on the number of participants or programs based on funding availability and/or geographic needs.
- » Licensure: State adult day health licensure or waiver, CLIA, pharmacy license, biomedical waste certification, sanitation certificate
- » February 2025 Enrollment: 3,183.

STATE PROFILE - *Florida*

Florida PACE Operators	Counties Served
Empath LIFE	Tampa
Florida PACE Centers	Miami-Dade, Broward
Hope PACE	Charlotte, Collier, Lee
InnovAge PACE	Hillsborough, Pasco, Hernando
Mount Sinai	Miami Dade
Palm Beach PACE	West Palm Beach
Suncoast PACE	Pinellas, Hillsborough
The PACE Place	Clay, Duval, St. Johns, Nassau, Baker
Trinity Health PACE of Pensacola	Pensacola



FLORIDA: 2024 MONTHLY PACE ENROLLMENT





Brief History

- >> 1995: Summit ElderCare (Fallon Health), established as the state's first Medicare-approved PACE program.
- >> Present day: 8 PACE organizations run 24 PACE Centers covering 271 towns and cities in Massachusetts (out of 351) with over 5,500 enrollees.
- >> Most recent PACE program start date: 6/1/2014 (Serenity Care PACE)

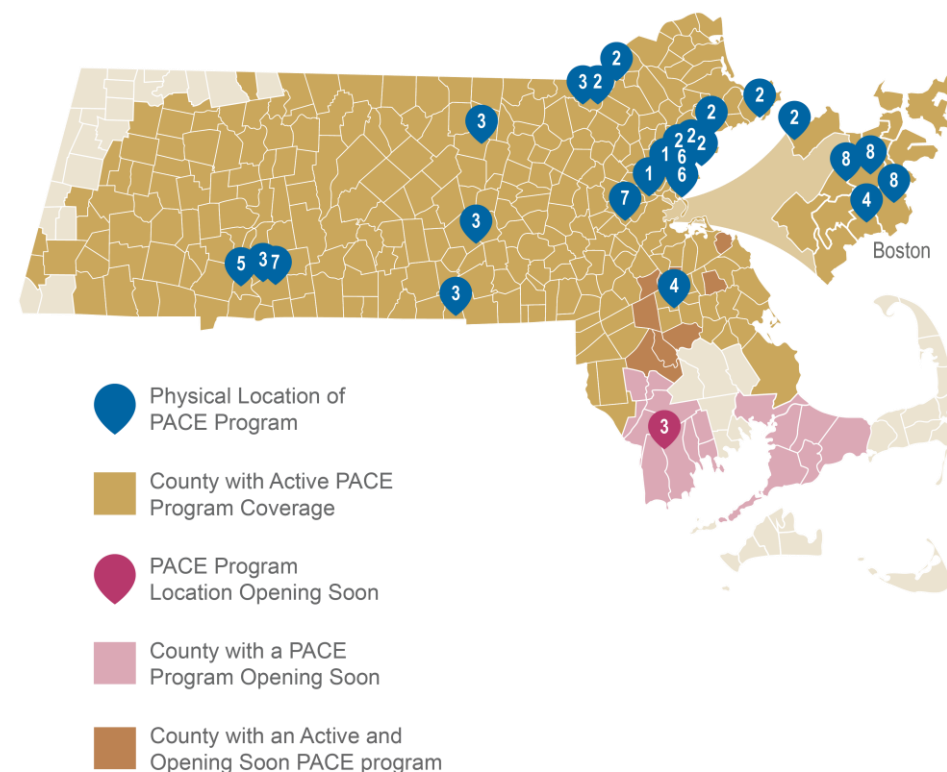


State PACE Details

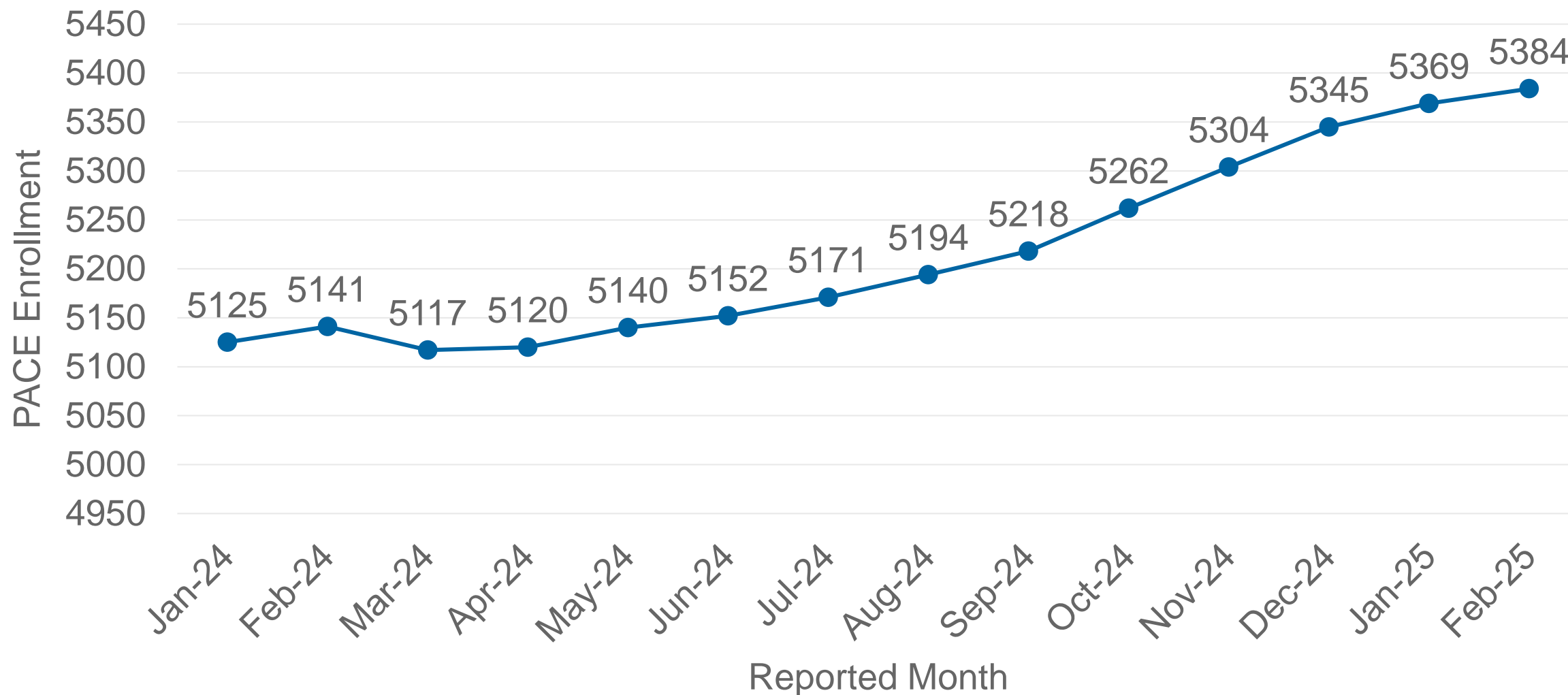
- » Providers must obtain approval from both CMS and the state Medicaid agency (MassHealth) to begin operations.
- » Approximate time to site a new PACE facility:
- » Massachusetts does not currently impose strict caps on PACE program growth.
 - » Expansion depends on provider interest, federal and state approvals, and resources.
- » February 2025 Enrollment 5,017

STATE PROFILE - MASSACHUSETTS

Massachusetts PACE Operators	Counties Served
CHA PACE	Middlesex, Suffolk
Element Care PACE	Middlesex, Essex, Norfolk and Suffolk
Fallon Health's Summit ElderCare PACE	Hampden, Hampshire, Berkshire and Franklin
Harbor Health PACE	Plymouth, Bristol, Middlesex, Norfolk, Suffolk
Mercy LIFE PACE	Hampden, Hampshire, Berkshire, Franklin
Neighborhood PACE	Middlesex, Suffolk, Suffolk
Serenity Care PACE	Hampden, Hampshire, Middlesex, Norfolk, Franklin, and Berkshire
Uphams PACE	Suffolk and Norfolk



MASSACHUSETTS 2024 MONTHLY PACE ENROLLMENT





Brief History

- The benefits and services offered and/or delivered by PACE Organizations implicate Article 44, Article 28, and Article 36 of the Public Health Law in New York.
- New York was one of 31 states that was elected to offer PACE services to dually eligible members with its first PACE programs beginning operations in the late 1980s as part of a Federally sponsored demonstration.
- 1992 - PACE organizations open in the Bronx and Rochester.
- Most recent PACE program start date: 2/1/2025 (Hudson headwaters PACE)

STATE PROFILE - *New York*

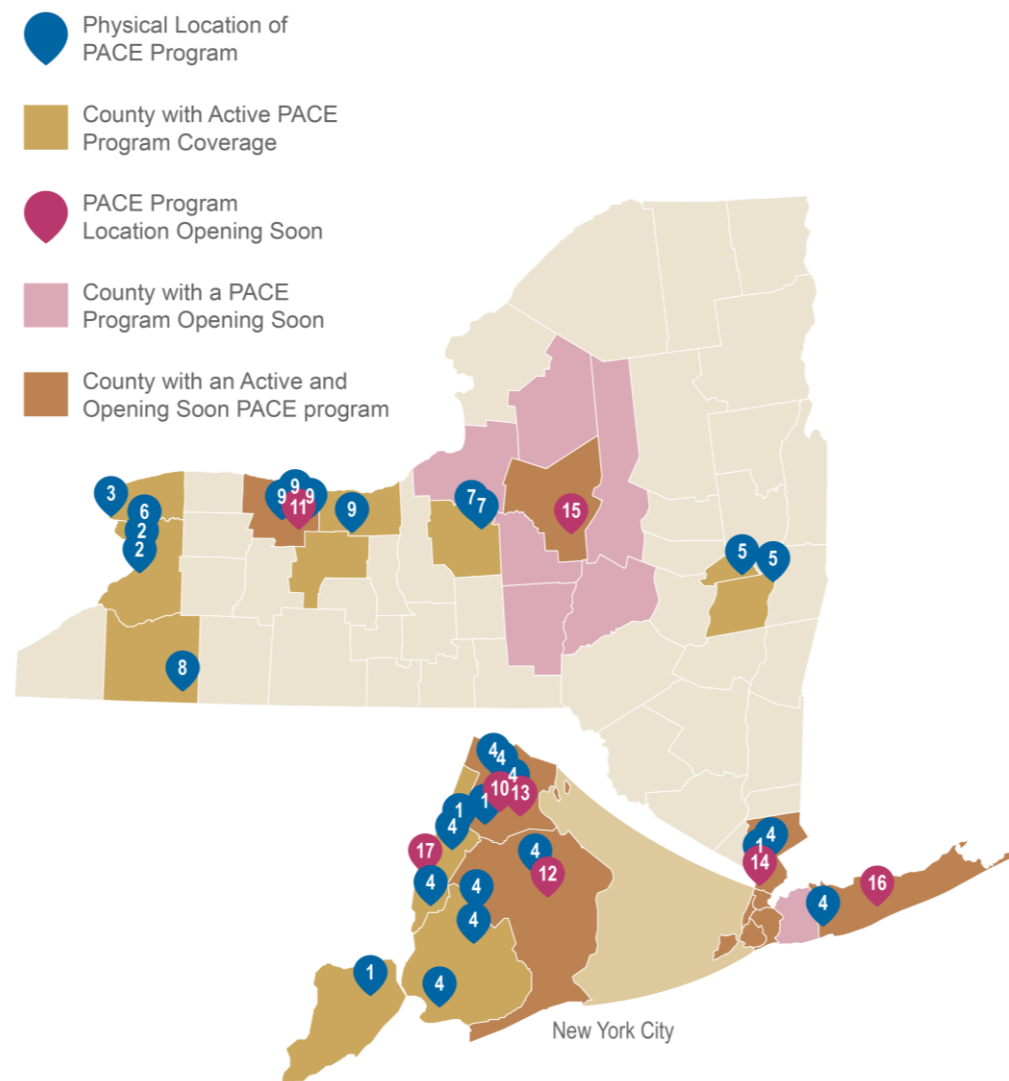


State PACE Details

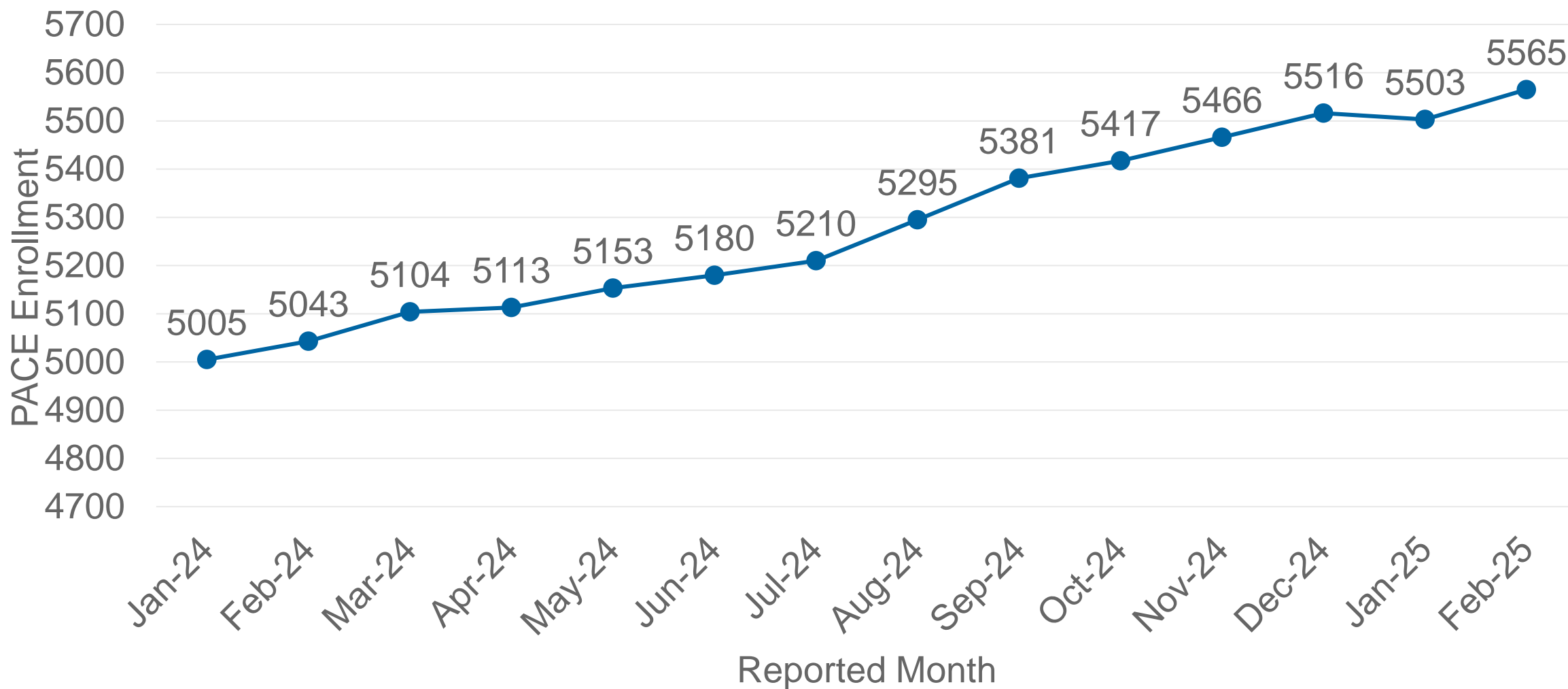
- >> Approximate time to site a new PACE facility:
- >> Licensure: PACE organizations in New York must be licensed as MLTC plans, clinics, and licensed home care agencies.
- >> February 2025 Enrollment 9,905

STATE PROFILE - *New York*

New York PACE Operators	Areas or Counties Served
ArchCare Senior Life (two locations)	Bronx, Kinds, Richmond, Rockland, and Westchester
Catholic Health LIFE	Erie
CenterLight Healthcare	Bronx, Kings, Nassau, Queens, Richmond, Suffolk, Westchester
Complete Senior Care	Niagara
Eddy Senior Care	Albany, Rensselaer, Saratoga, Schenectady
ElderONE	Monroe, Ontario, Wayne
Fallon Health Weinberg	Erie
Hudson Headwaters PACE	Saratoga, Warren, Washington
PACE CNY	Onondaga and Oneida
Total Senior Care	Cattaraugus, Chautauqua, Allegany



NEW YORK 2024 MONTHLY PACE ENROLLMENT





Brief History

- » Washington Administrative Code (WAC) 388-106 regulates eligibility, service requirements, and operational standards for Washington's PACE and other long-term care programs
- » WAC 182-513-1200 and WAC 182-513-1230 describe the eligibility for PACE.
- » 2002: Providence ElderPlace, the first PACE program in Washington, was established in Seattle.
- » Most recent PACE program start date: 1/1/2022 (Pacific Northwest PACE Partners)

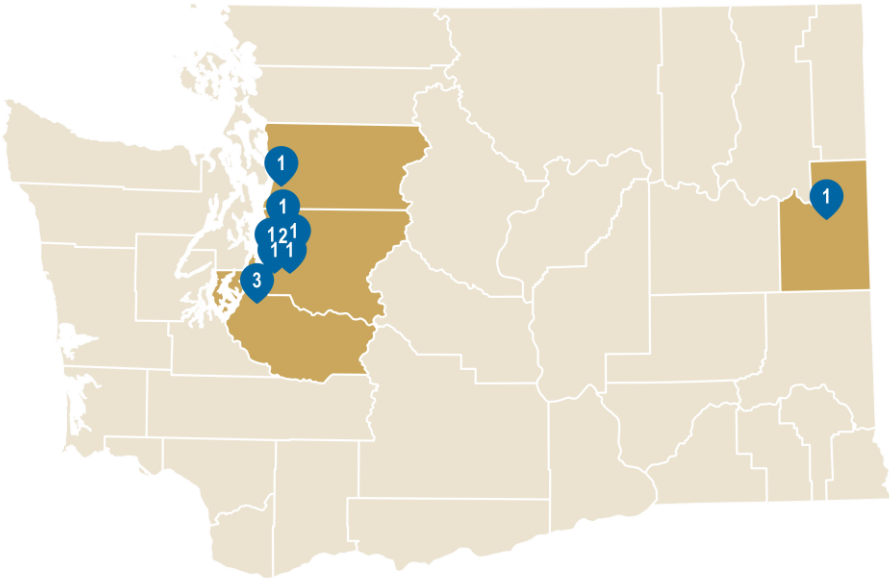


State PACE Details

- »» Approximate time to site a new PACE facility: It may take up to two years to complete the process to become a PACE organization in Washington.
- »» Licensure: Home Health
- »» February 2025 Enrollment 1,708

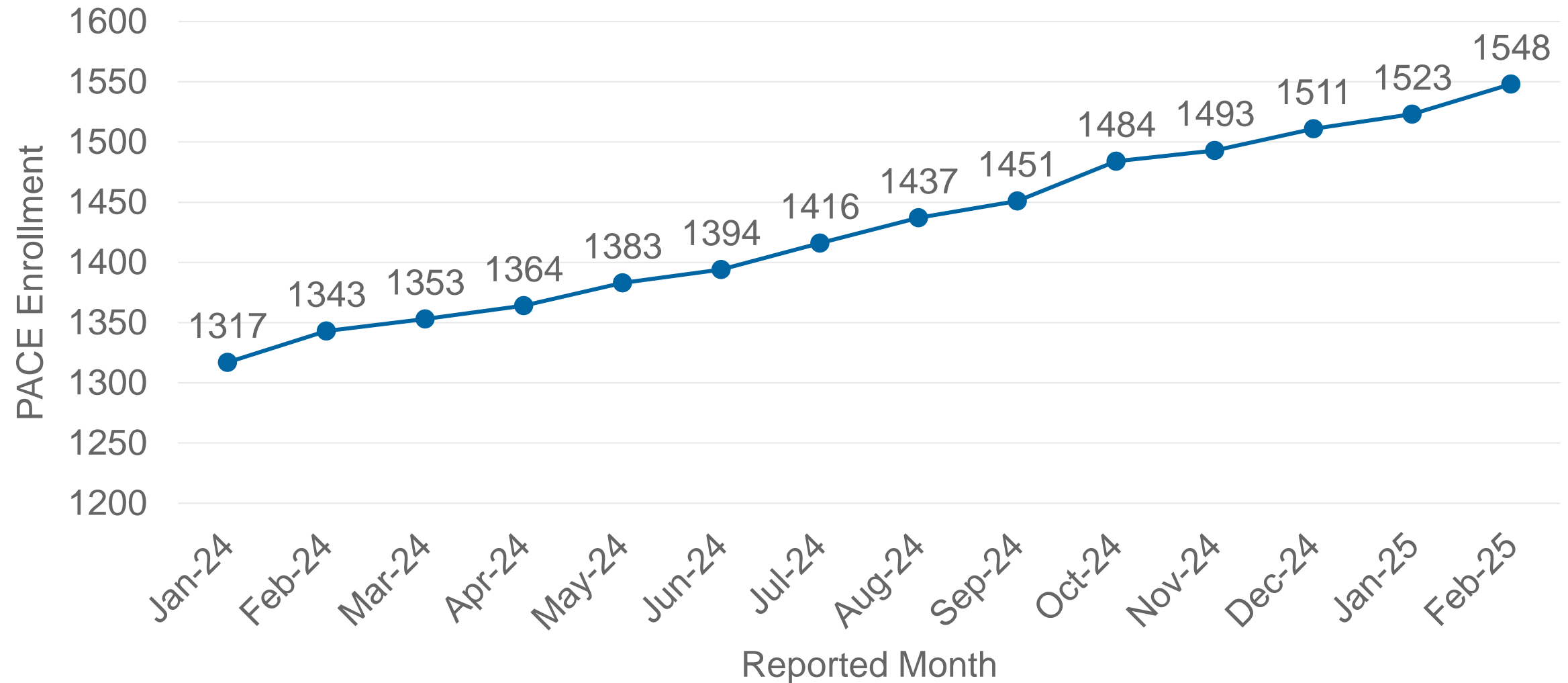
STATE PROFILE - *Washington*

Washington PACE Operators	Areas Served
International Community Health Services	Seattle
PNW PACE Partners	Tacoma
Providence ElderPlace	Seattle, West Seattle, Kent – North, Kent –South, Redmond, Spokane, Everett – South



- Physical Location of PACE Program
- County with Active PACE Program Coverage

WASHINGTON 2024 MONTHLY PACE ENROLLMENT





APPENDIX

PROCUREMENT STATE PROFILES



Brief History

- The Illinois state code for PACE is found in 320 ILCS 40, which outlines the program's implementation, eligibility, and related provisions.
- 2022: Gov. Pritzker Announced PACE launching in Illinois.
- 2024: The first PACE programs in Illinois began offering services.
- The first five service areas are West Chicago, South Chicago, Southern Cook County, Peoria, and East St. Louis.
- Most recent PACE program start date: 7/1/2024 (Esperanza Health Centers Panorama PACE, PACE at Lawndale Christian Health Center, and OSF PACE)

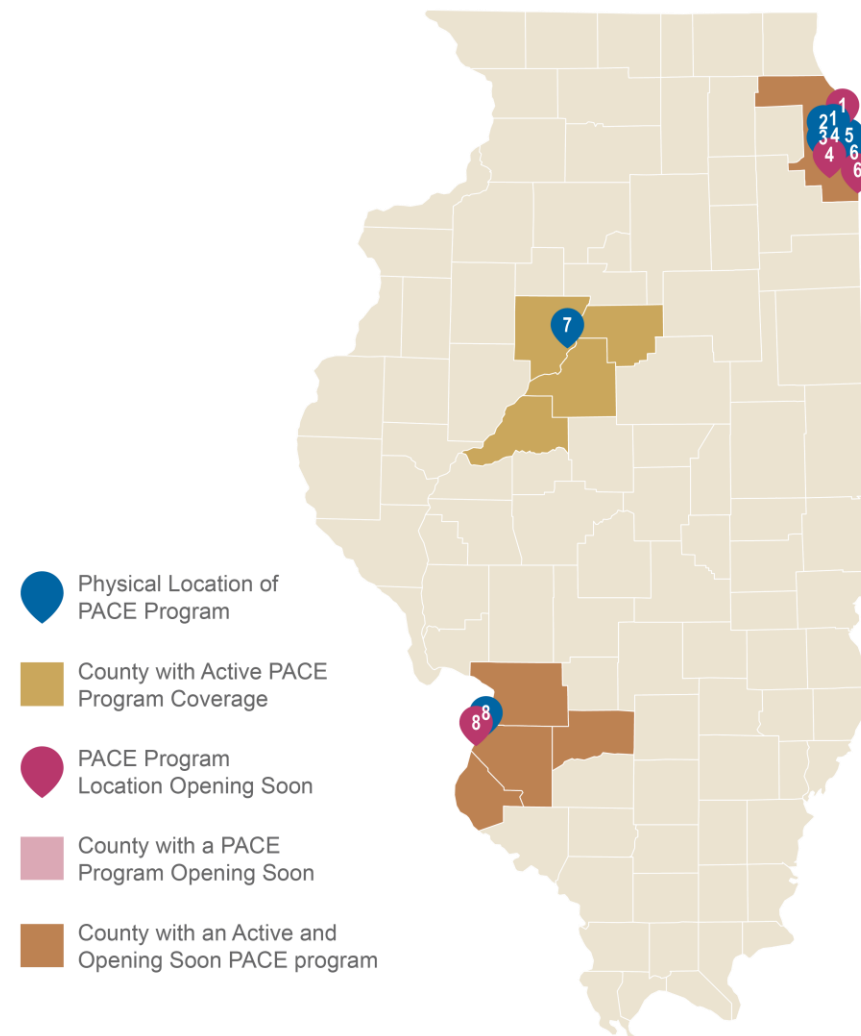


State PACE Details

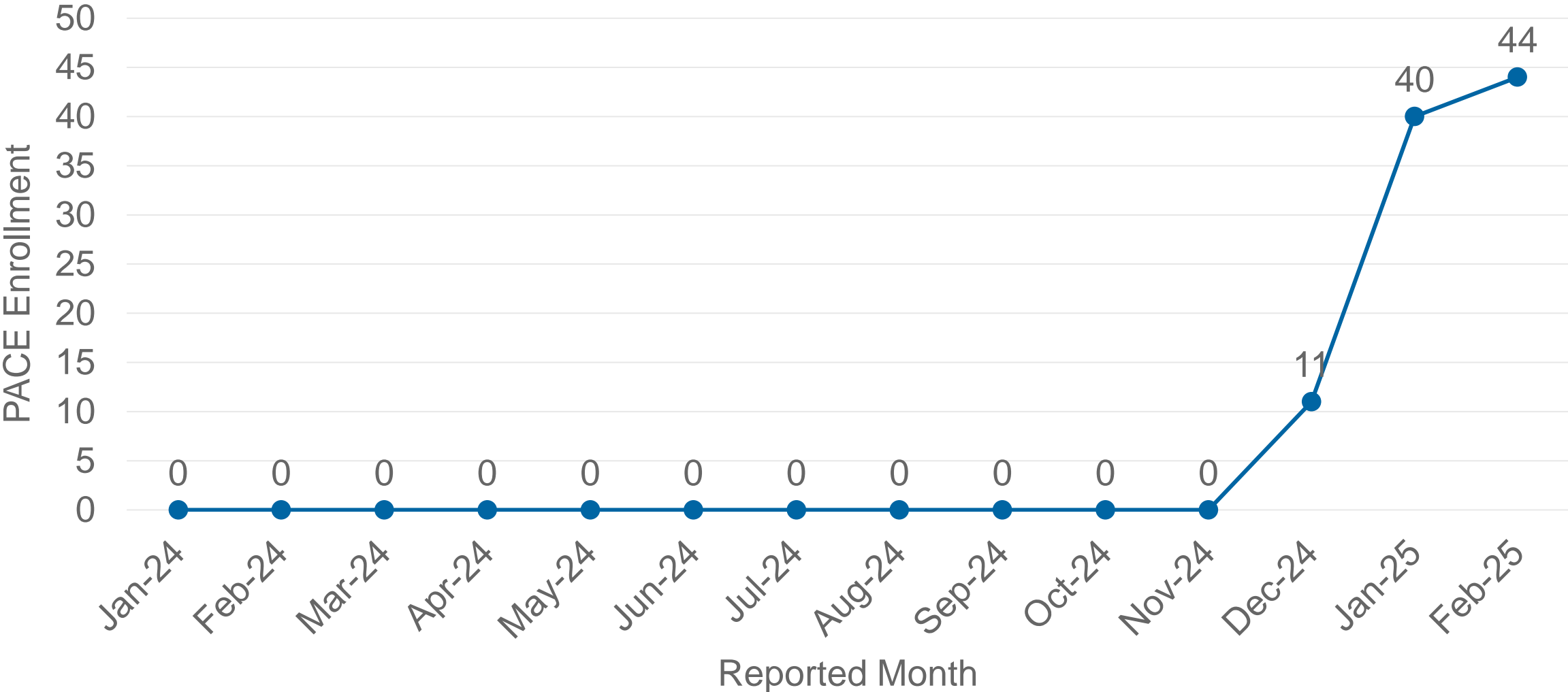
- >> Approximate time to site a new PACE facility: 2.5 years
- >> Caps on PACE enrollment: 300
- >> Adult Day Center Licensure
- >> February 2025 Enrollment 44

STATE PROFILE - *Illinois*

Illinois PACE Operators	Areas Served
Kinship PACE of Illinois, LLC (development)	(Cook County) West Chicago
Lawndale Christian Health Center	(Cook County) West Chicago
PACE of Southwest Chicago, LLC (exited)	(Cook County) West Chicago
Annie's Place PACE (development)	(Cook County) South Chicago
Esperanza Health Centers	(Cook County) South Chicago
BoldAge PACE Illinois (development)	Southern Cook County
OSF PACE - OSF Healthcare Systems	Peoria, Mason, Tazewell, Woodford Counties
Stella PLACE PACE (development)	East St. Louis, Clinton, Madison, Monroe, St Clair Counties



ILLINOIS 2024 MONTHLY PACE ENROLLMENT





Brief History

- PACE in Kentucky operates under state legislation detailed in 907 KAR 3:250, which sets out requirements for PACE providers.
- PACE organizations in Kentucky must establish a three-way agreement with the Centers for Medicare & Medicaid Services (CMS) and the Kentucky Medicaid program to function as providers
- 2022: Kentucky launched its first PACE programs with Bluegrass Care Navigators and Horizon PACE.
- Most recent PACE program start date: 8/1/2024 (Senior CommUnity Care of Northern Kentucky)

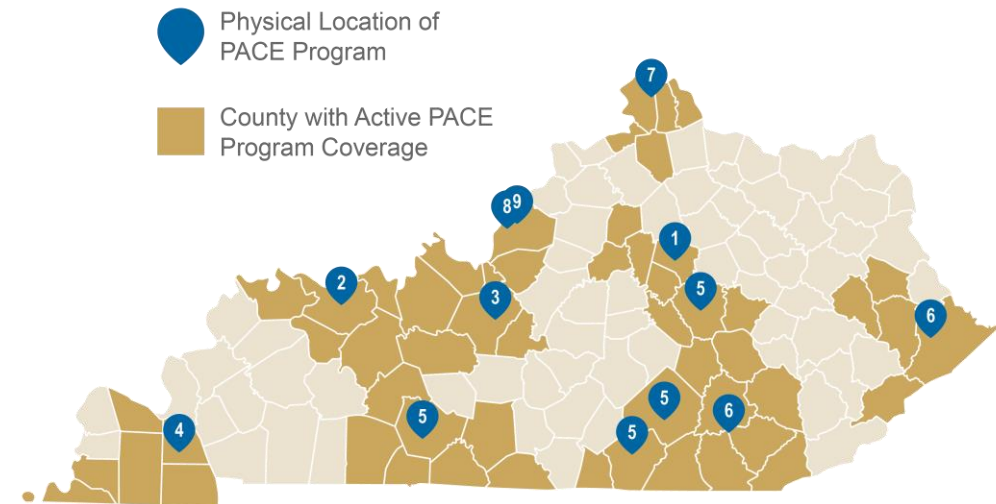


State PACE Details

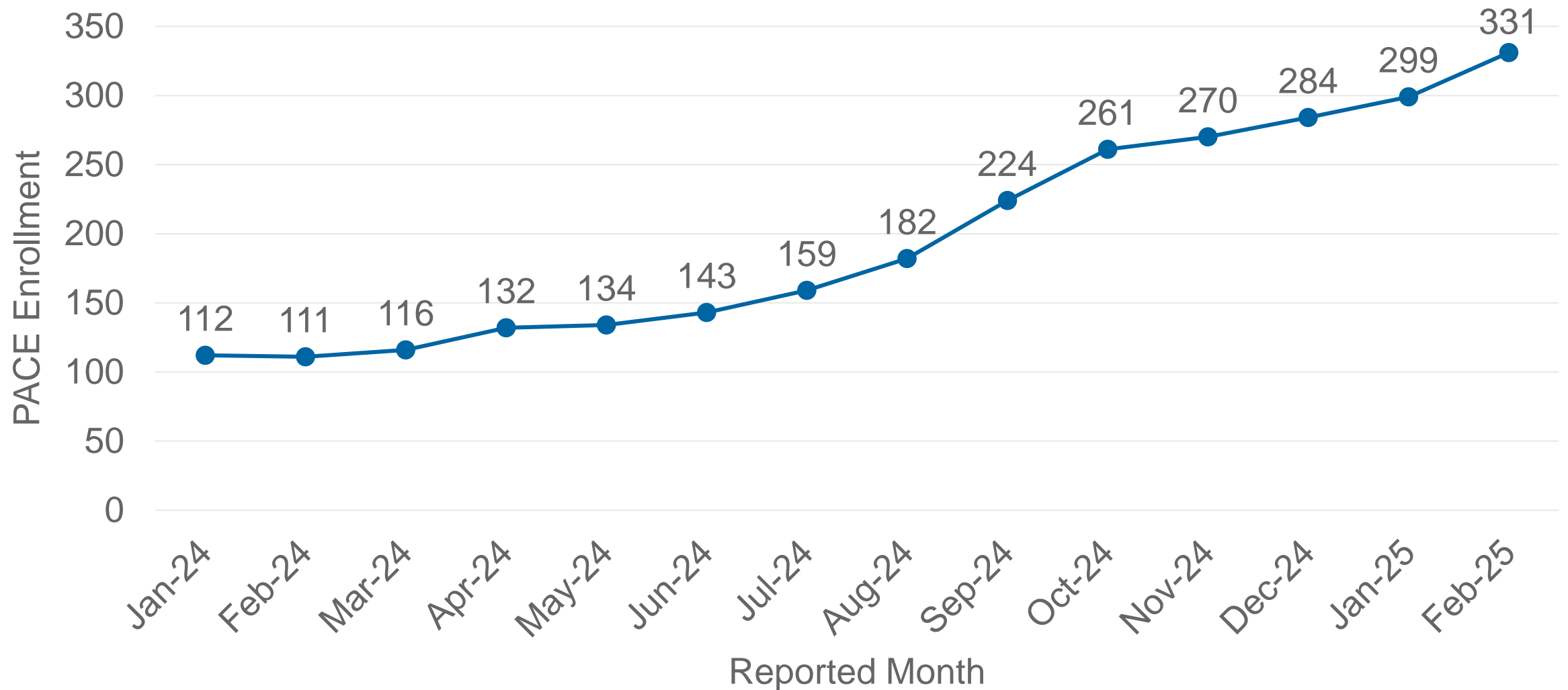
- » Approximate time to site a new PACE facility: in Kentucky typically takes approximately 18 to 36 months. The timeline includes feasibility studies, regulatory approvals, funding, site selection, construction, hiring staff, and enrolling participants.
- » Licensure: Adult Day Center
- » February 2025 Enrollment 365

STATE PROFILE - *Kentucky*

Kentucky PACE Operators	Counties Served
Bluegrass PACE (BCN)	Anderson, Franklin, Fayette, Jessamine, Woodford
BoldAge PACE (Heartland)	Henderson, Daviess, Ohio, Hancock, McLean.
Care Guide Partners PACE	Hardin, Meade, Breckinridge, Larue, Grayson, Bullitt
Horizon PACE (three locations)	Warren, Simpson, Allen, Barren, Monroe, Pulaski, Laurel, Rockcastle, Madison, Garrard, Logan, Butler, Clinton, Jackson, Estill, McCreary
Life Coordinated	Marshall, Calloway, Graves, Hickman, Fulton, McCracken.
Mountain View PACE	Knox, Bell, Clay, Whitley, Johnson, Floyd, Pike, Letcher, Magoffin
Senior CommUnity Care (three locations)	Boone, Kenton, Campbell, Gallatin, Grant, Jefferson



KENTUCKY 2024 MONTHLY PACE ENROLLMENT





Brief History

- Louisiana Administrative Code (LAC) Title 50, Part XXXIII. All-Inclusive Care for the Elderly, Ch 1.
- 2005: PACE Greater New Orleans, was originally set to open. The opening was delayed due to Hurricane Katrina and opened in September 2007.
- The Louisiana Department of Health and Hospitals oversees the implementation and regulation of PACE programs in the state.
- Most recent PACE program start date: 6/1/2024 (Trinity Health PACE of Alexandria)

STATE PROFILE - *Louisiana*



State PACE Details

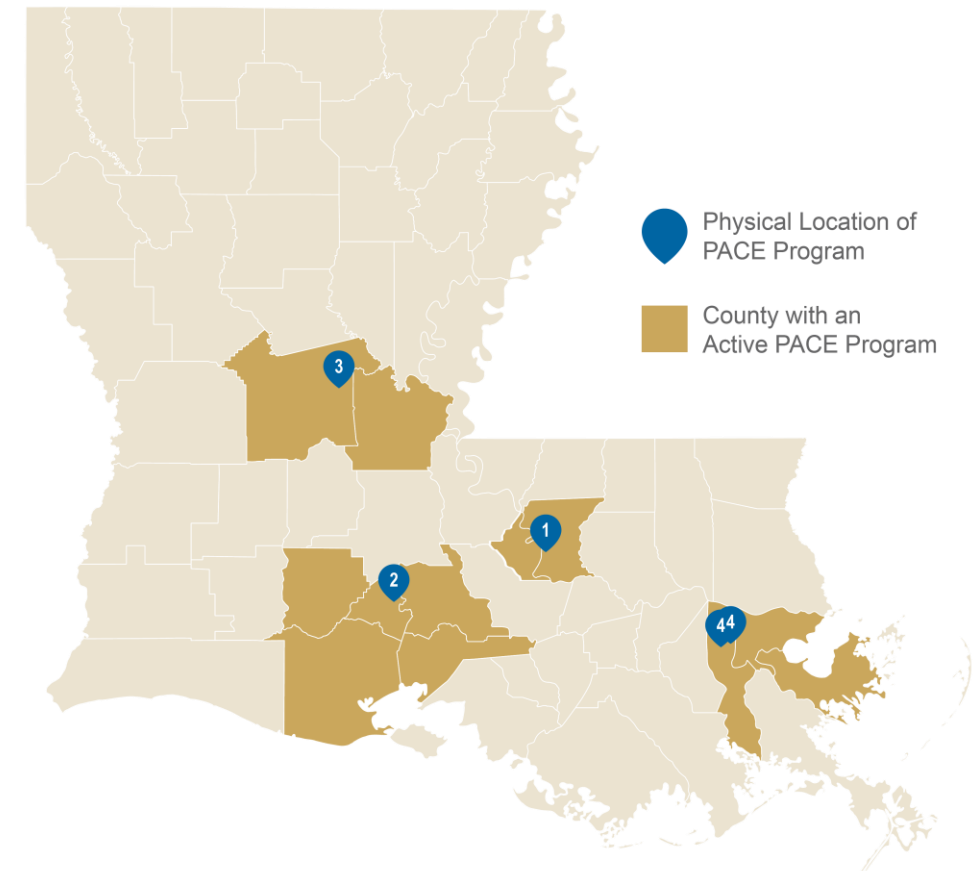
- >> Approximate time to site a new PACE facility: 2+ year(s)
- >> Caps on PACE enrollment: approximately 200 per site
- >> Most recent [RFI was in 2021.](#)
- >> Licensure: Adult Day Center
- >> February 2025 Enrollment 450

STATE PROFILE - *Louisiana*

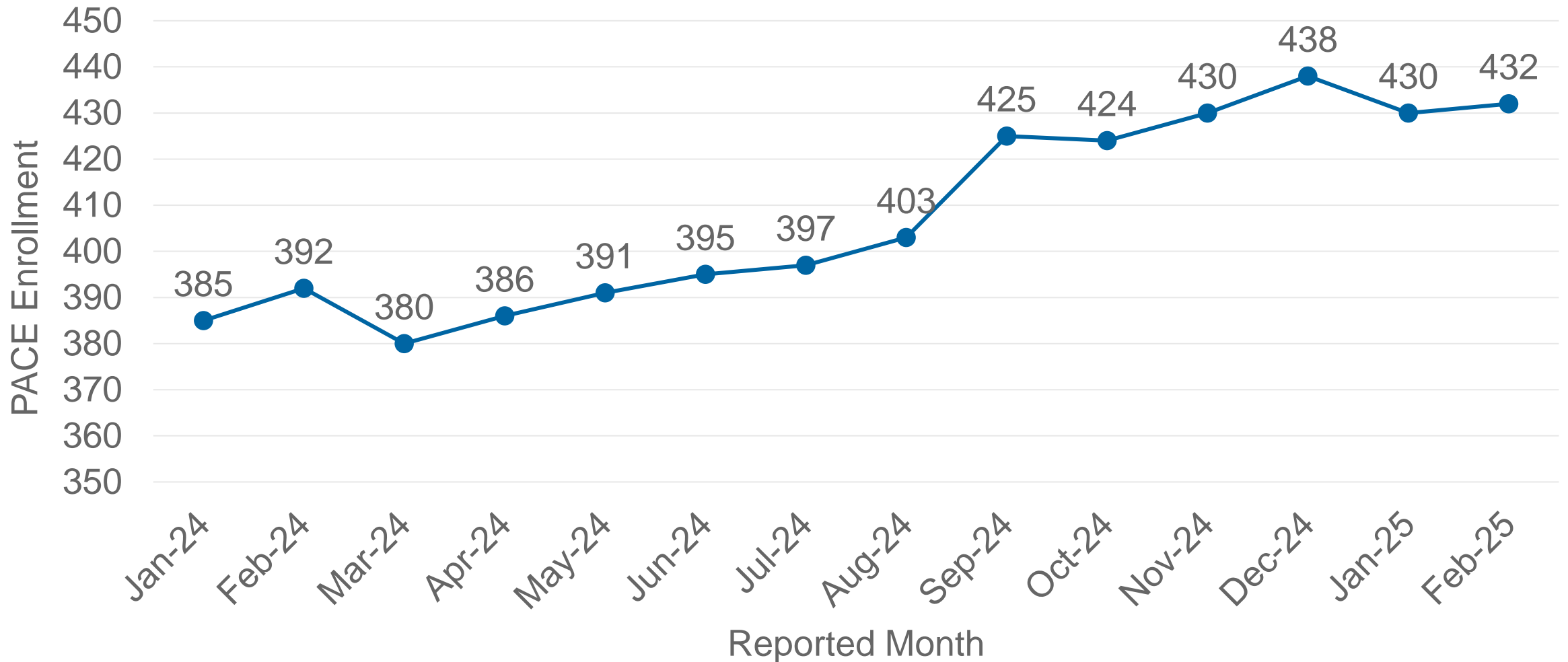
Louisiana PACE Operators	Parishes Served**
Franciscan PACE (two locations)	East Baton Rouge Parish, West Baton Rouge Parish, Lafayette Parish, St. Martin Parish, Iberia Parish, Vermilion Parish, Acadia Parish
Trinity Health Alexandria	Orleans Parish, Jefferson Parish, St. Bernard Parish, Plaquemines Parish

**Louisiana currently has three PACE programs operating out of four sites in New Orleans,

(PACE GNO) Baton Rouge (Franciscan PACE Baton Rouge), and Lafayette (Franciscan PACE Lafayette).



LOUISIANA 2024 MONTHLY PACE ENROLLMENT





Brief History

- Subchapter 33, Programs of All-Inclusive Care for the Elderly (PACE) Organizations, was adopted as new rules by R.2007 d.106, effective 4/16/2007. See: 38 N.J.R. 4154 (a), 39 N.J.R. 1480 (a)
- 2008: Plans to open PACE in NJ announced.
- 2009: The first PACE sites in New Jersey opened: LIFE at Lourdes in Pennsauken, LIFE St. Francis in Hamilton Township.
- 2024 New Jersey Assembly Bill 4049 (allows the use of Medicaid presumptive financial eligibility for PACE).
- Most recent PACE program start date: 11/1/2017 (AtlantiCare LIFE Connection).

STATE PROFILE - *New Jersey*

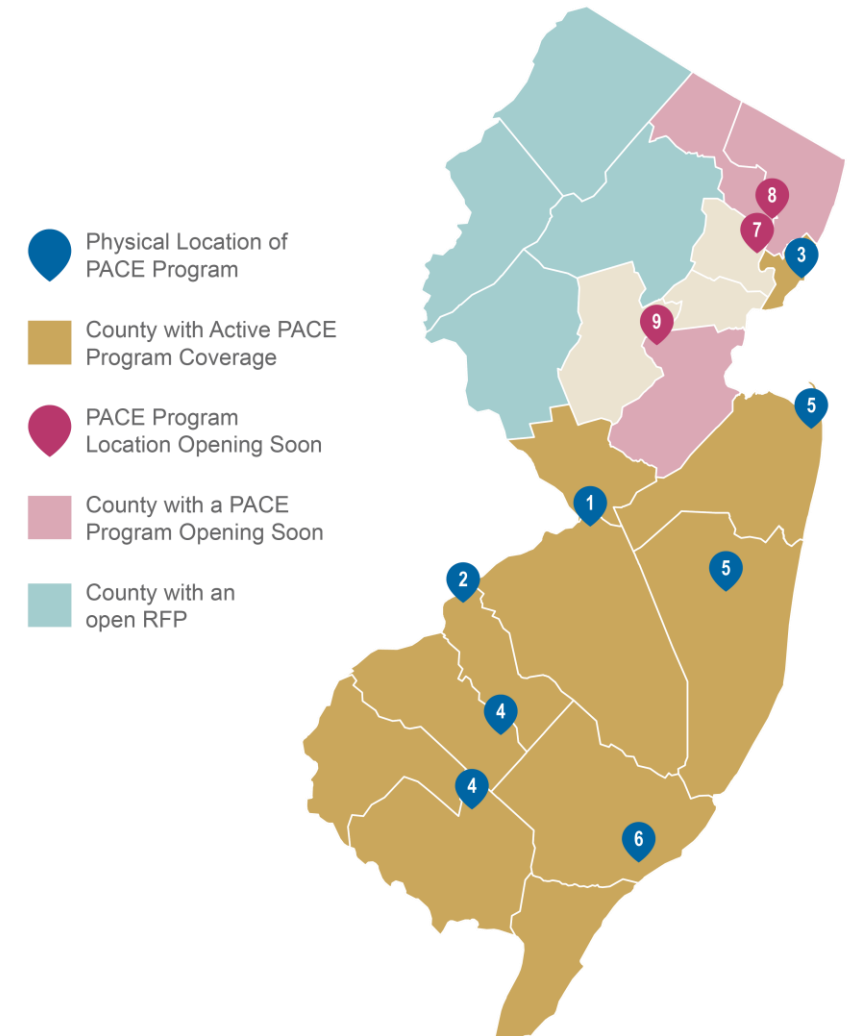


State PACE Details

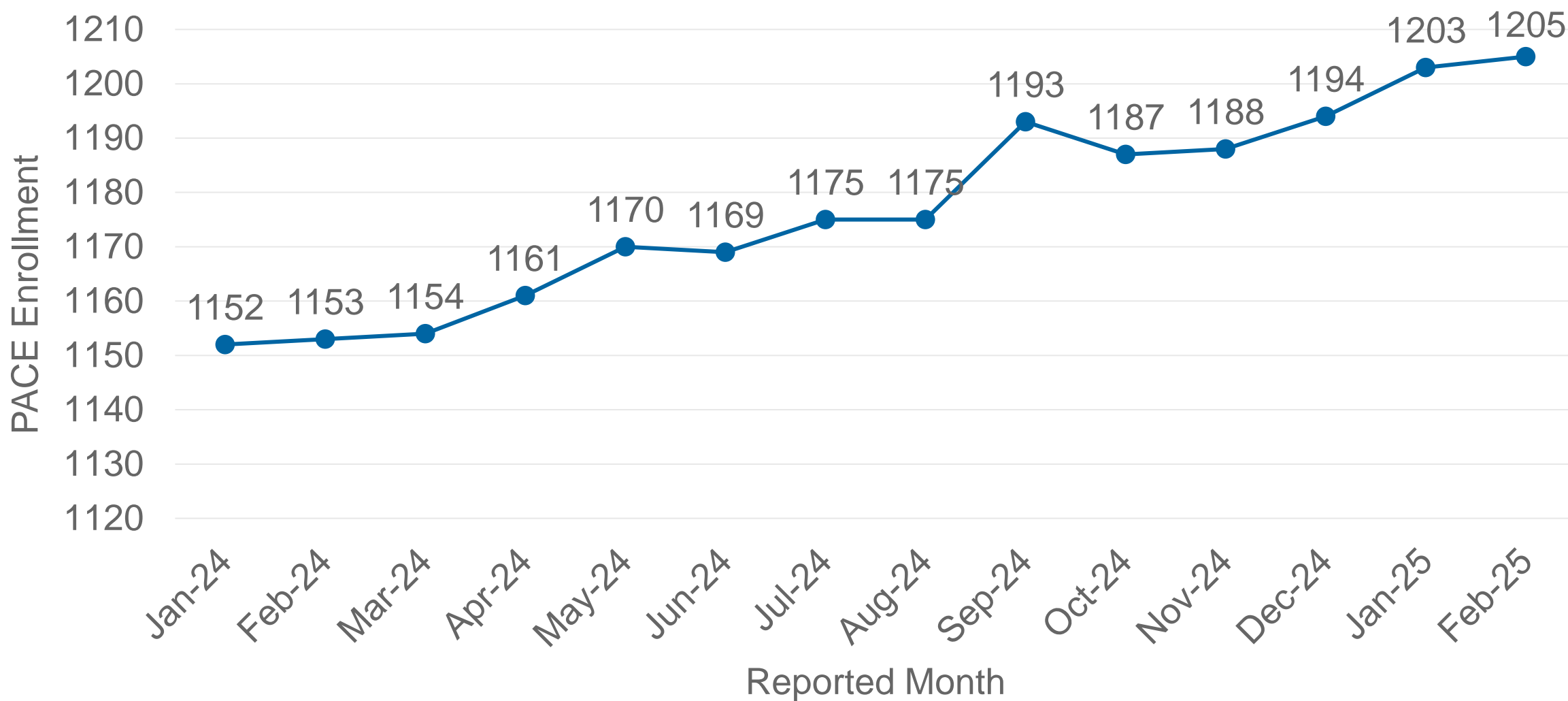
- >> Approximate time to site a new PACE facility:
- >> Licensure: Ambulatory Care Center
- >> February 2025 Enrollment 1,388

STATE PROFILE - *New Jersey*

New Jersey PACE Operators	Counties Served
AtlantiCare LIFE	Atlantic, Cape May
Beacon of LIFE (two locations)	Ocean and Monmouth
Capital Health LIFE	Mercer, Burlington
Inspira LIFE	Cumberland, Gloucester, Salem
Lutheran Senior LIFE	Hudson
Trinity Health LIFE New Jersey	Camden, Burlington



NEW JERSEY 2024 MONTHLY PACE ENROLLMENT





Brief History

- » 1997: McGregor (Cleveland Heights) Opens
- » 2010: The Centers for Medicare & Medicaid Services and the Ohio Department of Aging chose The A.M. McGregor Group to manage McGregor PACE, Ohio's first PACE program established.
- » 2022 House Bill 45 Passed, expanding PACE to Franklin, Hamilton, Montgomery, Lorain, Lucas, and Summit Counties.
- » 2023 (December) Ohio Governor, and Ohio Department of Aging (ODA) Director announced the providers selected to expand PACE to several new regions across Ohio.
- » 2024: PACE Association of Ohio (PAO) launched as a state affiliate of the National PACE Association.
- » Most recent PACE program start date: 7/1/2024 (McGregor Lorain County) 6 new PACE Centers are set to open in 2025.

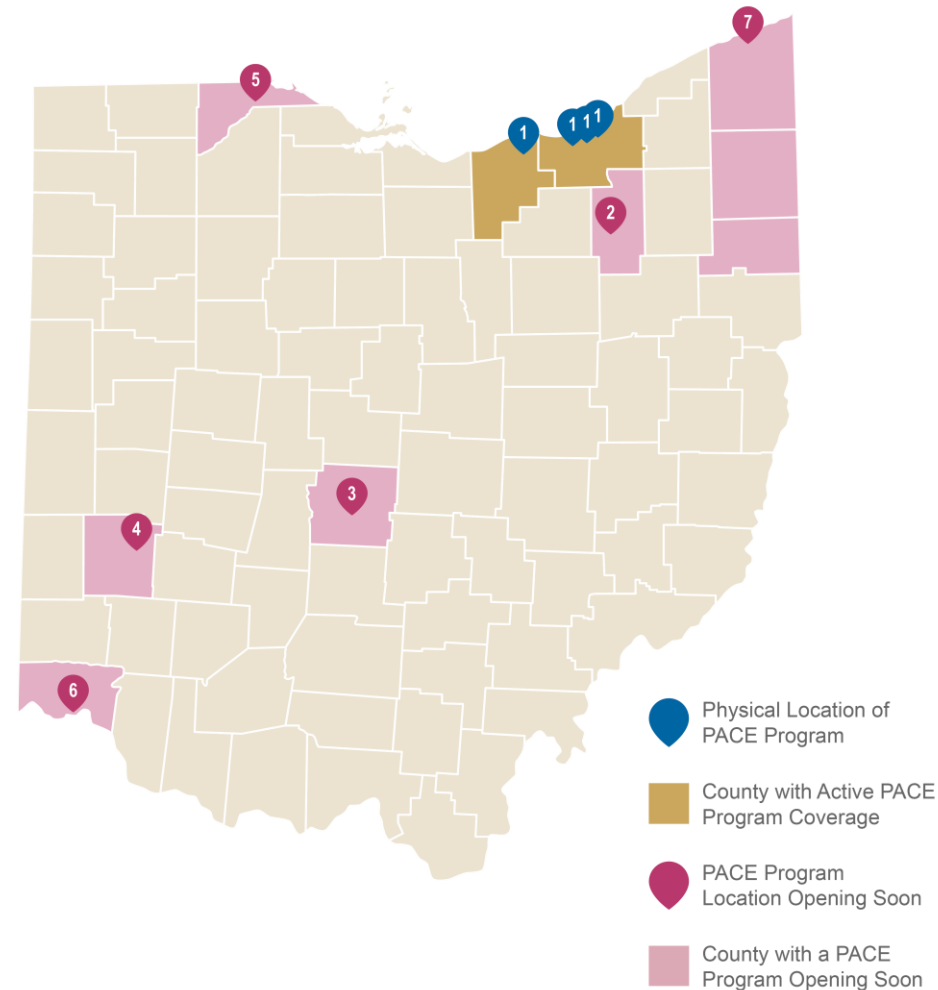


State PACE Details

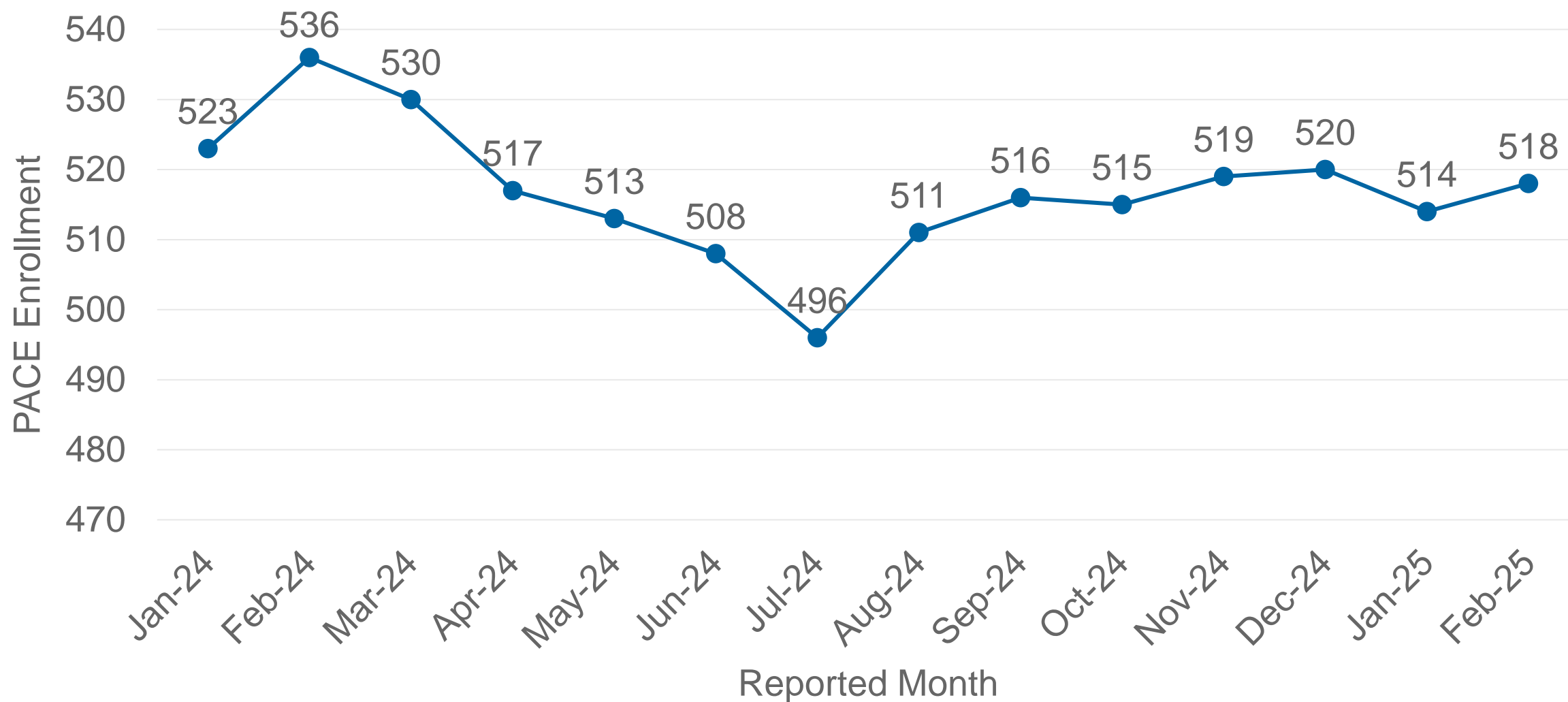
- >> Approximate time to site a new PACE facility: 1-2+ years
- >> Caps on PACE enrollment: No current caps
- >> Licensure: Home Health
- >> February 2025 Enrollment: 656

STATE PROFILE - *Ohio*

Ohio PACE Plans (with opening dates)	Counties Served
McGregor PACE	Lorain, Summit
AcuteCare PACE (development)	Franklin (April 1, 2025), Montgomery (November 1, 2025) Lucas (October 1, 2025)
TriHealth (development)	Hamilton County (August 1, 2025)
One Senior Care (development)	Ashtabula, Trumbull, Mahoning (February 1, 2026)



OHIO 2024 MONTHLY PACE ENROLLMENT





APPENDIX

SURVEY QUESTIONS

SURVEY QUESTIONS | WHAT DID WE ASK STATES?

#	Survey Question
1	What is the state's process or formula to determine unmet need?
2	What is the state's policy for budgetary funding caps or limiting the number of participants?
3	How does the state decide on whether there should be more than one PACE operator per geographic area/zip code?
4	Does the state allow for merger and acquisition activity?
5	What specific licensures/waivers are required for PACE operators in your state?
6	What are the advantages/disadvantages for using an open (or RFP) application approach?

REFERENCES

1. California PACE: [History | Home Care Assistance & Senior Care Services | CalPACE](#) , [California PACE Plans Zip Codes July 2024](#)
2. Florida PACE: <https://elderaffairs.org/programs-services/medicaid-long-term-care-services/program-of-all-inclusive-care-for-the-elderly-pace/>, [2019 S0077 HP](#) (BILL ANALYSIS AND FISCAL IMPACT STATEMENT)
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5. [PACE - National.pdf](#)
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