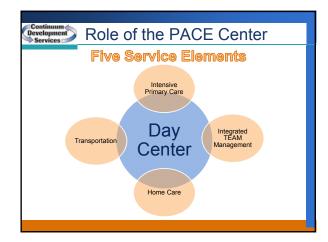




# Continuum Agenda Services Agenda

- Role of the PACE Center
- Locating the PACE Center
- Design Considerations
- Financing
- Operating Costs
- Alternative Care Settings





## Role of the PACE Center

#### Primary location for:

- Care coordination
- · Respite for caregivers
- Socialization
- Provision of services
  - Primary Care
  - Clinical
  - Rehabilitation



#### Role of the PACE Center

- Effective End of Life Care. The IDT determines participants/families' values and their present/advanced directives and supports the dying process in a manner, which minimizes the desire for futile care.
- Voluntary Caregiver Support. The IDT provides needed respite, education and support in the home, while regularly measuring caregiver stress and refining plans to support them.



## Role of the PACE Center

■ Management of Participant/Family noncompliance. The IDT especially the social workers must establish relationships, which avoids non-emergent 911 calls to hospitals (which may not have a contract with PACE) and keeps families engaged and meeting their commitments to care for participants.



#### LOCATING THE PACE CENTER



#### Demographic Analysis

- Age: total individuals age 65 and over,
- Medicaid eligibility: total households age 65 and over with household income less than \$20,000, and,
- Clinical eligibility: an estimate of those persons age 65 and over who would self-report at least one self-care limitation and at least one mobility limitation.



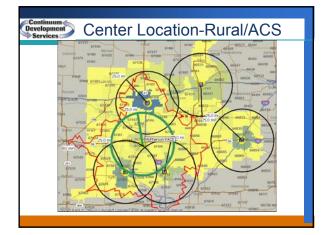
#### Development Location Considerations Location Considerations

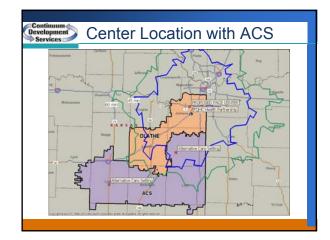
- Are there sufficient PACE eligibles in the targeted service area?
- Is the support from area hospitals, business leaders and service providers? What level?
- What are the existing service components required by federal PACE provider regulations. What areas would need to be developed?
- Are there affordable housing residents who are potential PACE eligibles



## Location Considerations

- Are the drive times to reach the most PACE eligibles from the identified location reasonable (less than 45 minutes)?
- Are there security considerations?
- If building a new Center, is there available land at an affordable price?
- Are there suitable buildings in the target market that could be redesigned?







# Potential Center Locations

- Strip mall
- Furniture/grocery store
- Clinic
- Expanding adult day care
- First floor of HUD 202
- Church
- Warehouse

#### Potential Co-Locations Potential Co-Locations

- Senior Housing Developments (Section 8; Section 202)
- Senior Centers
- Area Agencies on Aging
- Continuing Care Retirement Communities
- Federally Qualified Health Clinics

## <u>Co-Location Examples</u>

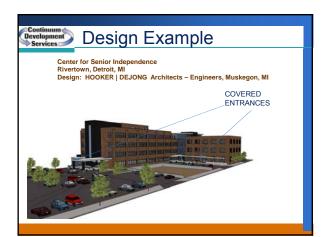
- Center for Senior Independence, Detroit, MI—colocated with affordable assisted living in Rivertown
- Carolina SeniorCare, Lexington, NC—adjacent to Carolina Senior Living Apartments, a 30-unit supportive housing project (in progress)
- LifeCircles, Muskegon, MI—located in Tanglewood Park which houses a unique collaboration of four agencies serving seniors (LifeCircles, Senior Resources, AgeWell Services, and Call 2-1-1)





## Design Considerations Considerations

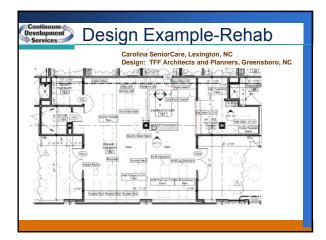
- GENERAL
  - Covered entrance
  - Transportation office with view of vans arriving
  - Beveled corners in corridors
  - Adequate storage space for activities, coats, participant change of clothing
  - Technology should be built into the center
  - Allow 80 to 100 square feet per participant/day
  - Compliance with state and local licensure and code requirements





#### Considerations Specific Design Considerations

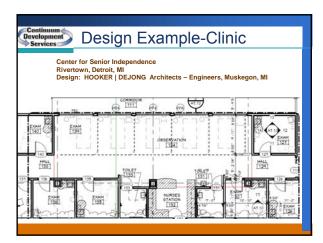
- Service Decisions
  - Kitchen
  - Pharmacy
  - Dementia Day Room
- Therapy/Rehab Gym
  - Create an easily accessible exercise area
  - Balance between private and open spaces





## Specific Design Considerations

- - Observation beds and private exam rooms
  - Triage area outside clinic to avoid interruptions to work flow and discourage
  - Routine physician space outside the main clinic space



# Design Trends Continuum Design Trends

- Less institutional
- Larger more open rehab and clinic
- Smaller day center areas
- Use of super-sites in dense markets
- Use of alternative care settings to expand capacity without major capital expenditures





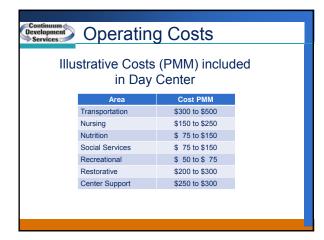
## Financing the Center

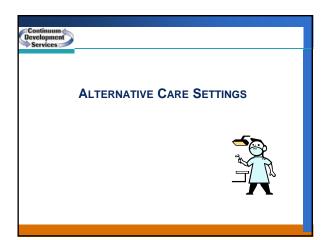
- Lease, buy, or build?
- Organizations will build out PACE Center to specifications with a guaranteed long term
- A few banks have been giving short term loans for start-up costs and leasehold improvements
- Start-ups are not likely to get bond financing due to lack of material collateral

#### Capital Considerations Component Expense Adult Day Center Build \$4M to \$15M\* Purchase \$1M to \$3M\* \$3 to \$30 per SF/year\* Capital Improvements \$900K to \$2.3M (\$60-\$150/SF)\* \$45 to \$50K each Start-up Costs \$500K to \$1M Operating Losses \$500K to \$4M Cash Reserves \$500K \*Range due to relationship between building condition and capital requirements

Continuum Development Services	
	OPERATING COSTS
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# Alternative Care Settings Alternative care settings are allowed when a limited number of services may be provided

- CMS must be notified in writing of any ACS arrangements
- http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/pace 111c07.pdf



#### Development Alternative Care Settings

- CenterLight Healthcare—largest PACE in country with 11 Centers and 6 ACS in New York City. The ACS provide on-site socialization, social services, personal care, therapeutic recreation and meals.
- Independent Living for Seniors, Rochester, New York-main center in Rochester with two ACS in Abraham Lincoln Apartments and Charlotte Harbortown Homes (Section 8 and mixed use housing)



#### Development Alternative Care Settings

- Senior CommUnity Care—operates two PACE Centers in Montrose and Eckert, CO with an ACS in Paonia (population 1,600). The ACS is open 2 days per week with a physician on-site one-half day per week.
- TriHealth SeniorLink—operates three locations in Cincinnati, the main Center PACE in Cincinnati with ACS on Court Street and in Park Eden, (part of the Cincinnati Metropolitan Housing Authority).



#### Ocyclopinion Alternative Care Centers

- ACS, through the use of special waivers, offer the opportunity to serve rural populations where:
  - Senior population are more likely to be poor, have less formal education and be in poorer health than their urban counterparts
  - Rural seniors have higher rates of nursing home utilization
  - Limited transportation options and longer travel times to healthcare options
  - Rural areas have a shortage of healthcare providers
- ACS are less capital intensive than the traditional Day Center

