



Request for Information For Program of All-Inclusive Care for the Elderly (PACE)

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Responses Due By: 4:30 PM CST/September 4, 2026

NOTE: This Request for Information (RFI) is solely for information and planning purposes and does not constitute a solicitation. This information will be reviewed and discussed by the state agency and may result in the advertisement of a formal and competitive Request for Proposal for any or all of the services included in the RFI.

Only information which is in the nature of legitimate trade secrets or non-published financial data may be deemed proprietary or confidential. Any material within a response to this RFI identified as such must be clearly marked and will be handled in accordance with the Louisiana Public Records Act, R.S. 44:1-44 and applicable rules and regulations.

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The Louisiana Department of Health (LDH) reserves the right to request additional information. In the event it becomes necessary to revise or withdraw the RFI for any reason, the Department shall provide addenda and/or supplements to potential respondents on its website at <https://ldh.la.gov/news/category/7>.

Section I. Overview

LDH, Office of Aging and Adult Services (OAAS) is interested in collecting information from potential vendors to develop a Program of All-Inclusive Care for the Elderly (PACE) in areas not currently served by a Louisiana PACE program (See Section II below for areas currently served by PACE programs). Each responder is solely responsible for preparing and submitting their response in accordance with the instructions in this RFI. This RFI is for planning purposes only and should not be construed as a Request for Proposals (RFP).

This is a solicitation for information. This information will be reviewed and discussed by the State agency and may or may not result in an offer. The responder bears all costs associated with responding to this RFI, or opening and operating a PACE Center. LDH assumes no obligation to reimburse any costs incurred in preparing a response to this RFI.

The provisions of the Louisiana Public Records Act (La. R.S. 44.1 et. seq.) apply to this RFI. Pursuant to this Act, all proceedings, records, contracts, and other public documents relating to this RFI shall be open to public inspection. Respondents are reminded that while trade secrets and other proprietary information submitted in conjunction with this RFI may not be subject to public disclosure, the respondent must claim protections at the time of submission of its response. Respondents should refer to the Louisiana Public Records Act for further clarification.

Section II. Goals and Objectives/Purpose

The purpose of this RFI is to identify and obtain information about the development, design, and planning for the Program of All-Inclusive Care for the Elderly (PACE) in Louisiana.

PACE is a Medicare and Medicaid program that provides comprehensive medical and social services to eligible people ages 55+, who require nursing home level care but would like to remain in the community. PACE operates under a collaborative three-way relationship involving the Centers for Medicare & Medicaid Services (CMS), individual states, and PACE organizations. PACE organizations provide all Medicare-covered services and all Medicaid-covered services included in the state's Medicaid plan, as well as other services and supports deemed necessary by the PACE organization's interdisciplinary team. For most participants, this comprehensive service package enables them to remain in the community rather than receive care in a nursing home. Financing for the program is capped using a capitated model, which allows providers to deliver all services participants need rather than only those reimbursable under Medicare and Medicaid fee-for-service plans.

LDH is interested in expanding PACE throughout the state. Currently there are PACE organizations serving the Greater New Orleans area, the Greater Lafayette area, East Baton Rouge Parish, West Baton Rouge Parish, Avoyelles Parish and Rapides Parish; a PACE organization is pending in the greater Shreveport area. Each PACE center provides services to specifically identified parishes or zip code areas, with each PACE provider serving its own exclusive area. A current list of the parishes and zip codes served by each Louisiana PACE organization is available on LDH's PACE webpage at <https://ldh.la.gov/office-of-aging-and-adult-services/PACE>.

In 2024, LDH contracted with *Myers and Stauffer* to conduct a [market analysis](#) identifying areas of Louisiana that would most benefit from a PACE Center. This RFI, together with the market analysis, will inform LDH's approach to PACE expansion in Louisiana.

LDH expects that PACE providers serving Louisiana residents will:

- Adhere to all applicable state and federal regulations;
- Have the ability and willingness to accept and serve nursing home residents who are eligible for PACE and wish to move into the community;
- Identify a rural area (as defined by the Rural Health Transformation Hub, <https://www.ruralhealthinfo.org/am-i-rural#/>) as part of the service area;
- Work to establish affordable housing opportunities, whenever feasible; and
- Provide all reports and requested documents to LDH staff within the timeframe established by LDH.

Section III. Background

About PACE

PACE is an innovative model of community-based care that enables individuals who are 55 and older and certified as meeting nursing facility level of care to live a healthy life in the community for as long as possible. PACE is a service delivery model that began in San Francisco, California in 1973. Congress first authorized a national PACE demonstration in 1986. In 1997, Congress authorized Medicare to pay for PACE services and added PACE as an optional Medicaid state plan benefit, giving joint administration and oversight of the program to CMS and states. The first Louisiana PACE Center opened in New Orleans and began providing services in 2007.

The Federal PACE regulation establishes basic PACE eligibility requirements. Individuals must meet the following criteria:

- Be at least 55 years old;
- Reside in the service area of the PACE organization;
- Meet the state criteria for nursing facility level of care; and
- Be able to live safely in the community at the time of enrollment.

Participation in PACE is voluntary and enrollees may disenroll at any time. However, enrollment and disenrollment always occur on the first day of a month.

National surveys show that older adults prefer to remain in their own homes and communities as they age, and PACE accomplishes this at approximately half the cost of out-of-home placement. Just as importantly, PACE provides and coordinates all services covered under both Medicaid and Medicare, thus reducing the fragmentation of healthcare delivery for this highly vulnerable population. PACE has flexibility to provide non-traditional healthcare related services that address the social determinants of health, such as access to social activities, healthy foods, or even pest control services if a participant needs them to be safe and healthy in their home. PACE accepts full financial risk for all services determined necessary to address the social, emotional, medical and physical needs of their participants.

PACE programs offer pre-paid, capitated, coordinated, and comprehensive health care services in a specific geographic area designed to meet the following objectives:

- To enhance the quality of life and autonomy for frail, older adults;

- To maximize the dignity and respect for older adults;
- To enable frail, older adults to live in the community as long as medically and socially feasible; and
- To preserve and support the older adult's family unit.

The PACE provider's interdisciplinary team; consisting of the participant, participant family, and professional and paraprofessional staff; assesses participant needs, develops a plan of care, and monitors delivery of all services, including home care, acute care and nursing facility services within an integrated system for a seamless provision of wrap-around healthcare. Typically, PACE organizations provide social and medical services in an adult day health center supplemented by clinical, in-home and other services, as needed.

The financing model combines payments from Medicare and Medicaid, allowing PACE to provide all needed services rather than be limited to those reimbursable by Medicare or the Medicaid fee-for-service systems. PACE organizations assume full financial risk for beneficiary care without limits on amount, duration or scope of services. PACE providers can also accept private pay for those not eligible for Medicaid and/or Medicare. PACE is obligated to provide the same level of support, which includes all Medicare and Medicaid services available in Louisiana, to each participant regardless of the participant's funding source.

Typical PACE services include, but are not limited to, the following:

- Adult day health care that offers nursing; physical, occupational and recreational therapies; meals; nutritional counseling; social work and personal care;
- Primary medical care provided by either a PACE physician, a community-based physician, a physician assistant or a nurse practitioner familiar with the history, needs and preferences of each beneficiary, all specialty medical care, and all mental health care;
- Interdisciplinary team members' assessments and treatment plans;
- Home health care, personal care, homemaker and chore services;
- Restorative therapies, including physical therapy and occupational therapy;
- Diagnostic services, including laboratory, x-rays, and other necessary tests and procedures;
- Transportation to and from the PACE Center and other medical appointments;
- All necessary prescription drugs and any authorized over-the-counter medications included in the plan of care;
- Social services;
- All ancillary/specialty health services, such as audiology, dentistry, optometry, podiatry, speech therapy, prosthetics, durable medical equipment, and medical supplies;
- Respite care;
- Emergency room services;
- Acute inpatient hospital stays; and
- Nursing facility care, which can be short-term stays or for convalescent care, as needed.

In addition to being the provider of all service and support needs, PACE is also the health insurer and is obligated to follow the federal regulations that apply to PACE acting as such. PACE is at full financial risk for enrolled participants, which includes having the capability to cover catastrophic health events encountered by the PACE participants.

LDH Vision for PACE

LDH's OAAS operates several Medicaid home and community-based programs to serve older adults and others who acquire a disability in adulthood, including the Community Choices Waiver, the Adult Day Health Care Waiver, Long-Term Personal Care Services, and PACE. These programs provide home and community-based services (HCBS) that help individuals remain in their homes and communities by filling gaps in the services and supports otherwise available to them.

Louisiana is working to rebalance its long-term services and supports system to provide greater access to non-institutional, home and community-based services. According to AARP's 2024 Home and Community Preferences Survey, 75% of adults age 50 and older want to remain in their current homes, and 73% want to remain in their communities, as they age. Expanding PACE services throughout Louisiana is an OAAS priority because PACE gives more people meaningful access to this kind of person-centered, wrap-around home and community-based services, and because PACE is well-positioned to support OAAS's broader efforts to help nursing facility residents transition back into the community.

PACE fits within this broader effort. Since 2009, OAAS has actively transitioned over 3,600 individuals from nursing facilities to community settings through the CMS Money Follows the Person (MFP) Demonstration Grant, with a re-institutionalization rate of less than 6% within the first year of transition. In 2018, LDH also entered into an agreement with the U.S. Department of Justice (DOJ) that requires LDH to transition nursing facility residents with Serious Mental Illness (SMI) back into the community. PACE offers another pathway for these transitions: it is an important option for people who would prefer to live in the community rather than a nursing home, and OAAS's nursing facility transition programs will work closely with PACE providers throughout the transition process.

Section IV. Detailed Requirements

Responders are asked to clearly and concisely describe how the responding organization envisions development of a PACE program in an identified area(s) of Louisiana. At a minimum, the response must include the following information about the responder's own proposed PACE Center(s):

1. Location, number, and timing of the proposed PACE Center(s). Identify the specific location(s) where the responder proposes to open a PACE Center and the area(s) that center will serve, and explain why each area was chosen. State how many PACE Centers the responder proposes to open and the proposed timeframe for opening each Center.

2. How the proposed PACE Center(s) would serve rural areas. Describe how the responder's proposed PACE Center(s) would serve rural areas within its identified service area(s), including outreach and service delivery strategies for rural residents. (LDH note: PACE is included among the services eligible for incentive funding through Louisiana's Rural Health Transformation grant, which respondents may wish to consider in developing their rural service strategy.)

3. How the proposed PACE Center(s) would assist nursing facility residents transitioning to the community. Describe the responder's capacity to enroll and effectively serve individuals transitioning from nursing facilities back to life in the community, including individuals with serious mental illness (SMI) who meet all PACE eligibility requirements, and describe how the responder would integrate mental health services into participants' care plans. The PACE model's active, wrap-around care coordination aligns well with the needs of this population. OAAS transitions as many as 300-400

individuals from nursing facilities each year and expects PACE organizations to have the resources and systems needed to serve this population, working closely with LDH Transition Coordinators and others who assist with nursing facility transitions.

4. How the proposed PACE Center(s) would assist with affordable housing. Many people transitioning from nursing facilities into the community are in need of housing. Describe how the responder would develop or work with housing developers or existing housing opportunities to help address the affordable housing needs of individuals transitioning from nursing facilities into the community.

In addition to the above required information, OAAS is inviting RFI responders to provide the following information, as applicable:

- Organization's mission and history of serving the aging adults with disabilities and/or chronic conditions.
- Organization's history of serving individuals that have a serious mental illness.
- Key partners needed by a PACE provider, and an indication of how those partners and others providers needed for the PACE provider network could be developed.
- Financial package including financial statements for the previous 3 years and financial projections for the next 5 years.
- A marketing/outreach plan to provide relevant information to the population eligible for PACE.
- A financial plan showing infrastructure costs and other start-up costs needed.
- Specific buildings/areas where the Center could be located to best serve the population and an indication of why that area was chosen.
- A discussion of needed resources to assist people in nursing homes that want to transition into a life in the community.
- Any experience your organization has operating a PACE facility, including information about the current PACE centers under the organizations umbrella.
- Identify the challenges envisioned in opening a PACE Center specific to the identified location.
- Experience in the area of affordable housing and how that experience will help to support a successful PACE organization and its participants.

Section V. Performance Requirements

The PACE Organization that works with Louisiana and CMS to open a PACE Center in Louisiana is expected to comply with federal and state regulations below:

- Code of Federal Regulations at 42 CFR Part 460 ([eCFR :: 42 CFR Part 460 -- Programs of All-Inclusive Care for the Elderly \(PACE\)](#))
- Louisiana Regulations at LAC Title 50 XXIII ([LAC Title 50 TOC](#))
- Applicable Louisiana licensing regulations found in LAC Title 48 ([LAC Title 48 Book 1](#) and [LAC Title 48 Book 2](#)).

Other resources with more information regarding PACE and PACE services:

- CMS website at <https://www.medicaid.gov/medicaid/long-term-services-supports/pace/programs-of-all-inclusive-care-for-elderly-for-states>
- National PACE Association at <http://www.npaonline.org>
- Myers and Stauffer at <https://myersandstauffer.com/what-we-do/>

Section VI. Submission of Information and Inquiries

All questions regarding this RFI should be directed to:

Jeanne Abadie
PACE Program Manager
Louisiana Department of Health
Office of Aging and Adult Services
OAASContracts@la.gov

Respondents should submit an electronic copy of the response and/or questions to OAASContracts@la.gov to the attention of Jeanne Abadie, PACE Program Manager and reference PACE RFI in the subject line.