



February 2025

Dear Valued Partner,

The New Jersey PACE Association is excited to celebrate its seventh anniversary!

To mark this milestone, we're thrilled to announce a new PACE Partner membership specifically designed for businesses like yours that provide vital services and support to Programs of All-Inclusive Care for the Elderly (PACE) in New Jersey. We invite your organization to join us and connect with PACE organizations throughout the Garden State, working together to make a positive impact on the communities we serve.

The PACE community in New Jersey is expanding rapidly, with new programs under development in five counties. Soon, these programs will join those in 12 counties that already have access to PACE. By the end of this year the last four New Jersey counties will have been designated for PACE program development – a significant achievement. This statewide coverage will guarantee access to this essential care model for eligible older adults, ensuring that individuals aged 55 and over who require a nursing home level of care can maintain their independence within the community.

As a PACE Partner member, you'll enjoy a range of benefits, including:

- Invitations to meet-and-greet events with NJ PACE leaders
- Dedicated opportunities to present virtually to each PACE program
- Placement of your company logo and URL on the future NJ PACE Association website
- Invitation-only participation in Association work groups
- Bi-annual public policy virtual meetings with the NJ PACE Association
- Opportunities to share your expertise through educational offerings
- Priority invitations to NJPA events and sponsorship opportunities

This is an opportune time to join the exciting expansion of PACE in New Jersey! Please find the attached membership application for more information. For any questions, please don't hesitate to contact me at PFriedman@boldagepace.com. We look forward to welcoming you as a PACE Partner!

Sincerely,

Pinni Friedman,
President



PACE Partner Membership Application

<i>Company Information Company Name:</i>	<i>Website URL:</i>
<i>Full Address:</i>	
<i>Contact Name:</i>	<i>Contact Title:</i>
<i>Contact Email:</i>	<i>Contact Phone:</i>

Professional Information *Please circle the profession your organization represents:*

- | | | | |
|-------------------------|----------------------------|---------------------------|-------------------------|
| Accounting/Finance | Food Service Company | Non-profit organization | Architect |
| Insurance Provider | Pharmacy | Bank | Law Firm |
| Rehabilitation Services | Consultant | Medical Products | Transportation Services |
| Behavioral Health | Electronic Medical Records | Medical Services Provider | Other _____ |

Does your organization currently offer products/services to PACE organizations: In the US? Yes No, In NJ? Yes No

Annual Dues

Membership dues are \$3,000 annually. All membership must be renewed by June 30th. For members joining mid-year, dues will be prorated.

Payment

Please submit full payment of your dues payable by check to NJ PACE Association; dues are non-transferable and non-refundable. Dues are not a tax deductible donation but may be eligible as a business expense deduction.

Terms and Conditions

Designation as a NJ PACE Association PACE Partner member is available to organizations that are interested in the objectives of the NJ PACE Association and provide or offer products or services to our members and must not be an excluded organization from participation in state or federally funded programs. To be considered for designation as a NJ PACE Association PACE Partner, an interested organization must complete the PACE Partner application and submit full payment. Organizations designated as NJ PACE Association PACE Partner members may use the NJ PACE Association PACE Partner member name and/or logo in accordance with NJ PACE Association marketing guidelines. The NJ PACE Association Board reserves the right to terminate a designation of any organization that does not comply with the policies and requirements governing the NJ PACE Association PACE Partner program. Determinations of the Board are final.

____ (Initial) I attest that our organization agrees to abide by the NJ PACE Association’s policies governing the NJ PACE Association PACE Partner member designation.

Signature _____ **Date** _____

Please submit application and payment to: NJ PACE Association, 1075 Stephenson Avenue, Suite B, Oceanport NJ 07757.

Questions/Comments: PFriedman@BoldAgePACE.com