

BUSINESS PLAN OUTLINE

- **Table of Contents**
 - One page showing the topics and page references for the plan.
- **Executive Summary**
 - **The Company**
 - What type of business do you propose to own/run?
 - What services will be provided?
 - What is the current stage of development (start-up, expansion)?
 - What is unique about your service?
 - **Keys to Success**
 - What do you see as the critical keys to your company's success?
 - **Statement of Funding Summary**
 - Summarize the financial projections, to include: start-up expenses, yearly gross profits, break-even, return on investment and cash flows.
- **Description of Business**
 - **Company Ownership**
 - Who are the principals and what are their proportions of ownership?
 - How is the business structured (i.e. corporation, sole proprietorship, limited liability corporation)? If not a sole proprietorship, applicant should include a copy of a Certificate of Good Standing from the Kansas Secretary of State's Office certifying the business has complied with the applicable provisions of the laws of the State of Kansas, is in good standing and authorized to transact business within the state.
 - What is the current status of the business or projected opening?
 - **Description of Product/Service**
 - Describe your services and service delivery model.
 - Discuss any opportunities for expansion of services to include how your business will ensure service capacity for all individuals that select your business for services (i.e. outline a planned growth strategy).
 - Do you have letters of intent or commitments from people willing to staff your agency? How do you plan to attract qualified staff?
 - **Company Location and Facilities**
 - What is your proposed location and why did you choose it?
 - What are the proposed office hours of your business?
 - Will the building be leased/rented or owned?
 - If leased, what are the terms of the contract? Include copies of the supporting documents in the appendix.
 - Will renovations be required?
 - Does the location accommodate growth of the business?
 - What equipment or furnishings will be required?
 - Where will locked files/information be kept?
 - **Licenses/Permits/Regulations**
 - What licenses or permits are you required to obtain? If not currently licensed, has the application process been initiated? Note: affiliation cannot be finalized without a license being in place, if a license is required.

- Is your business affected by zoning, ADA, OSHA, Fire Marshall regulations?
 - **Insurance/Bonding**
 - Describe the insurance coverage you have (or will obtain) to protect both the company and yourself. Note: before the affiliation can be finalized, Sedgwick County requires a copy of a certificate of insurance (ACORD form 25) in the company's name with Sedgwick County listed as an additional insured with \$500,000 minimum for general liability and auto liability (if transport consumers). Insurance certificate should also include coverage for workers compensation and professional liability, if appropriate.
 - Will you/your employees need to be bonded?
 - Will your company provide employee benefits for you and/or your employees? Explain and include copies of supporting documents in the appendix as appropriate.
 - **Start-Up Costs**
 - Create an itemized list of anticipated start-up costs.
- **Market Analysis**
 - **Target Market and Demographics**
 - Who are your potential customers?
 - What is your geographic market area? How many potential customers are in your market? Note: basic demographic data can be provided by the Sedgwick County Developmental Disability Organization – contact Jeannette Livingston at (316) 660-7635 or Jeannette.Livingston@sedgwick.gov
 - Identify whether your business plans to specialize to serve a potential market segment. Note: affiliated service providers cannot discriminate against any person because of the severity of a person's disability; however, providers may specialize in services as long as all persons are offered appropriate services without regard to the severity of each person's disability.
 - What do you feel will be the factors that will influence consumers choice decisions: quality, service, personal contacts, combination of factors or other factors?
 - **Competitive Analysis**
 - Define the current advantages and disadvantages of your major competitors' services. Get to know the competitors' services by calling, sending someone to the agency to see/discuss services, looking at their advertising, etc.
 - Who is the Director of Services manager/leader?
 - Identify potential substitute services?
 - What are the important trend(s) in the business/industry? Are revenues growing, stable or in decline?
 - **Competitive Edge**
 - What makes your service unique?
 - What features or service will you offer that will make you competitive with other providers?
 - How will you attract and keep your share of the market?
 - Explain all that apply: customer services, convenience, product quality, location, etc. Will your agency accept private payments?
 - What are your service policies? Must include a dispute resolution policy.
- **Marketing Strategy and Implementation**
 - **Marketing Plan/Promotion Strategy**
 - Explain the methods the company will use to appeal to consumers.
 - Describe the promotional literature, brochures and promotional items proposed or developed.

- What are your marketing tactics (i.e. community involvement, association memberships, customer database, media relations, special events, etc)?
 - **Pricing Strategy**
 - Present your pricing strategy for any non-HCBS services (if accept private payment).
 - Present why you feel this strategy will enable you to market your services, maintain and increase market share in the face of competition.
 - Compare your services/pricing policy with those of your major competitors.
 - Describe any discount allowance or sliding fee scale.
 - **Strategic Alliances**
 - Explain your strategic alliances, such as co-marketing, co-development, commission and cooperative arrangements.
 - Is your fate tied to that of any other company?
- **Human Resources**
 - **Management Summary**
 - List the members of the management team and summarize their experience. Describe their functions in the business. Include resumes' in the appendix.
 - Note any management gaps and weaknesses and specify how they will be corrected.
 - List by name and firm the professionals you will engage to assist with management functions, if applicable (i.e. lawyer, accountant, outside consultant, etc.).
 - Who is on your board of directors and what do they contribute to the business? Who are your major stockholders and what is their role in management?
 - Specify who will be your Director of Services and who will process Medicaid billings.
 - **Organizational Structure**
 - Describe your organizational structure and include a brief description of who does what and their qualifications. Include an organizational chart in the appendix.
 - List proposed salaries and wages. Are they consistent with industry norms?
 - Describe the local labor market in terms of local unemployment rates, education, background and experience. Where will you find your new employees?
 - **Personnel Plan**
 - List titles or title groups of all personnel.
 - Chart three years of projected costs for personnel (salary and benefits). Include the addition of new personnel with business growth, as well as pay increases.
- **Financial Plan**
 - **Important Assumptions**
 - List important assumptions that have an effect on your projections such as: short/long term interest rates, benefits, sales on credit, expenses in cash, etc.
 - **Break-Even Analysis**
 - Provide figures for fixed costs, unit price and unit variable costs and indicate the level of business where your gross profit equals your operational costs.
 - Include explanations and assumptions.
 - **Projected Profit and Loss**
 - Provide a detailed profit/loss statement by month for the first year.
 - Provide yearly summaries for the second and third years.
 - Existing business should supply year-end profit and loss statements for the last three years.
 - Include explanations and assumptions.

- **Projected Cash Flow**
 - Detail projected cash flow by month for the first year.
 - Provide yearly summaries for the second and third years.
 - Include explanations and assumptions.

- **Projected Balance Sheet**
 - Detail your start-up costs or include balance sheets and/or tax returns for the previous three years and a current balance sheet and income statement.
 - Give detailed projections of your assets, liabilities and capital for the first year.
 - For an existing business, a list of aged accounts receivable and accounts payable.

- **Business Ratios**
 - Profitability Ratios
 - Activity Ratios
 - Liquidity Ratios
 - Other relevant ratios

- **APPENDIX**
 - Personal resumes' for all principals, partners and officers of the business.
 - Personal financial statements for all principals, partners and anyone owning 15% or more of the company.
 - Letters of reference regarding you or your business (at least three). These letters may not be from relatives, employees or individuals receiving payment from you or your business.
 - At least one letter from a prospective consumer indicating they are interested in receiving services from your business in Sedgwick County.
 - Tax Clearance Certificate
 - Copies of all required licenses, permits, leases and contracts (i.e. copy of contract with State of Kansas required for all businesses applying to provide Financial Management Services/self-directed services; home health license).
 - Certificate of Good Standing from the Kansas Secretary of State's Office
 - Background checks for officers of the organization and anyone handling funds.
 - Required policies to include:
 - Background Checks
 - Dispute Resolution
 - Medicaid Fraud, Waste and Abuse
 - Emergency/Crisis Backup Plan
 - Organizational Chart