A Vision for Long-Term Care

Robyn I. Stone DrPH
Executive Director, Institute for the Future of Aging Services (IFAS)
Senior Vice President of Research, American Association of Homes and Services for the Aging (AAHSA)

16th Annual Princeton Conference
Princeton, NJ
May 21, 2009
“The more sand has escaped from the hourglass of our life, the clearer we should see through it.”

Jean-Paul Sartre
Defining Long-Term Care

- Blurred boundaries between acute, primary, chronic LTC and preventive services
- Focus on function, well-being, health status
- Broad range of services and supports
- Housing and services equally important
- Formal and informal care
Factors Influencing Our World View

- Demographics (Aging and Immigration)
- Economics
- Globalization
- Technology
- Values
Total Projected Elderly Population in U.S. through 2050

- Total Elderly Population (millions)
  - 85 and Older
  - 65-84

<table>
<thead>
<tr>
<th>Year</th>
<th>85 and Older</th>
<th>65-84</th>
<th>Total Elderly Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>4.3</td>
<td>30.8</td>
<td>35.1</td>
</tr>
<tr>
<td>2010</td>
<td>6.1</td>
<td>34.1</td>
<td>40.2</td>
</tr>
<tr>
<td>2020</td>
<td>7.3</td>
<td>47.4</td>
<td>54.7</td>
</tr>
<tr>
<td>2030</td>
<td>9.6</td>
<td>61.8</td>
<td>71.4</td>
</tr>
<tr>
<td>2040</td>
<td>15.4</td>
<td>64.6</td>
<td>80.0</td>
</tr>
<tr>
<td>2050</td>
<td>20.9</td>
<td>65.8</td>
<td>86.7</td>
</tr>
</tbody>
</table>
Population Aged 65+ by Race and Hispanic Origin: 2003, 2030, and 2050 (Percent)

Source: US Census Bureau
Minority Elderly (2005)

- % of Elderly Population
  - All Elderly: 100
  - African-Americans: 8.4
  - Hispanics: 6.6

- % Living at or Below Poverty
  - All Elderly: 23.4
  - African-Americans: 10.1
  - Hispanics: 20.4

- % Below Poverty w/out S.S.
  - All Elderly: 59.8
  - African-Americans: 52.5
  - Hispanics: 40
Projections of the Number of People Age 65+ Who Will Need Long-Term Care

Source: Congressional Budget Office (1999)
# Number of People with Alzheimer’s Disease, by Age Group (in Millions)

<table>
<thead>
<tr>
<th>Year</th>
<th>Age 65-74</th>
<th>Age 75-84</th>
<th>Age 85+</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>0.3</td>
<td>2.4</td>
<td>2.4</td>
<td>5.1</td>
</tr>
<tr>
<td>2020</td>
<td>0.3</td>
<td>2.6</td>
<td>2.8</td>
<td>5.7</td>
</tr>
<tr>
<td>2030</td>
<td>0.5</td>
<td>3.8</td>
<td>3.5</td>
<td>7.7</td>
</tr>
<tr>
<td>2040</td>
<td>0.4</td>
<td>5.0</td>
<td>5.6</td>
<td>11.0</td>
</tr>
<tr>
<td>2050</td>
<td>0.4</td>
<td>4.8</td>
<td>8.0</td>
<td>13.2</td>
</tr>
</tbody>
</table>

Source: National Institute on Aging
## Oldest States

<table>
<thead>
<tr>
<th>Year</th>
<th>States</th>
<th>% of 65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>1995</td>
<td>Florida</td>
<td>18.6%</td>
</tr>
<tr>
<td></td>
<td>Pennsylvania</td>
<td>15.9%</td>
</tr>
<tr>
<td></td>
<td>Rhode Island</td>
<td>15.8%</td>
</tr>
<tr>
<td></td>
<td>West Virginia</td>
<td>15.3%</td>
</tr>
<tr>
<td></td>
<td>Iowa</td>
<td>15.2%</td>
</tr>
<tr>
<td>2025</td>
<td>Florida</td>
<td>26.3%</td>
</tr>
<tr>
<td></td>
<td>West Virginia</td>
<td>24.9%</td>
</tr>
<tr>
<td></td>
<td>Montana</td>
<td>24.4%</td>
</tr>
<tr>
<td></td>
<td>Oregon</td>
<td>24.2%</td>
</tr>
<tr>
<td></td>
<td>Arkansas</td>
<td>23.9%</td>
</tr>
</tbody>
</table>
Givens in 2030

- Population aging (wide geographic variation)
- Younger disabled surviving birth, extended longevity
- Increasing gap between haves/have-nots
- Increased ethnic/cultural diversity among consumers/caregivers
- Six-generation families in the norm
Givens in 2030 cont’d

- Young-old vs. Old-old
- Decreased availability of traditional low wage workforce
- More proactive/demanding consumers
- Transportation problems
- Lack of affordable senior and disabled housing
- Retirement is reinvented
Uncertainties

- LTC financing-relative roles of public and private sector
- Role of biotech, IT, pharmacotech, etc
- Adoption of universal design
- Effects of globalization on workforce
- Role of terrorism, natural disasters and pandemics
Triple Knot of Aging Services

- Financing
- Delivery (Care Settings)
- Workforce (Formal and Informal)
Emerging Issues/Trends

- State rebalancing of Medicaid dollars toward home and community-based services
- Consumer direction in home and community based services
- Culture change in nursing homes
- Expansion of residential alternatives – how affordable?
Emerging Issues/Trends
Cont’d

- Managed LTC
- Integration of acute, chronic and LTC
- Transitional Care
- Workforce/Talent Development
- Quality assurance and improvement
My Wish list for 2030
Financing in 2030

- Similar to German LTC insurance model
  - Everyone pays in through premiums
  - Everyone covered who meets functional eligibility
- Modest coverage; private wrap-around policies available
Financing in 2030  Cont’d

- Disability (consumer-directed) model provides cash for services ($ follows the person)
- Room and board partially subsidized
- States perform eligibility determination, service plans, safety net for poor.
- Built around family care
LTC Delivery System

- Range of home and community-based services
- Nursing homes for post-acute & end of life care
- Residential options (affordable AL, housing w/services)
- Technology improves home-based care
- Increased focus on primary/secondary prevention
Devolution to Communities

- Planning and implementation at community level
- Services and supports built around informal or formal NORCs (population-based service delivery)
- Standardized electronic records facilitate integration of acute, primary and LTC
- Increased consumer choice facilitated by availability of comparative quality information
Future of the Workforce

- State provides incentives to create new paradigm for LTC nursing
- Expansion of frontline caregiver pool includes older workers and former family caregivers
- Federal and state incentives to develop geriatric/gerontological training for all LTC professionals (physicians, nurses, therapists, administrators)
- Cross-training and cross-certification allows staff to work in multiple settings
- Local community hubs provide training for family caregivers
“There’s no use trying,” she said: “one can’t believe impossible things.”

“I dare say you haven’t had much practice”, said the Queen. “When I was your age, I always did it for half-an-hour a day. Why sometimes I’ve believed as many as six impossible things before breakfast.”

Alice and the White Queen
“Through the Looking-Glass”