**AARP Public Policy Institute** 

## Raising Expectations: Delivering Long-Term Services and Supports

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Realizing Reaching

## The Pepper Commission: A Call for Action



"Families exhaust themselves and their resources to provide care at home; long stays in a nursing home consume the savings of a lifetime. As the population ages and technology extends life for young and old Americans alike, these burdens will only increase."

Public support, primarily through welfare-based Medicaid program, comes only after people have exhausted their resources. Consequently, most Americans face the risk of impoverishment should they need long-term care."

"Growth in the numbers of people likely to need long-term care makes improvements in the nation's financing of this care imperative for the well-being of all Americans." -September 1990



Realizing Reaching

## Federal Commission on Long-Term Care



## **CALL TO ACTION**

Individuals and families rarely have sufficient resources (either savings or private insurance) to pay for an extended period of LTSS...

A dramatic projected increase in the need for LTSS in coming decades will confront significant constraints in the resources available to provide LTSS...

Now is the time to put these new approaches and efforts in place if the coming generations of Americans will have access to the array of LTSS needed to remain independent themselves ... **The need is great. The time to act is now.** 

September 2013



# **Goals For Reforming LTSS**

- Strategies for financing LTSS must include both private and public sector solutions.
- Design and delivery of all LTSS should be person and family centered—tailored to individual needs and preferences.
- Enable people to remain in their homes and communities for as long as possible through an array of HCBS options.
- Address the institutional bias in Medicaid.
- Give meaningful support to families and friends who provide help.
- Support greater innovation and encourage experimentation with new ways of organizing care.

#### Framework for Assessing LTSS System Performance





## In a High Performing System...

### Affordability and Access

 ...consumers are able to easily find and afford the services they need and there is a safety net for those who cannot afford services

### Choice of Setting and Provider

 …a person- and family-centered approach to LTSS places high value on allowing consumers to exercise choice and control over where they receive services and who provides them

### Quality of Life and Quality of Care

 ...services maximize positive outcomes and consumers are treated with respect and personal preferences are honored when possible

### Support for Family Caregivers

 …..the needs of family caregivers are assessed and addressed so that they can continue in their caregiving role without being overburdened

### Effective Transitions

 ...disruptive transitions between care settings are minimized and people are successfully transitioned from nursing homes back to the community

### State Ranking on Overall LTSS System Performance



#### State Ranking on Overall LTSS System Performance



# **Dimension: Affordability and Access**

In a high-performing LTSS system, consumers are able to easily find and afford the services they need and there is a safety net for those who cannot afford services.

## Affordability and Access includes:

- The relative affordability of private-pay LTSS;
- The proportion of individuals with private long-term care insurance;
- The reach of the Medicaid safety net and the Medicaid LTSS safety net to people with disabilities who have modest incomes; and
- The ease of navigating the LTSS system.



#### AFFORDABILITY AND ACCESS

#### State Variation: Private Pay Nursing Home and Home Health Cost

Percent



Data: AARP Public Policy Institute analysis of Genworth 2013 Cost of Care Survey data and 2012 American Community Survey Public Use Microdata Sample. Source: State Long-Term Services and Supports Scorecard, 2014.

#### AFFORDABILITY AND ACCESS

#### State Variation: Reach of Medicaid Safety Net



#### Note: ADL = Activities of Daily Living.

Data: Percentage on Medicaid - AARP Public Policy Institute analysis of 2012 American Community Survey Public Use Microdata Sample. Percentage on Medicaid LTSS - Mathematica Policy Research analysis of 2008/2009 Medicaid Analytical Extract (MAX); AARP Public Policy Institute analysis of 2009 American Community Survey Public Use Microdata Sample; and AARP Public Policy Institute, *Across the States 2012: Profiles of Long-Term Services and Supports.* 

Source: State Long-Term Services and Supports Scorecard, 2014.

# **Caregiver Support Ratio**



Source: D. Redfoot, L. Feinberg, and A. Houser, The Aging of the Baby Boom and the Growing Care Gap, AARP Public Policy Institute, 2013

# Valuing the Invaluable

- In 2013, about 40 million family caregivers in the U.S. provided care to an adult with limitations in daily activities
- The estimated economic value of their unpaid contributions was about \$470 billion in 2013
  - from an estimated \$450 billion in 2009

# How Much is \$470 Billion?



## Time

Putting a Dollar Value to Family Caregiving



#### TIME COMMITMENT

Caregivers spend an average of 18 hours per week providing care to a family member.

60% Family caregivers caring for an adult while employed full or part time.

Provide **21+ hours** of family care per week while working a job.

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# Financial

Putting a Dollar Value to Family Caregiving





Family caregivers who say they have to use their own money to help provide care to their relative.



felt financially strained.



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