

Addressing the Dilemmas in Long Term Care

As a society, we are aging at a rapid pace. Based on percentages, the fastest growing segment of the US population is over 85 years old, spurred by advances in medicine and better diets. By percentages of growth, 75-84 year olds and 65-74 year olds represent the next fastest growing number of US residents. Then there are the raw numbers of “Baby Boomers,” defined as those born between (and including) 1946 and 1964, about 75 million people or 29% of the U.S. population in 2006 by one estimate. That means that there are twice as many Boomers as there are all people 65 years of age or older. Depending on Government or independent sources, the Social Security and the Medicare Trust Funds could be depleted in 20-35 years.

What does that mean for Generations X and Y to follow, let alone so many Boomers? It means you should be saving for your own health care needs, including “Long Term Care,” and insurance for that purpose eventually. Long Term Care addresses a wide range of health and personal care needs, from simple assisted living to nursing home care for elderly and the disabled. It also means so many boomers and Generation Xers too are learning how to be caregivers for their parents and grandparents, and therefore caring and nurturing has come full circle.

None of us ever wants to be placed in a nursing home, yet there are 1.6 million Americans in Nursing Homes. Why? The answer is not that complex for most of us, it is money. Wealthy Americans rarely end up in Nursing Homes, they can afford home health care, not only home care caregivers that are the backbone of the healthcare community, but nurses, equipment and more, even 24 hours a day.

For the poor, so many working poor at that, nursing homes are almost always the only answer. For the middle class, from lower middle to upper middle, the vast majority of Americans, responsibilities to our children and a lesser degree ourselves hinder our ability to care for parents and loved ones needing long term care in our homes, always the best option if possible. Therefore we often must find the best nursing home to fit our loved one’s needs. Very few of us ever consider what that may be, or have knowledge about the long term care provided in skilled nursing homes that is fraught with dilemmas and issues nationwide.

There are utility costs rising at rates far outpacing inflation while reimbursement from Medicaid or Medicare rarely keeps pace as government agencies often utilize outdated or generalized data versus regional approaches to balance operator needs. Healthcare isn’t as high a priority as it used to be since September 11th. There are also the skyrocketing costs for liability insurance, nursing homes catching up to physicians and hospitals, when combined with higher deductibles and defense costs, at a rate usually 2-3 times or more higher than annual inflation every year for the last decade.

Nursing home operators are faced with many dilemmas in providing quality care, including a nationwide shortage of nurses, with hospitals recruiting and paying higher wages for many of the best nurses. Then there are the nursing aides or Certified Nursing

Assistants, the primary caregivers in these settings, who are grossly underpaid, due to insufficient reimbursement from Medicaid, Medi-Cal in California, or Medicare not providing true living wages.

There are some silver linings, like reforms in Workers Compensation in California in the last couple years that have curbed years of spiraling costs. The 2005 passage of Assembly Bill 1629 in California provided additional Medi-Cal reimbursement to California operators with the additional revenue predominately a pass-through to increased wages, where it belongs.

With all these dilemmas for much maligned operators responsible for Mom, Dad or Grandma, what do you do? You likely haven't planned ahead, nor has your loved one, as we rarely do in this fast-paced society of ours that doesn't leave us much time beyond the usual here and now. You want your loved one to be close enough for as many family visits as possible, but what about the quality of the care? For answers, first, visit <http://www.medicare.gov/NHCompare/Include/DataSection/Questions/SearchCriteria.asp?>, set up by Medicare by geographic location to compare annual inspections for nursing homes nationwide. You will also see the staffing hours per patient day there. Many states have websites to obtain detailed information, such as the valuable <http://www.canhr.org> in California. You can get a custom nursing home report at some Web sites for a nominal fee, like <http://www.healthgrades.com>, which "grades" doctors and hospitals too.

Give some thought to how Mom or Dad is paying for the nursing home, since private pay patients have more choices. Many nursing homes in more affluent areas don't even admit Medicaid patients, such as extended areas in the Greater San Francisco area as an example. Then after you narrowed your search, visit five nursing homes, preferably at mealtime or maybe change of shifts for employees, either early morning or 3:00 in the afternoon. That will tell you a bit more about the resident's care and satisfaction. If Mom's a Medicaid patient, try to get a 2-bedded room versus 3 or 4 if possible. Look beyond the appearance of the physical plant and see if the residents in the common areas are well groomed and have smiling faces. Ask yourself, do the staff regularly look you in the eye and smile and say "Hello"? Don't introduce yourself, just walk the halls and visit common areas, patient rooms are out-of-bounds, and then take the official tour.

Soak it all in and when you have done so, sit with your loved one and weigh all the factors, and make your selection with Mom in mind. Then after your loved one is a resident, keep in mind the hard work and dedication of virtually all caregivers that have chosen to be in this nursing home caring for others, be patient, get to know them, be kind, and remember that all things in life come full circle.

April 2006, by Timothy Bradley Cassidy