

NOVEMBER 10-14, 2021



**GSA 2021 ANNUAL  
SCIENTIFIC MEETING**

**Disruption to Transformation:  
Aging in the "New Normal"**

# The Long and Winding Road to Long-Term Services and Supports Reform:

## The Good, the Bad, and the Aspirational

Presented by: Robert Applebaum, PhD, FGSA  
Katherine Abbott, PhD, FGSA

| November 11, 2021

**#GSA2021**  
**GSA2021.org**





# DISCLOSURE(S)

I have no commercial relationships to disclose.



# Background

- Increased longevity and medical advances resulting in more individuals in need of long-term services and supports (LTSS) than ever.
- Projections show this group doubling between now and 2040.
- COVID 19 impact on LTSS-- the many system cracks into large and growing faults. Quality, financing and staffing challenges abound
- The question today is what must America do to create a high-quality long-term services system?



# Choice

## Where we have made advancements

**Choice in where,  
how, when and  
by whom  
individuals  
receive LTSS**

- Choice of setting, expansion of HCBS, both private and public, including AL.
- Assessment of preferences in home and residential settings to ensure person centeredness.
- Legislation such as Americans with Disabilities Act.

## Where there is room for improvement

- More HCBS needed in some communities.
- Support services funded primarily by Medicaid.
- Expand range of person-centered outcomes that matter to LTSS recipients and caregivers.
- Access to NH and AL need to be improved.





# Financing

## Where we have made advancements

## Where there is room for improvement

### Financing

- Have created a better Medicaid balance between HCBS and institutional care.
- Some states and even local communities have developed new funding for HCBS.
- Improvements in private long-term care insurance policies, despite limited adoption.

- Public LTSS almost totally reliant on Medicaid.
- Unclear if LTSS is federal or local responsibility
- Fewer private long-term care insurance carriers and very low take up rate.
- No political consensus on financing responsibility or solutions as the federal level.

# Coordination/Transitions

## Where we have made advancements

## Where there is room for improvement

	Where we have made advancements	Where there is room for improvement
<b>Coordination and Integration and Transitions in Care</b>	<ul style="list-style-type: none"><li>• Evidence-based models that improve transitions in care for individuals.</li><li>• Managed LTSS models, PACE, medical homes – efforts to integrate care have been expanded.</li></ul>	<ul style="list-style-type: none"><li>• LTSS siloed – limited coordination across services.</li><li>• Funding is reimbursement- focused by setting.</li><li>• Integrated care demonstrations have not been rigorously evaluated; results are mixed.</li></ul>



# Caregivers, Informal

## Where we have made advancements

## Where there is room for improvement

<b>Friend and Family Caregiver Support</b>	<ul style="list-style-type: none"><li>• Family Medical Leave Act expanding across nation.</li><li>• National family caregiver support program supported by OAA.</li><li>• Recognition about the importance of services designed to support family and friend caregivers.</li></ul>	<ul style="list-style-type: none"><li>• Major responsibility still falls to family and friends with limited support.</li><li>• Programs don't assess caregiver strengths/needs.</li><li>• Hospitals discharging individuals quicker and sicker placing additional pressure on families.</li></ul>
--	--	---



# Direct Care Workforce

## Where we have made advancements

### High quality direct care workforce

- Recognition of importance of direct care workers, some pockets of hazard pay for direct care workers during pandemic.
- Efforts to track provider and worker outcomes, such as turnover have been expanded.
- Innovative management practices being explored in organizations across the nation.

## Where there is room for improvement

- Low pay/benefits the norm.
- Turnover high and retention low across LTSS settings.
- Limited PPE/testing during COVID.
- Immigration policies have not been supportive.
- Research needed on staffing levels, career growth, and retention.



# Prevention, Promotion of Well-Being and Equity

## Where we have made advancements

### Prevention & Promotion of Well-Being

- Expansion of evidence-based chronic disease self-management practices.
- CARES Act increases for Older Americans Act
- Expansion of Age-Friendly Communities
- State's Developing Master Plans for Aging

## Where there is room for improvement

- OAA has not kept up with inflation or growth in older population
- Vast majority of communities in US are not age friendly and don't think about it (Ageism)
- Not focused on positive outcome measures (e.g., joy, hope, meaning in life)



# Inclusivity & Justice

## Where we have made advancements

## Where there is room for improvement

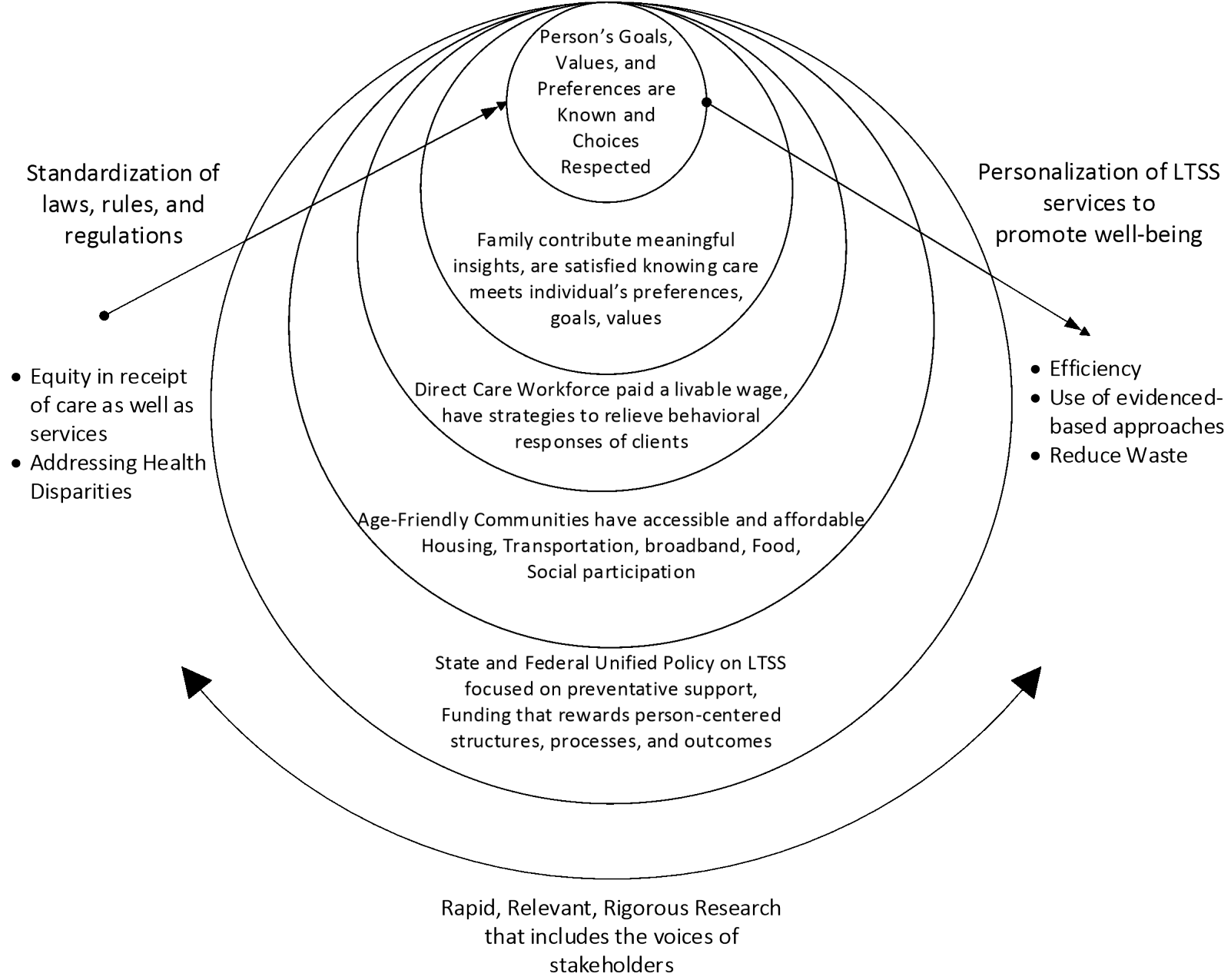
### Inclusivity & Justice

- More Medicaid HCBS has increased access to people of color and people in rural communities.
- Legalization of same sex marriage allowing better sharing of retirement and health benefits.
- Recognition of access limitations in system.

- Rates of disability are higher for people of color
- Access and quality concerns for people of color and individuals with fewer economic resources remain.
- Limited resources allocated to housing options for persons of color and low-income individuals.

# Figure 1. Aspirational Person and Caregiver Centered National LTSS System in the U.S.\*

(\*informed by Alkema, 2016 and NASEM, 2021)





# Time for a National LTSS Policy

- **Incremental changes to today's strategy will not work, can we create a hybrid model building on state experiences but creating national standards?**
- Consumers, their friends & family at the heart of the model of care
- Financing and Equity must be addressed
- Proactive vs. Reactive – Need for expanded social care
- Workforce support both formal and informal
- Using Technology Humanely
- Research informed



NOVEMBER 10-14, 2021



**GSA 2021 ANNUAL  
SCIENTIFIC MEETING**

**Disruption to Transformation:  
Aging in the "New Normal"**

**THANK YOU!**

[applebra@miamioh.edu](mailto:applebra@miamioh.edu)

[abbottkm@miamioh.edu](mailto:abbottkm@miamioh.edu)

**#GSA2021**  
**GSA2021.org**

