



Elder Law: Planning for long-term care can't be left to chance

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The term “long-term services and supports” refers to medical and personal care help that people may need to care for themselves because of disability, illness or simply just getting old.

These services can include some of our most basic needs, such as bathing, toileting and dressing oneself, along with more complex tasks such as medication administration, preparing one’s meals and managing one’s finances.

There is an array of these services available, such as home health care, transportation services, personal care homes, assisted living facilities, skilled nursing facilities and continuing care retirement communities.

However, in this country, the vast majority of these care and support services are provided by unpaid caregivers, usually relatives and friends.

A 2012 survey showed the majority of family caregivers are women age 50 and over who care for a parent for at least one year while maintaining outside employment.

This has certainly been a common phenomenon in our practice, and it can continue until the caregiver child, who often is unpaid, can no longer meet the increased needs of the parent, thus necessitating higher (and more expensive) levels of care.

In 2012, the total estimated cost for long-term care services and supports was estimated at \$362 billion, with Medical Assistance paying for 40 percent; out-of pocket payment from the care recipient, 15 percent; private insurance, 7 percent; Medicare, a very limited long-term care payer, 20 percent; and other public and private sources, 18 percent.

What's the future look like? None too rosy. In June, with funding from the National Institute on Aging, the U.S. Census Bureau published a report that took a long look at our 65 and older population, which totaled 40.3 million in 2010. This was 13.1 percent of the total U.S. population.

Looking more closely at Pennsylvania, the 65 and older population was almost 2 million or 15.7 percent of our total population of 12.7 million. So, it looks as though we're ahead (or behind) the curve, depending on your point of view.

Over 38 percent of those aged 65 and over had one or more disabilities in 2010, with the most common difficulties being walking, climbing stairs and doing errands alone. So, to many of our friends, you're obviously not alone.

Interestingly enough, the share of the older population living in skilled nursing facilities declined from 4.5 percent in 2000 to 3.1 percent in 2010. On the other hand, the share in other long-term care facilities, such as assisted living and personal care, has been growing.

Medicaid (Medical Assistance) funds for long-term care have been shifting away from nursing homes with funding for home- and community-based services increasing from 13 percent of total funding in 1990 to 43 percent in 2007.

With the number of older Americans expected to more than double in the next 40 years, among people age 65 and over, an estimated 70 percent will use long-term care services and supports. Also note that the fastest growing group in our population (those 85 and older) are estimated to be four times more likely to need long-term care services and support compared to people age 65 to 84. It's been estimated that someone who is 65 years old will need approximately \$250,000 to fund their medical care.

What does all of this mean? Well, among other things, you can't fail to plan for what your needs may be (because statistics are against you) or to plan for how you financially are going to meet those needs.

Oh, yes, and to ask who (individuals and/or organizations) are going to provide those probable long-term care services and support to and for you.