

We are an aging nation. Since 2011, baby boomers have been turning 65 at an average rate of 10,000 per day. This will continue until 2030. And we are living longer. Fortunately, we are also healthier and more active than past generations.

But the reality, according to the Administration on Aging (AOA), is that “70% of people turning age 65 can expect to use some form of long-term care during their lives.” 35% will spend some time in a long-term care facility, such as a nursing home or assisted living community.

WHAT IS LONG-TERM CARE?

Long-term care encompasses a wide range of supportive services used by people who need help to function in their daily lives. Long-term care and services are those that help with the instrumental activities of daily living (IADLs): managing finances, handling transportation, shopping, doing laundry, preparing meals, household and basic home maintenance, using the telephone and other communication devices — as well as the activities of daily living (ADLs), defined as self-care activities: getting dressed, toileting, bathing and showering, personal hygiene and grooming, eating, and functional mobility.

The duration and level of care each person requires is as individual as the person needing the support. On average, a person will need three years of long-term care. Women will need services longer than men because they typically live longer. And 20% of older adults requiring long-term care services will need care for longer than 5 years.

HOME AND COMMUNITY-BASED SERVICES (HCBS)

Most long-term care is not medical care. It includes home and community-based services (HCBS). These are the services and supports that provide assistance with daily activities that help older adults and people with disabilities to remain in their homes. Home can be their own homes or apartments, in assisted living, congregate care, or supportive living. Services such as chore assistance, transportation, meals, adult day services, and personal care are all considered HCBS.

While the majority of people would prefer to age-in-place in their own homes or apartments, this isn't always feasible from a safety and/or financial perspective. Caring for someone in their own home can be the most expensive option, especially if 24/7 care is required. This option works best if someone needs limited support. But as needs increase, so does cost. And because someone who may have a condition that limits mobility, this option can also be isolating.

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