

AGING SERVICES OPTIONS

The aging population in the United States is growing exponentially, and Americans from across the country are poised to live well into our eighth or ninth decade of life. Seven in ten will need long-term care and services—on top of support from family and friends. Following are several of the primary sources of professional care and services for older adults.

ADULT DAY PROGRAMS

Older adults participating in adult day programs have access to coordinated health, social, functional and therapeutic activities in a community-based group setting. These older adults, who often need supervision due to memory or cognitive impairments, receive meals, socialization, transportation services and activities offered within the broader community. Adult day participants require assistance with activities of daily living (ADLs), the fundamental skills required to live independently such as eating and dressing.

Payment: Medicaid, state and federal funding, private pay

THE FACTS

- Average life expectancy = 79 years old
- 10,000 Americans turn 65 every day
- 70% of people over 65 will require some sort of paid care
- 1 in 3 Americans has less than \$5,000 saved for retirement
- Less than 8% of Americans have long-term care insurance

LIFESTYLE OPTIONS Affordable Housing Life Plan **Communities Adult Day** COMMUNITY LIVING **Programs LIVING AT HOME Assisted** Living **AGING SERVICES Home Health Services** PACE (Programs for All-Inclusive Care for the Elderly) **Nursing Homes** Hospice

HEALTHCARE OPTIONS

AFFORDABLE HOUSING FOR LOW-INCOME OLDER ADULTS

Affordable senior housing allows older adults with low incomes to live in apartments with rents that are reasonably priced, while relying on local services and supports to age in their community—often with the help of professional service coordinators. Affordable housing is supported by three primary federal funding sources: the U.S. Department of Housing and Urban Development (HUD), the U.S. Department of Agriculture's Rural Housing Service (USDA RHS) and the Low-Income Housing Tax Credit (LIHTC) program. Only half of HUD-assisted senior housing has a service coordinator, the lynchpin between residents and home and community-based services.

 Payment: Resident rents vary by federal program.
In most HUD programs, residents pay about 30% of their incomes for rent.

ASSISTED LIVING

Older adults living in an assisted living community usually have their own apartment or suite and have access to a range of on-site services. Typically, assisted living residents receive access to 24/7 clinical care, up to three meals a day, assistance with their personal care and grooming, medication management, housekeeping and recreational activities. Residents often require help with ADLs, the fundamental skills required to live independently and care for oneself such as bathing, dressing and meal preparation.

Payment: Private pay, Medicaid in some states

HOME HEALTH SERVICES

Older adults who use home health providers have access to a range of medical and non-medical services that can help them transition from a hospital stay to their home. Typically, home health services are ordered by a physician (or other health professional working under a physician's supervision). Medicare or Medicaid-certified organizations provide skilled nursing and other therapeutic services in the client's home. Users of home health services typically need assistance with ADLs, the fundamental skills required to live independently such as meal preparation, shopping, transportation, laundry, dressing and bathing.

 Payment: Private pay, Medicare, Medicaid

HOSPICE

Terminally ill people who enter hospice care can receive a range of palliative care treatments that focus on reducing pain and other symptoms that cause suffering, while attending to patients' emotional and spiritual needs. Hospice care prioritizes comfort and quality of life and offers patients nursing, social work and chaplaincy services. Medicare or Medicaid-certified providers and non-medical home care providers can provide hospice care.

· Payment: Medicare, Medicaid, private pay

LIFE PLAN COMMUNITIES

Life plan communities provide residents with a continuum of care that typically includes independent living, assisted living, memory care and nursing home residential areas. Initially, most residents don't need assistance with ADLs, the fundamental skills required to live independently such as eating, bathing and walking. Life plan community residents transition to "higher levels of care" when, or if, their needs increase. Some life plan communities (sometimes called Continuing Care Retirement Communities) also offer home-based care services via Continuing Care at Home programs.

Payment: Private pay

NURSING HOMES

Older adults who cannot safely be in their own home receive person-centered care in nursing homes, where their health, safety and well-being are supported. Typically, these older adults require help with ADLs, the fundamental skills required to live independently, including bathing, dressing, eating, toileting, walking and transferring from a chair or a bed. Nursing homes provide care to people with chronic conditions and co-morbidities requiring around-the-clock 24/7 care, long-term care and rehabilitation services such as physical, occupational and speech therapies, IV therapy and wound management.

Payment: Medicaid, Medicare, private pay

PROGRAMS FOR ALL-INCLUSIVE CARE OF THE ELDERLY (PACE)

Older adults who participate in Programs of All-Inclusive Care for the Elderly (PACE) have access to an interdisciplinary team of health and social services professionals in a managed care plan that integrates preventive, acute and long-term services. Participants must be 55 years or older, reside in the PACE organization's service area and be able to live safely in the community. People enrolled in PACE generally require routine assistance with ADLs, the fundamental skills required to live independently such as dressing, bathing, transferring, toileting, eating or walking.

Payment: Medicare, Medicaid