

Long-Term Care in the United States: A Timeline

BY ED MCCARTHY, CFP, RICP | FEBRUARY 22, 2016



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Long-term care (LTC) in the United States has evolved over the course of the last 80 years. This excerpted timeline from the Henry J. Kaiser Family Foundation illustrates the major milestones in LTC's history. The full timeline is available at <http://kff.org/medicaid/timeline/long-term-care-in-the-united-states-a-timeline>

THE ERA OF NURSING HOMES



1935

Social Security Act (SSA) enacted. The Old Age Assistance program makes federal money available to the states to provide financial assistance to poor seniors. The law specifically prohibits making these payments to anyone living in public institutions (poor houses, which had become known for their terrible living conditions), thus spawning the creation of the private nursing home industry.

1965

Medicare and Medicaid are passed as amendments to the SSA. Medicare's focus is on acute care only and does not provide for long-term care (LTC). Medicaid requires coverage of LTC in institutions but not in the home, creating a bias in favor of institutional LTC.



THE ERA OF COMMUNITY-BASED SERVICES



1974

1974 SSA amendments authorize federal grants to states for social services programs including homemaker services, protective services, transportation, adult day care, training for employment, nutrition assistance and health support.

1978

The Comprehensive Older Americans Act Amendments of 1978 require all states to develop and implement a nursing home ombudsman program and to prioritize community alternatives to LTC.



1981

Home and community based services (HCBS) waiver program is enacted under Section 1915(c) of the SSA, allowing states to offer home and community-based services that are not strictly medical in nature through Medicaid as an alternative to institutional care.

1988

Medicare Catastrophic Act of 1988 — Among other things, expands skilled nursing facility (SNF) benefits by removing time limits on most hospital service coverage and establishes protections against spousal impoverishment from nursing home expenses, but still does not pay for long-term custodial nursing home care. It also requires Medicaid to cover Medicare premiums and cost-sharing for Medicare beneficiaries with incomes below 100 percent federal poverty limit and limited assets.



1993

Clinton Health Care Plan includes plans to expand HCBS; improve Medicaid coverage for institutional care; and establish minimum standards to improve the quality of private insurance for LTC and tax incentives to encourage its purchase. The plan is never enacted.

2000

Americans Act Caregiver Program established, authorizing grants to states to fund a range of supports that assist family and informal caregivers to care for their loved ones at home.



THE ERA OF HEALTH REFORM



2010

The Affordable Care Act (ACA) provides new options to states under the Medicaid program to incentivize the improvement of their LTC infrastructures and expand HCBS. Under the ACA, The Community Living Assistance Services and Supports (CLASS) Act is enacted, with the intention of offering a national, voluntary long term services and supports (LTSS) insurance program financed by individual premium contributions.

2013

The American Taxpayer Relief Act of 2012 repeals the CLASS Act and establishes the time-limited, bipartisan Commission on Long-Term Care. The commission's report makes recommendations regarding service delivery and workforce but no agreement on financing recommendations is reached.



Helping LTC Caregivers Find Needed Resources

BY ED MCCARTHY, CFP, RICP | FEBRUARY 15, 2016



Providing assistance to family members and friends who require long-term care (LTC) is stressful. Consider these findings from Genworth's 2015 *Beyond Dollars* study:

- Seventy-seven percent of caregivers reported missing some work during the past year, up 19 percent from Genworth's 2010 survey of caregivers.
- Caregivers missed an average of seven hours of work per week.
- Nineteen percent missed 10 or more hours of work per week.

As a result of their caregiving responsibilities:

- Eleven percent had lost their jobs.
- Ten percent had to change careers, and 12 percent had to change positions

LTCI agents can help their clients' caregivers by guiding them to available resources. Here are two websites created for that purpose.

Caregiver.org

This [site](#) is sponsored by the San Francisco-based Family Caregiver Alliance's National Center on Caregiving. According to Leah Eskenazi, MSW, the organization's operations director, the site focuses on helping caregivers learn more about three topics: information, respite and support.

The information that's required can cover a wide range, she explained. Family caregivers need to understand the care recipient's medical condition and to know about available resources such as transportation, home delivery of meals or adult day care. The site's [Family Care Navigator](#) lets visitors click on their state and view information and contact details for a variety of private and public resource organizations in their area. "All sorts of pieces of information are critical and so we have an information-rich library, all professionally vetted," Eskenazi said.

At some point, every caregiver needs a break — respite — but that can mean different things to different people. Some might want a person to come into the home and stay with the care recipient for a few hours so they can go shopping. Others might need access to an adult day care facility. Another option in some cases is for the care recipient to attend one of the weekend camps run by the Alliance, giving the caregiver a few days off at home.

Support is also critical, Eskenazi emphasized. Nobody can provide care alone: it's isolating, it can be boring and it can be crisis-oriented. "[Caregivers] need support to know that what they're doing is right or maybe they could learn to do things a little bit differently," she said. "They also need to know how to take care of themselves when they're caring for somebody else. We want to make sure we help the caregivers take care of themselves in terms of both health-wise and financially and emotionally so that they're as strong as they can possible be during this journey as a caregiver."

Daughterhood.org

According to its website, Washington-based [Daughterhood.org's](#) "mission is to support and build confidence in women who are managing their parents' care." The site works to bring women together around topics and issues that are related to being in charge of parents' care, said Anne Tumlinson, the organization's founder.

To date it's been a digital community but the organization is now launching local groups as well. "We've been testing it out for the last year, but I think we're now really ready to make a big push to recruit local leaders and begin to bring women together at the local level," Tumlinson said.

Caregivers face gaps between the resources they need and what they can find, she maintains. The gaps occur at both the general level — how to choose a home care agency — and the local level — how to select from the 60 home care agencies in the area. Caregivers can start closing the gap by checking with their local agency on aging, Tumlinson suggested. [Eldercare.gov's eldercare locator](#) has a zip code-based search function to identify local agencies. Another resource is Tumlinson's recent blog post, "[Essential Websites for the Daughterhood Journey](#)," which provides links to online resources that she has found most helpful.