

## Across the States 2012: Profiles of Long-Term Services and Supports

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***Across the States 2012* provides the latest available data on long-term services and supports in the United States. Comparable state-level and national data for more than 140 indicators are drawn together from a wide variety of sources and presented in easy-to-use maps, graphics, tables, and state profiles.**

This *In Brief* highlights trends noted in the ninth edition of the research report, *Across the States 2012: Profiles of Long-Term Services and Supports*, produced by the AARP Public Policy Institute.

Published for the past 18 years, the *Across the States* series helps inform policy discussions among public and private sector leaders in long-term services and supports (LTSS) throughout the United States. The report presents state and national data for more than 140 indicators, drawn from a wide variety of sources.

*Across the States 2012* comes in two volumes: The full report provides a comprehensive picture of LTSS in each state; the Executive Summary provides an overview of key findings and ranking tables for each indicator, permitting readers to see variations among states.

Given the aging population, rising demand for LTSS, and increasing cost of services, consistent data across all states are essential to understand how to improve the lives of those who need LTSS and their family caregivers. *Across the States 2012* identifies the following key findings:

### **The Population Age 85 and Older Will Triple from 2012 to 2050**

People age 85 or older have much higher rates of disability than younger people and are also more likely to be widowed and without someone to provide assistance with daily activities. A key barometer for the potential demand for LTSS is the growth in this population, which is expected to triple from 2012 to 2050.

### **People of Color Will Comprise Nearly Half of the Population Age 65 and Older by 2060**

In 2010, one out of every five people age 65+ was nonwhite or Hispanic. By 2060, it is projected that 46 percent of the age 65+ population will be people of color. The growing ethnic and racial diversity of the older population has enormous implications for meeting diverse LTSS preferences, addressing the role of paid and unpaid caregivers, providing services with cultural sensitivity, and training the paid LTSS workforce in cultural competence.

### **A High Percentage of Older People are Economically Vulnerable, Often Qualifying for Publicly Funded LTSS**

The proportion of older people who have income below 250 percent of the poverty line is much higher than for the working-

age population. This will have significant ramifications in the future because older people of modest income are most likely to rely on publicly funded LTSS.

### **Family Caregivers Provided \$450 Billion Worth of Care, Much More than Public or Private Funding for LTSS**

Although Medicaid is the primary payer of LTSS, family caregivers are the foundation of the LTSS system. The estimated economic value of their contributions was \$450 billion in 2009, almost four times as much as total Medicaid LTSS spending and almost seven times the amount of privately paid LTSS and home health care.

### **Nursing Facility Expenditures Are Nearly Twice as High as Home and Community-Based Services Expenditures**

The number of older people and adults with physical disabilities receiving home and community-based services (HCBS) is increasing at a greater rate than the number of people living in nursing homes. However, publicly funded nursing facility expenditures remained nearly twice as high as HCBS expenditures in 2009.

### **Medicaid HCBS Spending per Person is One-Third of Publicly Funded Nursing Facility Spending**

The typical cost for HCBS is about one-third the cost of institutional care. However, 64 percent of Medicaid LTSS dollars for older people and adults with physical disabilities went to nursing

facility care, even though most people prefer to live at home.

### **Registered Nursing Hours Correlate Strongly with Nursing Facility Quality**

The number of direct care registered nurse (RN) hours per resident day correlates strongly with nursing facility quality measures. States with more direct care RN hours tended to have lower rates of pressure sores, lower use of restraints, and fewer hospital admissions.

### **Supply of Assisted Living Is Catching Up to Nursing Facilities**

From 2007 to 2010, the supply of assisted living units increased almost 18 percent, to 1,233,690 units. During the same period, nursing facility bed supply remained constant at about 1.7 million beds. This trend demonstrates consumer preferences for alternatives to nursing facilities.

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This In Brief is a synopsis of the AARP Public Policy Institute Research Report by Ari Houser, Kathleen Ujvari, and Wendy Fox-Grage.

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