



'Care Share

Created by Sara Streeter, MT SMP Volunteer

Long Term Care—What Most of Us Will Need (But Don't Want to Think About)

The need for long term care is a frightening specter that haunts most of us as we age. Almost everybody wants to remain independent, preferably in their own home, until the end of their life. However, the reality is that most of us will require long term care at some point. On average, someone turning 65 today has a 70% chance of needing long term care. Women need care for an average of 3.7 years, while men require care for 2.2 years. One out of five seniors will need care for longer than five years. Depending on who provides the care, this can become extremely expensive--well beyond the pocketbooks of many people.

So what options are there for long term care and how can you cover the costs?

The first thing most people think of in response to this question is Medicare. However, Medicare coverage for long term care is very limited. In general, Medicare will only cover medically-necessary care that must be prescribed by a physician. This care usually follows an inpatient hospital stay of at least three days, occurs at a Medicare-certified skilled nursing facility (SNF), and consists of skilled nursing care. If you meet the criteria, Medicare will pay for stays of up to 100 days as follows:

- For the first 20 days, Medicare will pay 100% of the cost;
- For days 21-100, the beneficiary has a daily co-payment (\$164.50 as of November 2017) while Medicare covers the remaining charges.

A Medicare supplement policy may help with the daily co-insurance cost. Still, if care is needed beyond 100 days, other resources will be required.

One such resource could be Medicaid, which is a joint federal-state program that helps people with lower incomes and limited assets pay for some or all of their health care. It covers medical care (similar to Medicare), and long term care services provided both in nursing homes and in a residential setting.

There are resource and income limits in order to qualify for Medicaid. Keep in mind, although most nursing homes accept Medicaid, it's a good idea to make sure the one you're considering for long term care does so. If you're initially paying the cost of care with private resources and later become eligible for Medicaid, you don't want to be forced to move yourself or a loved one because the nursing home won't accept Medicaid.

Long term care insurance is another option for covering nursing home costs for either skilled or non-skilled care. This type of insurance is specifically designed to cover extended care needs in a variety of settings including a patient's home, a nursing home a community organization or a group home. Most long term care policies require medical underwriting so it's best to apply for coverage well before you think you'll need it. Be sure to carefully investigate the insurer for financial soundness and understand the policy terms and premium costs.

Most seniors would prefer to stay out of a nursing home setting if they can do so. For those whose needs are not primarily medical in nature, there are a variety of assisted living facilities throughout the state. These can offer a continuum of services from apartment living with communal meals and limited assistance with medications to much more extensive help with daily activities. There are also a handful of residential care homes in Montana.

The Senior Medicare Patrol (SMP) helps to educate Medicare beneficiaries about ways to prevent, detect, and combat Medicare fraud. For more information about Medicare fraud, visit the Stop Medicare Fraud website at www.stopmedicarefraud.gov.

Long Term Care Options and Costs (cont.)

These offer a family setting with up to four residents and provide personal care assistance such as help with eating, bathing and dressing. They also provide medication management and general supervision. Both assisted living facilities and residential care homes are generally private pay, so you'll need to have resources to cover the costs. However, if you are eligible for Medicaid, you may be able to qualify for assistance with the bills.

If your care needs allow you stay in your home as long as you receive some limited assistance, a combination of home meal delivery through a service like Meals on Wheels, senior van transportation and Senior Companion services or home health agency services may be sufficient.

Finally, long term care needs may be met by family members. You may be able to move in with an adult child or younger sibling, for instance, or they may move in with you. This arrangement may be financially beneficial for everyone concerned if the parties are able to combine resources, but it may also create new challenges. As many as one in four adults in the US may be unpaid family caregivers for an adult or child, and about two-thirds of these are women. These figures include spouses, adult children and other family members. This option for long term care can extend for many years, and it can be combined with other community support options for meals, transportation and respite care.

Long term care is not a "one size fits all" issue, and solutions can change over time. Your local Aging Services office can provide valuable guidance and direct you to information and resources to help you find the best care possible.

Statistics and additional information provided by LongTermCare.gov

Long Term Care Fraud

Fraud is when people set out to steal from Medicare by sending in claims they know are false. Montana is a low fraud state, but one bad apple can make all the difference. Be on the lookout for some common ways fraud happens:

Physicians/Practitioners

- Up-coding to a higher-level of service
- Billing for services not provided
- Repeatedly charging a patient more than the maximum allowed under their participating agreement with Medicare

Home Health Agencies

- Billing for visits not provided
- Billing housekeeping services or custodial care as skilled nursing or therapy services
- Billing for services to persons that do not meet Medicare's definition of "home bound"

Nursing Homes/Skilled Nursing Facilities

- Billing for medical supplies not provided
- Making "gang visits" to visit many residents but billing for services not actually provided
- Billing recreational activities as psychotherapy

For more information on Medicare fraud please contact your local SMP office at 800-551-3191.

National Headlines

Click on the links for more information. These are great stories to share.

['No One Is Coming': Hospice Abandons Patients At Death's Door](#)

Kaiser Health News

Analysis reveals missed visits and neglect of hospice patients

[Federal Jury Finds New Orleans Woman Guilty In Medicare Fraud Scheme](#)

US Department of Justice

A New Orleans woman was found guilty for her role in a \$3.2 million Medicare kickback scam

Montana SMP is a program coordinated by Missoula Aging Services and partnered with local Area Agencies on Aging. This project was supported, in part by grant number 90MPO233, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy