BLUEPRINT FOR AN AGING OHIO

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THE TRUSTED VOICE FOR AGING SERVICES.

OHIO'S OLDER ADULTS & CAREGIVERS

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DATA SHOW THAT THE AGING SERVICES WORKFORCE AND EMPLOYERS ARE STRUGGLING.

While many issues existed pre-pandemic, COVID-19 has had a dramatic effect on the aging services workforce.

From 2020 to 2021:

Operating revenue decreased by 11.73% for skilled nursing facilities and 13.35% for assisted living.

Labor costs increased 17.87% for skilled nursing facilities and 15.24% for assisted living.

The percentage change in average monthly staffing agency cost increased by 565.47% for Ohio skilled nursing facilities and 886.86% for assisted living.

Starting wages for State Tested Nurse Aides (STNA) increased by 12.87%. A similar increase (12.36%) occurred for resident care assistants in assisted living.

As of July 2021, each Ohio nursing facility had a median of: 17 total open positions, 8 open STNA positions, and 4 open nursing positions.

OHIO'S POPULATION OF OLDER ADULTS IS RAPIDLY GROWING WHILE SUPPORTS CONTINUE TO LAG.

Ohio's older adult population is expected to grow by 20% by 2030, while the state's overall population is projected to remain roughly the same.

Ohio's senior dependency ratio will grow by 25% during that same timeframe. The senior dependency ratio is an indicator of demographic stress that measures the ratio of non-working, dependent older adults to the working population.

The 65 and up population will peak in 2030. The 85 and up population will still be growing in 2050.

In 2010 there were 4.8 caregivers per person, but by 2030, there will be only 2.8 caregivers per person. This increases the weight of care provided by aging services providers.

Medicaid - not Medicare - is paying for two-thirds of Ohioans' long-term services and supports (LTSS), providing coverage for nearly 3 million Ohioans. LTSS reflects 5% of the state's Medicaid enrollees yet 26% of Medicaid's expenditures.

CHANGING THE NARRATIVE ON AGING & CARE

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PUBLIC PERCEPTION OF NURSING HOMES

Aging services face a major public perception problem. Throughout the pandemic, and well before, nursing homes were portrayed negatively as they sought to protect residents and staff.

The reality couldn't be further from the truth. Ohio's growing population of older adults and their loved ones/caregivers rely on long-term care as a safe, supportive option when care needs escalate. Residents and staff often become close in the home-like atmosphere of a long-term care facility. Many residents shared that during the pandemic, the staff became "like family" to them as they endured months without in-person visitation.

While in many cases nursing homes have been a target for negative attention, building a more positive perception of long-term care is incumbent upon all Ohioans. For many, nursing homes are the best environment for that person's care needs. Nursing homes can offer a safer home that helps residents who would otherwise struggle with loneliness and isolation.

CHANGING THE NARRATIVE AROUND AGING AND CARE

Ohio can take steps now to support this important sector by incentivizing entry into the field, publicly supporting aging services workers, and promoting a positive perception of both facility and home- and community-based care.

Ohio can begin to change the narrative around aging and care by:

- Ensuring that long-term care has the support of policymakers and public officials;
- Training regulators to function more as educators and less as enforcers;
- Building upon career awareness efforts for students in aging services, such as the *Careers That Love You Back* program sponsored by LeadingAge Ohio and through primary, secondary, and college-level career awareness efforts;
- Developing and launching a public relations campaign to encourage participation and appreciation of careers in aging services;
- Championing legislation that incentivizes entry into the aging services sector; and
- Learning from what draws workers into careers that serve elders.

EXPECTATION

REALITY

REGULATORY AND ADMINISTRATIVE BARRIERS

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The regulatory burden on Ohio aging services providers is significant. Skilled nursing facilities are one of the most regulated sectors in the country. Simple changes could provide facilities with greater talent pools and more efficient use of current staff.

Proposals with the potential to help streamline services and remove regulatory and administrative barriers:

VIRTUAL TRAINING: Allow state-tested nurse aides (STNAs) to complete the classroom portion of training via virtual, asynchronous platforms.

WHY: The pandemic expanded the availability and quality of web-based training training. Offering high-quality, cost-effective, accessible online/virtual training for STNAs will eliminate one barrier to entry into this important field.

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MEDICATION AIDES: Reform the regulations for medication aide training programs.

WHY: Medication aides are under-utilized in long-term care in Ohio, because training program requirements are overly stringent. Removing regulatory hurdles would expand the use of medication aides and offer another career pathway in aging services.

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ADULT DAY. Raise the ratio for adult day programs from 1 staff person per 6 participants to 1 staff person per 8 participants to allow for safe, more efficient use of limited staffing. Allow payment for 10 call-off absences per participant per year in adult day settings.

WHY: Adult day providers in Ohio have experienced severe staff shortages, prolonging closures and creating waitlists across the state. Adult day ratios should not be more stringent than those of higher-acuity settings like nursing homes. Allowing payment for unexpected absences will prevent staff from being sent home, stabilizing work hours and improving morale.

PASSPORT: Eliminate the two-hour minimum for PASSPORT visits.

WHY: Many PASSPORT visits could be completed in under 2 hours. With the advent of electronic visit verification (EVV), Ohio should begin planning to eliminate the two-hour requirement, allowing these scarce but crucial caregivers to move between clients at a frequency that better matches their clients' needs.

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DO NOT RESUSCITATE (DNR) ORDERS: Allow emergency medical technicians (EMTs) to follow Do-Not-Resuscitate orders signed by nurse practitioners and physician assistants.

WHY: The Ohio Department of Health DNR rules, which allow for nurse practitioners (NPs) and physician assistants (PAs) to follow the orders, are at odds with Ohio EMT licensure rules, which do not permit an EMT to follow orders signed by NPs or PAs. Passing House Bill 138 would remedy this issue.

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NON-EMERGENCY TRANSPORTATION: Reform requirements for non-emergency medical transportation, to allow Ohioans with serious but stable illness to access transportation to necessary medical appointments.

WHY: Individuals with serious illness requiring cot transportation are forced to use ambulances otherwise dedicated to medical emergencies. Ohio should review medical transportation to ensure services provided match patient needs.

INVESTING FUNDS IN THE AGING SERVICES WORKFORCE

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> Medicaid does not cover the full cost of aging services care and is currently covering roughly two-thirds of Ohioans long-term care needs. Many providers write off hundreds of thousands to millions of dollars each year in care costs that go unreimbursed. Strategic investments can help offset costs and support care models with high potential.

Key investments with the potential to help stabilize the sector now and provide avenues for future growth to meet the needs of Ohio's population of older adults:

Medicaid reimbursement.
Advocate for adequate payment for aging services, including:
- A mechanism for regular review of provider payment and network adequacy;
- Better utilization of the Assisted Living and PASSPORT waivers through immediate investments;
- Creation of a workgroup to redesign Assisted Living waiver to better meet needs of Ohioans with Alzheimer's Disease and other dementias;
- Reimbursement models that incentivize workforce investment at the provider level; and
- Tiered reimbursement or bonuses rewarding advanced training & certification among direct service providers.

Caregiving careers.
Promote caregiving careers as integral to the future health and economy of Ohio. Strategies include:
- Creation of a single point of entry for caregiving careers;
- Alignment of training & participation requirements across systems to allow mobility between aging, developmental disabilities, & mental health/addiction services;
- Creation and promotion of career ladders and lattices throughout a variety of roles serving older adults;
- Launching a widespread public relations campaign aimed at promoting the value of caregiving careers; and
- Exploring the replicable results achieved by the $2.3M investment by the state of Wisconsin into the WisCaregiver Careers program in 2018 that led to the hiring of over 3,000 new nurse aides.

Workforce-optimizing care models.
Expand workforce-optimizing care models like the Program for All-Inclusive Care for the Elderly (PACE) and adult day services. Both PACE and adult day services maximize the use of workers and allow more Ohioans to reside in the community safely with access to care, as opposed to moving into costlier care settings.

Funding outside of Medicaid.
Maximize funding outside of the Medicaid budget to bolster the workforce pipeline. Strategies include: building upon work completed in 2019 to connect community colleges with Department of Labor funding for registered apprenticeships in health care, including STNA apprenticeships which serve as entry points to career lattices; and using Civil Monetary Penalties funds to support innovation in workforce programs in nursing facilities.

One-time technology investments.
Advocate for one-time investments in technology that reduce need for workforce and improve longevity. Examples of technology that promote efficient use of workforce include vitals machines that automatically record to medical records and smart homes equipped with sensors and remote monitoring. Examples of technology that improve worker longevity include ceiling lifts to reduce transfer-related injuries and apps that promote mental health & wellness.