

# AGING 101

A Guide to Aging, Services  
and Supports in Ohio



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## A Guide to Aging Services and Supports in Ohio



The following guide provides an overview of aging services and supports in Ohio. The guide outlines the current and future state of aging in Ohio; provides information regarding long-term care, post-acute care and additional supports and payment models; and discusses varying careers and workforce solutions within the field.

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# AGING OHIO

OHIO'S SENIOR  
POPULATION IS  
PROJECTED TO PEAK IN  
2030 AND RISE BY  
OVER 20%.

**FAST APPROACHING  
SENIOR PEAK IN 2030**

THE 85 AND UP  
POPULATION, MANY  
WITH HIGH CARE  
NEEDS, IS PROJECTED  
TO STEADILY INCREASE  
THROUGH 2050.

**LONG-TERM GROWTH  
OF THE OLDEST AGE  
GROUP**

**OHIO IS HOME TO THE  
SEVENTH LARGEST  
POPULATION OF OLDER  
ADULTS IN THE UNITED  
STATES**

**THE SENIOR DEPENDENCY RATIO, AN  
INDICATOR OF DEMOGRAPHIC STRESS  
THAT MEASURES THE RATIO OF NON-  
WORKING DEPENDENT OLDER ADULTS  
TO THE WORKING POPULATION, IS  
PROJECTED TO INCREASE BY 25% OVER  
THE NEXT DECADE.**

**IN LESS THAN TWO  
DECADES, OLDER ADULTS  
ARE PROJECTED TO  
OUTNUMBER CHILDREN FOR  
THE FIRST TIME IN U.S.  
HISTORY**

# WHAT ARE AGING SERVICES?

Aging services include a range of services and supports older individuals may need to meet their personal care needs. While aging services encompasses medical care, it also refers to assistance with the basic personal tasks of everyday life.

Care can be provided in a range of settings - wherever an individual calls home.



## Types of aging services include:

- Senior living communities
- Skilled nursing facilities
- Assisted living
- Home care
- Affordable housing
- Adult day services
- Program for All-Inclusive Care for the Elderly (PACE)

“

At some point, support from family, friends, and local programs may not be enough. People who require help full-time might move to a residential facility that provides many or all of the long-term care services they need.

*National Institute on Aging*

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## FACILITY-BASED LONG-TERM CARE SERVICES

Facility-based aging care services include: assisted living facilities, nursing homes, and continuing care retirement communities (life plan communities).

Assisted living is for people who need help with daily care, but not as much help as a nursing home provides. Nursing homes, also called skilled nursing facilities, provide a wide range of 24-hour health and personal care services.

## HOME- AND COMMUNITY-BASED SERVICES

Home- and community-based services (HCBS) refer to services and supports that are provided to individuals in their homes or offered in the community including: home-delivered meals, home health care, adult day services, PACE, transportation, caregiver support services and much more.


The cost of HCBS is significantly less than institutional care options, for both governments and the consumer, and are designed to allow older adults to maintain their independence safely and for longer.



# WHAT IS HOSPICE & PALLIATIVE CARE?

Hospice is a program of care and services providing assistance to meet physical, psychological, social, spiritual, and other special needs that are experienced by individuals and families as they approach the end of life. Most hospice is provided in the home, and hospice care for the family continues through the bereavement process and even after a loved one's passing.

Palliative care is specialized care for a patient of any age who has been diagnosed with a serious or life-threatening illness. This care can be offered at an earlier stage in illness alongside other more-aggressive treatment.



The majority of hospice care takes place at home.



Most end-of-life care is paid for by Medicare.

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## THE CAREGIVER DILEMMA

**The caregiver pool is shrinking:** in 2010 there were 4.8 caregivers per person, but by 2030, there will be only 2.8 caregivers per person. This increases the proportion of care provided by long-term care organizations.

**Family caregivers provide approximately \$500 billion per year in unpaid care,** which is three times the amount that Medicaid spends for paid caregivers to provide long-term care services.

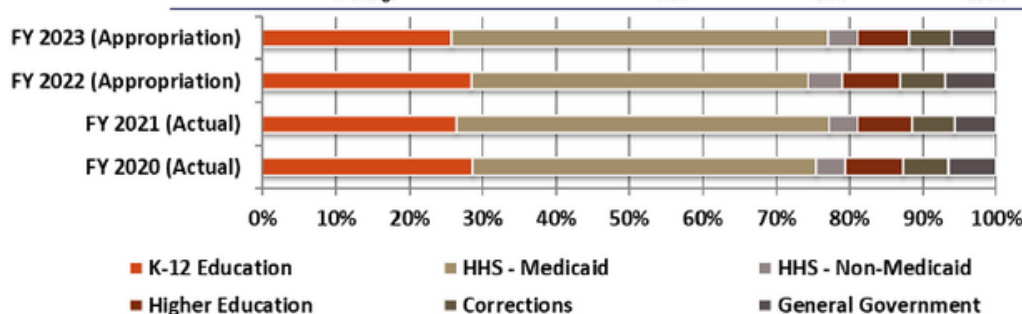


Unpaid caregivers (family members or friends) are the backbone of long-term care provided in people's homes. **95% of unpaid caregivers are family members.** Services like adult day and respite care provide short-term relief for home caregivers, allowing them to work and even just take a break.

# WHO PAYS FOR CARE?

Where do GRF moneys go?

Program Category	FY 2020 (Actual)	FY 2021 (Actual)	FY 2022 (Appropriation)	FY 2023 (Appropriation)
K-12 Education	\$9,460.5	\$9,364.1	\$9,926.0	\$10,077.8
HHS - Medicaid	\$15,471.8	\$18,094.4	\$15,974.4	\$20,150.1
HHS - Non-Medicaid	\$1,338.4	\$1,368.4	\$1,615.4	\$1,606.3
Higher Education	\$2,606.1	\$2,683.8	\$2,757.4	\$2,760.7
Corrections	\$2,052.7	\$2,016.6	\$2,179.8	\$2,254.0
General Government	\$2,134.0	\$2,043.3	\$2,391.6	\$2,395.9
GRF Program Total	\$33,063.5	\$35,570.6	\$34,844.5	\$39,244.8
% Change		7.6%	-2.0%	12.6%



GRF is Ohio's General Revenue Fund. The GRF represents the largest funding source for Ohio's state agencies. HHS is Health & Human Services, where long-term services and supports are funded.



Year after year, Medicaid comprises the largest spending category in Ohio's operating budget

56% of Americans erroneously believe that Medicare will cover long-term care. In fact, it is the state-administered Medicaid program that funds 63%\* of Ohio's long-term care.

1 in 7 people will require long-term care lasting more than 5 years and costing \$250,000 or more.



Medicaid - not Medicare - is paying for 2/3\*\* of Ohioans' long-term services and supports (LTSS) needs, providing coverage for nearly 3 million Ohioans. LTSS reflects 5% of the state's Medicaid enrollees yet 26% of Medicaid's expenditures.

Despite this, Medicaid doesn't cover the full cost of long-term care - many providers are forced to cover hundreds of thousands (smaller single-site) to millions (large site or multi-site) of dollars each year.

On average, people reaching age 65 over the next five years who ultimately experience high-need long-term care can anticipate incurring costs over their lifetimes of approximately \$138,000.

54% of middle-income seniors will not be able to afford annual costs of \$60,000 for assisted living, independent living or other housing related costs even if they allocated all of their annual resources to such housing.

Care costs for women are higher than men. Women typically live longer and thus experience greater care needs, often without a surviving spouse to provide for their care. Women are also more likely to have served as caregivers for children, parents, and spouses, which means they reach old age with less savings.

\*Includes Medicaid, MyCare Medicaid, and Medicaid Managed Care.



# THE HUMAN TOLL & CONTINUING CHALLENGES<sup>13</sup> OF COVID-19

On March 9, 2020, Governor Mike DeWine announced the first confirmed cases of COVID-19 in Ohio. At that moment, Ohio officially became part of the pandemic that would change our world forever.

## THE HUMAN COST OF THE PANDEMIC IN LONG-TERM CARE

*From April 15, 2020 to November 17, 2021, Ohio experienced:*

56,367 cumulative long-term care resident cases.

8,071 cumulative long-term care resident deaths.

44,359 cumulative long-term care staff cases.

## VACCINES - A RESIDENT LIFELINE

Before the vaccine rollout began in December of 2020, 57% of COVID deaths in Ohio occurred in long-term care residents. **By November of 2021, the percentage of deaths occurring in long-term care facilities decreased to 31%, attributable to high resident vaccination rates (83% are fully vaccinated, as of November 2021).** Boosters have continued to provide protection and security.

## CONTINUING CHALLENGES

Health care workers in Ohio long-term care facilities are vaccinated at the third lowest rate in the country, at 59% as of November 2021.

Earlier this year, the Biden Administration announced that the Centers for Medicare & Medicaid Services (CMS) in conjunction with the Centers for Disease Control and Prevention (CDC) **would require nursing homes to mandate vaccination in health care workers to maintain support from both Medicare and Medicaid.** This was met with concern in the provider world, as providers continue to deal with staffing shortages - cited as a primary driver of quality complaints by the Ohio Department of Health. Court challenges suspended implementation of the mandate, so providers now await further guidance.

In 2021, the delta and omicron variants renewed the threat as a surge of cases returned. New variants will continue to challenge providers as they seek to protect residents and staff.

**"Nursing home members, in particular, found themselves at ground zero of the coronavirus pandemic, as this deadly virus tragically took aim at older adults."**

*Katie Smith-Sloan,  
President and CEO,  
LeadingAge (national)*



# AGING SERVICES HIT **HARD**



In 2021 the organizations representing Ohio's assisted living and skilled nursing facilities drew attention to data released by Scripps Gerontology Center at Miami University, which demonstrated the continuing need for financial support in the aging services sector.

The data showcase challenges in operating revenue, wages, staffing and more, highlighting the need for continued relief for providers.

**"The pandemic heightened the workforce crisis in long-term care, striking at a time when providers were already seeking support for personnel struggles."**

*Kathryn Brod, President and CEO of LeadingAge Ohio*

## **Survey data report for skilled nursing facilities and residential care facilities (assisted living), July 2021** *430 SNFs and 281 RCFs surveyed around the state.*



Q1 2020 to Q1 2021, operating revenue **decreased by 11.73% for skilled nursing facilities and 13.35% for assisted living** (not including unusual revenue sources such as federal pandemic relief funds, BWC dividends, etc.).

Over the same period (Q1 2020 to Q1 2021), labor costs **increased 17.87% for skilled nursing facilities and 15.24% for assisted living.**

The percentage change in average monthly agency cost between Q1 2020 and Q1 2021 **increased by 565.47% for Ohio skilled nursing facilities and 886.86% for assisted living.**

Starting wages for State Tested Nurse Aides (STNA) between March 1, 2020, and July 1, 2021 (not including special payments such as shift differentials, hazard pay, etc.) **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 has a median of: **17 total open positions, 8 open STNA positions, and 4 open nursing positions.**



# Policy proposals to support the aging services comeback.



With older adults still at great risk from COVID-19, workforce recruitment and retention struggling, and aging services providers pushed to the limit physically, economically, and mentally, ensuring sound state policy that addresses the needs of elders and caregivers is crucial.

## Support underway for providers

### Support through ARPA

The American Rescue Plan Act (ARPA) was signed into law in 2021 to speed up the country's recovery from the economic and health effects of the COVID-19 pandemic and the ongoing recession. The DeWine Administration announced a plan to direct \$964M to support home- and community-based providers through ARPA, which includes direct provider relief, long-term workforce investments and system reforms.

As of December of 2021, a legislative package (House Bill 169) that would distribute provider relief across provider types was approaching the finish line. Utilizing both ARPA and Families First Coronavirus Response Act funds, the bill included \$529M for HCBS, \$300M for nursing homes, \$33M for assisted living and \$23M for hospices, as well as support for nursing home strike teams and other initiatives. The bill is currently awaiting final approval by Governor DeWine, with system reforms, technology enhancements, and other provisions included in Ohio's ARPA plan still to be examined in 2022.

## Crucial Priorities in the Future

### Reduce regulatory burdens

The regulatory burden on Ohio aging services providers is significant. There are dozens of simple changes that could provide facilities with greater talent pools and more efficient use of current staff.

### Matching payment with the cost of care

Medicaid payment continues to fall below the cost of care across aging services providers. More and more providers are limiting their participation in Medicaid, significantly impacting access for older Ohioans. Previously, high-cost nursing facility care served as a safety net when individuals couldn't access home care services, but the current staffing crisis is causing nursing facilities to limit admissions even further.

### Pursuit of innovative models

Ohio must embrace a broader network of services and supports for its growing older adult population, including PACE, adult day services, affordable assisted living, senior housing models, and more.

# WORKFORCE PRIORITIES & INITIATIVES

## Retention

LeadingAge Ohio's 2022 strategic goals include working to develop a number of resources and strategies to support workforce development, including:

- A toolkit of resources for member access to support staff health and wellness.
- A study of policies that either create barriers or expand access to aging workforce.
- Exploring innovative non-traditional employee benefits to more effectively meet employees' needs.
- A comprehensive Diversity, Equity, and Inclusion (DEI) strategy.

LeadingAge Ohio provides **Frontline Supervisor Training** to share leadership principles and best practices that are consistently applied by all supervisors. This program provides employees with a strong foundation to build a work environment that maintains respect, trust and accountability.

**Employer Resource Networks (ERN®)**, which foster business engagement and provide tools for employees to navigate challenges to their successful employment (transportation, child care, payday shortfalls, and more) were recognized as a priority by the DeWine Administration in 2021. LeadingAge Ohio previously worked to increase usage of ERNs.

**LeadingAge Ohio Employer of Choice** uses operational standards and relevant criteria to emphasize the importance of treating employees with the same care that employers wish these employees to provide. Employer of Choice is expected to resume in 2022.

## Recruitment

LeadingAge Ohio is participating in the **Complete to Compete Ohio Attainment Coalition**, a public-private coalition of more than 40 organizations from Ohio's education and workforce systems seeking to coordinate and collaborate on efforts to help Ohioans earn a living wage and close Ohio's skills gap.

LeadingAge Ohio was chosen to participate in the **High School Healthcare Preceptor Pilot program**, which will utilize a \$400k CDC grant to connect high school students in urban and rural communities to careers in aging and health care, giving them the opportunity to earn an **STNA or Elder Care Certification**.

LeadingAge Ohio held a series of meetings with Ohio colleges and universities to elevate career pathways within aging services and connect members to internship needs.

The **Careers That Love You Back** campaign showcases 21 distinct career options in the fields of aging services and post-acute care. Using a poster series, this program fosters an early awareness and interest in the field of aging services in K-6 grades, laying the foundation for later career readiness and training.

In 2022, LeadingAge Ohio plans to launch a **campaign that distinguishes and communicates the value of careers in aging** and the importance of supporting aging services providers through PR, peer connections, and educational partnerships.





# WHAT KINDS OF JOBS ARE AVAILABLE IN AGING SERVICES?

## Frontline Caregiver Roles

State Tested Nurse Aides (STNAs), home health aides, and personal care aides are the frontline caregiver positions most in need by long-term care and home- and community-based services providers. This position is often a first step towards a career in nursing and caregiving, with many pathways forward. STNAs can access continuing education, many times with employer assistance, to progress on a healthcare pathway from STNA to RN, or other careers.

Almost all Ohio providers are currently hiring nurse aides, yet filling and retaining these roles can be difficult. **A recent study showed that 60% of Ohio long-term care providers had no applicants nor qualified applicants for certain positions.**

“They [nursing aides] are the ones that are holding their hands when they’re sick, when they’re scared,” Wilfong said. “They’ve been their families this whole pandemic because their families couldn’t come in, so the aides are a vital role in any facility because they are the bedside person.”

*How Ohio became the No. 1 state for nursing home assistant shortages. Cleveland.com. Sept. 16, 2021*

## A Growing List of Careers

In addition to STNAs, aging services providers need to fill many other positions across the career spectrum. Acute care settings are the most popular field of study for many nursing students, but there is a far more extensive career choice within long-term care.

Many other careers exist within aging services, including:

- Nutrition and culinary,
- Environmental services,
- Administration (HR, finance, etc),
- Activities,
- Marketing,
- Physical therapy,
- and more.

Twenty-one distinct careers within aging services and post-acute care were identified during LeadingAge Ohio's *Careers That Love You Back* program development.



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