

There are many different living environments ranging from whole communities to an environment providing individualized care.

Are you familiar with any residential communities that are limited to only older adults?

<u>Active Adult Communities</u> are for 55+. People purchase a home and the community provides recreational activities (e.g., golf, crafts building).

An example is Robson Ranch located between Fort Worth and Denton on I35W

(2 minutes) https://www.robson.com/commu nities/robson-ranch-texas/

# Robson Ranch requires age 55 and above restricted.

- There is a concession for one Spouse can be as low as 40 years of age.
- The youngest age for a child to live at Robson Ranch is 19.
- Children and Grandchildren may speed time with Robson family members for a specific # of days per year. There are special events for Grandchildren such as a special outdoor pool and a golf clinic held once a year.

What is the most preferred housing choice of older persons?

Single family dwelling—own or rent

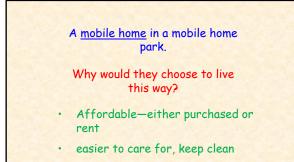
- Can provide privacy, independence
- Can have problems with increasing taxes, maintaining the home
- Renters have problems with increasing rents, are sometimes subjected to involuntary moves forced by owner
- Owners are able to accrue equity, can allow for a reverse mortgage

## Other types of housing:

<u>Shared housing</u> - older people share a dwelling.

Why would they choose to live this way?

Many reasons such as companionship, sharing finances, caregiving



 Do have problem of rents going up or taxes

## Living in an apartment

- What are some disadvantages here?
- · Rents can go up
- Enforced living conditions (e.g., no pets)
- Could be forced to move such as when apartment sold
- Condition of apartment largely in control of apartment owner

What are some advantages?

### Advantages of apartments

- May be less expensive than other choices
- Less to take care of, easier to keep clean
- May be easier to socialize

What is meant by "<u>long-term care</u>" and what do people often think this term means?

What is an Assisted Living facility?

Assisted living is for people who need help with daily care, but not as much help as a nursing home provides.

Typically, a few "levels of care" are offered within an assisted-living facility (examples?), with residents paying more for higher levels of care.

Assisted living residents usually live in their own apartments or rooms and share common areas.

What is a nursing home?

Nursing homes provide a wide range of health and personal care services.

Their services focus on <u>medical care</u> (more than assisted living facilities).

These services typically include nursing care, 24-hour supervision, three meals a day, and assistance with everyday activities (all ADLs).

#### What is a Continuing Care Community?

Continuing care communities offer <u>different</u> <u>levels of housing</u> within a large area or campus.

In one section of the campus there is <u>independent housing</u> (houses or apartments), in another section <u>assisted living</u>, and in another section <u>a nursing home</u> all on the one campus.

Healthcare services and recreation programs are provided.

Is Robson Ranch a continuing care community?

Which is more expensive assisted living (AL) or nursing home (NH) care? Why?

How do older persons pay for NH care or AL?

 Private Pay: they use their personal savings including any monthly pension or Social Security payments to pay for the nursing home or assisted living.

This is the typical way it is paid for.

What do you know about long-term care (nursing home) insurance? 2. Long-term care insurance. A policy paid for by the older person while s/he is healthy that will <u>cover some portion</u> <u>of their NH bill</u> each month IF they need to be admitted to a NH.

Most people don't have LTC insurance. They feel it is too expensive or they can't afford it.

In many cases these insurance <u>companies have gone bankrupt</u> because they spent more money paying for customers in nursing homes than money received from customers.

What have LTC insurance companies done to avoid going bankrupt? What happens if an older person (let's say your grandparent) needs to go into a nursing home (because s/he had a stroke and needs continual medical care) but...

the person's monthly pension/annuity and Social Security payments aren't enough to pay for the NH (the average cost of a NH is roughly \$9,000/month)? <u>First</u>, generally, the person (let's say your grandparent) will:

(a) provide the NH with their monthly pension/annuity and Social Security payment and

(b) make up any difference each month with their <u>savings</u> such as in 401K retirement accounts.

What happens when the person uses up all her/his savings so s/he doesn't have enough money to pay the monthly NH bill? Once using up all one's savings, the older person may <u>sell</u> <u>everything s/he owns</u> and use that money to go along with her/his monthly pension/annuity and Social Security payments to pay for the NH.

Eventually, the person will have sold everything s/he owns in order to pay the monthly NH bill.

What happens when those funds are used up and the person's pension/annuity plus Social Security isn't enough to pay the monthly bill?

Does the NH kick the person out because s/he can't pay? If yes, what will become of the person (remember the person needs constant medical care)? The person can <u>apply for Medicaid</u>, a federal health care program for poor people that does cover NH care IF the person can't do at least 3 of the 5 activities of living (eating, toileting, dressing, moving about, bathing).

However, the person's income may be to high to qualify for Medicaid yet too low to pay the monthly NH bill.

What happens to the person in this case?

The resident may have made an agreement with the NH when s/he first moved to the NH that the NH would not kick them out if they ran out of money

If not, the NH might <u>have a wing</u> for low paying residents, the person might be moved there

The NH might <u>have connections</u> with nonprofit organizations or public agencies that will help makeup the financial difference

If none of these things are in place, what will happen to the person?

If the person can't pay and there is no NH agreement or person or organization to help pay the monthly bill,

The consequences in this case vary by state and possibly locality but, in general, the NH might force the person to move out because s/he can't pay which could have several results:

(1) the person finds a NH that charges less/month (such NHs are extremely low quality)

(2) the person becomes homeless(3) move in with family or a friend

On the other hand, if the person does qualify for <u>Medicaid</u>, and does need at least 3 of the 5 activities of living (eating, toileting, dressing, moving about, bathing),

Medicaid will pay for the person to stay in a NH but Medicaid only pays a very low amount per month for NH care. Much lower than the average \$9,000 that a quality NH charges per person. What happens in this case? Does the NH kick them out because the payment is too low, forcing the person to move to a low quality NH that accepts a Medicaid payment?

Or, accept the lower amount and perhaps move them to a Medicaid wing of the NH, if it has one?

The higher end NHs are likely to make the person move (i.e., kick them out) to a "lower-end" NH that is willing to take the lower monthly amount, unless an agreement was made when the person first entered the NH.

Or, an noted, sometimes the NH will have a Medicaid wing and have the person move to that wing where the service is less and the quality of care is less since the person's monthly payments are less. There are some NHs where all or most of their patients pay with Medicaid.

In these NHs the quality of care is particularly poor (since the NH is receiving relatively little per resident) and these NHs are cited by the health department often for one thing or another related to care.

For example, unhealthy meals, not "changing" a resident often enough who needs it.

Thank You.

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Hidden camera investigation: Nursing home abuse, violence (show first 10 minutes)

https://www.youtube.com/watc h?v=gk5iEo-s\_6M Living Without the One You Cannot Live Without -Research on Aging (start at 3 mins to 13) (13 min -50min: <u>shock</u>, <u>numbness</u> (mourning), <u>disbelief</u>, <u>reality</u> (guilt, what if., pain)(20 min), <u>alienation</u> (a "should", alone), <u>re-invention</u> (become whole), <u>new</u> <u>normal</u> (really living again)(30 min) <u>post-grief</u> (remembering) (40 min) 10min of questions <u>https://www.youtube.com/watch?v=VIxYj8FEZ34</u>

My First Year as a Widower... (first 3:51 mins) https://www.youtube.com/watch?v=wLOyHHBZLIY Living Without the One You Cannot Live Without -Research on Aging <u>https://www.youtube.com/watch?v=xk8PdL\_PdSo</u>

Why Families in Europe Are Sending Elderly Relatives To Care Homes in Thailand (show at least 11 mins.) <u>https://www.youtube.com/watch?v=P5WaZTPJtGY</u>

Aged care workers reveal what it's really like inside nursing homes | Four Corners (hidden camera showing the problem) https://www.youtube.com/watch?v=IQZqpLo\_cHo&t=906s