The Rising Costs and Concerns of an Aging, Health-Challenged Population
By Doreen Marcial Poreba

Those who are in top physical and emotional shape may be happy that they’re living in the 21st century, when the U.S. life expectancy is 78 years compared to the 1900s when it was just 47 years, according to AARP. But living longer also can mean facing a myriad of chronic and acute health challenges, which results in a huge price to pay — and not just for the patients.

More family members are being called upon to care for their aging parents and relatives living with chronic health conditions or disabilities, which bears a financial and emotional cost to the caregivers themselves, as well as to employers, hospitals and all who have a stake in the well-being of individuals. In 2009, there were almost 42.1 million U.S. family caregivers helping adults who were limited in their daily activities, according to a report issued by the AARP Public Policy Institute, “Valuing the Invaluable: 2011 Update – The Growing Contributions of Family Caregiving.” The report goes on to state that the estimated economic value of family caregivers’ voluntary aid was about $450 billion.

“One of the challenges is trying to coordinate care among primary care physicians and specialty doctors with people who have a multitude of illnesses,” said Ruth Schwarzkopf, chief nursing officer of West Boca Medical Center and a trustee of Palm Healthcare Foundation. “We want to keep them as functional as long as possible but at a certain point, it seems to be a revolving door — in and out of the hospital, as they’re unable to manage home care and for other reasons.”

While there are unprecedented numbers of aging adults with chronic health care issues, at the same time changes in health care reform are creating additional challenges and drawing attention to the growing problem.

“We’re seeing tsunamis of challenge intersect a reimbursement mandate,” said Susan Dyess, a professor at the Christine E. Lynn College of Nursing at FAU and committee member of several Palm Healthcare Foundation committees with an interest in faith-based community nursing.

Dyess is referring to the Affordable Care Act, which created the Medicare Hospital Readmissions Reduction Program with the intent of giving hospitals a financial incentive to decrease their readmission rates. Hospitals that have too many patients who were treated for heart attack, heart failure and pneumonia and return within 30 days of their discharge now face financial penalties by having Medicare payments curtailed.

While there are many reasons patients return within a month, one of the causes is that they go home without the assistance to follow proper discharge instructions. This lack of follow through points to the need for all of the stakeholders — including doctors, nurses, families, acute care facilities, hospitals, and home health agencies — to communicate more effectively with each other in determining an effective plan.
“The kind of care they require is not necessarily acute or episodic,” said Andrea Bradley, president and CEO of Palm Healthcare Foundation. “Sometimes they need help with non-medical care, which has an impact on their health.”

The bottom line is older Americans in need of physical, emotional and social support are falling through the cracks at staggering numbers and it’s taking its toll on caregivers as well as employers financially and emotionally. Caregivers often experience high levels of stress that can lead to their own health challenges, financial hardship and depression.

As for the workplace, AARP estimates that U.S. businesses lose as much as $33.6 billion per year from fulltime caregiving employees whose productivity is affected. These costs include absenteeism, inability to focus at work, employees who are forced to reduce their hours from fulltime to part-time and replacing employees. Add in an additional estimated $13.4 billion for increased health care costs of employees with eldercare responsibilities compared to non-caregiving employees and the costs are even higher.

Those involved with this continual caregiving dilemma are looking for solutions, one of which points to focusing more on improving community care.

Palm Healthcare Foundation, founded in 2001, is known for solving critical healthcare issues through creative community-wide collaboration. Recently, the foundation brought together different stakeholders of this issue for focus group discussions where the various parties could express and better understand each others’ concerns and observations and discuss possible steps toward viable solutions.

Dyess led one of the focus groups and is pleased that Palm Healthcare has opened up the opportunity to bring invested parties from different disciplines together.

She said. “There’s no one stakeholder responsible. Care coordination has come into play but it’s still handled in multiple ways. Some families have care coordination done from their perspective but there needs to be a shift in consciousness from what health care can do for patients.”

She raised three questions: What is reasonable for the hospital to do for care, what is reasonable for patients to expect for a quality of life, and what is reasonable to expect from hospitals, physicians and nurses?

“The government has established a baseline of what’s reasonable, and yet, it may or may not be,” said Dyess. “All of the stakeholders need to begin to have conversations that bring this really forward to all of our awareness so we can come up with solutions. They’ll be multi-faceted. Nurses are a key part of the solution.”

Schwarzkopf believes one of the keys is being able to follow up in the home to assess the overall situation.

“I’m not sure home health care is doing a good enough job,” she said. “We need to address the
issues, make sure they understand their discharge plan ... assess if they have transportation, the
ability to get prescriptions filled and keep them current, and whether they have food in the
cupboard. We need to identify what people need and make sure we understand that they have
some say so.”

Schwarzkopf added the importance of educating the public about this growing problem and
improving communication between the sending and receiving facilities.

“We need to be clear about what a patient’s baseline is,” she said. “We shouldn’t panic and
rush them back to the hospital at the first sign of trouble. It’s a difficult problem to tackle ... it’s
a huge undertaking.”

Bradley reports that Palm Healthcare will continue to look at how they can work with the
stakeholders in keeping abreast of the issues, working with changes and looking at
nontraditional resources. Strengthening community relationships is key, starting with faith
communities. She recommended training visitors of homebound patients to do safety
assessments to make their visits more powerful. Checking the medicine cabinet and food
pantry — those things that aren’t reimbursable — is helpful.

Businesses also need to take into consideration what can be done to help employees with
caregiving responsibilities so they can minimize the impact of lost productivity.

Rethinking education for health professionals in terms of interdisciplinary training and taking a
team approach among nurses, physical and speech therapists, doctors and others in the health
care field will help strengthen and advance solutions. Other recommendations to address the
issue are promoting the use of technology through Skype and other phone apps; bridging the
gap between health and social services; attending to behavioral health along with medical
health issues; gaining a better understanding of all of the available resources, which may
include involving students; and creating more general public awareness.

Dyess said Palm Healthcare Foundation has played a huge role in advancing nursing, which has
a big role with this issue.

“Palm Healthcare has been really pivotal,” said Dyess. “We need to continue to give people
more opportunity to come together at policy points in the community to really influence what’s
happening. We need to really understand the roles and visions that different stakeholders have
and can craft a solution once there’s a better understanding.”

Founded in 2001, Palm Healthcare Foundation, Inc. is known for solving critical healthcare
issues through creative community-wide collaboration. The foundation’s “Healthier Together”
initiative strives to improve the quality of life in targeted neighborhoods. The foundation is
committed to finding ways for inspired giving and thoughtful funding to generate lasting
change. It has invested more than $67 million to support more than 100 organizations. For more
information about Palm Healthcare Foundation, Inc., visit www.palmhealthcare.org or call
(561) 833-6333.