Older Adults in North Carolina: An Overview

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N.C.’s Older Adults

• Who Are They?
• How Many Are There?
• Where Do They Live?
• What Types of Programs and Services are Available in NC?
Who Are They?
Older Adults Are...
Snapshot of Older Adults in NC
(Source: Division of Aging and Adult Services, DHHS, Year 2008)

27.7% of persons age 65+ live alone
60.2% of persons age 65+ living in community have 0 disabilities
17.2% of persons age 65+ living in community have 1 disability
22.7% of persons age 65+ living in community have 2 or more disabilities
16.2% of persons age 18-44 care for adult 60+
24.4% of persons age 45-64 care for adult 60+
18.9% of persons age 65+ care for adult 60+

42.2 per 1000 persons age 65+ are in a nursing home (2000 data)
36.5 per 1000 persons age 65+ are in an adult care home (2000 data)

$55,319 median household income for age group 45-64
$31,184 median household income for age group 65+

9.0% of persons age 65 -74 are below poverty
14.6% of persons age 75+ are below poverty
3.7% of the total labor force contains persons 65+
How Many Are There?
North Carolina’s Older Adult Population Is Growing

Factors:

• Baby Boomers (1946-1964)
• Migration – North Carolina is a popular retirement destination
• Increasing Life Expectancy
Projected Growth of Older North Carolinians 65+ and 85+
(Source: Division of Aging and Adult Services, DHHS)
NC Population by Age Group
1970 to 2029
(Source: Division of Aging and Adult Services, DHHS)

Percent of Population

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<tr>
<th>Age Group</th>
<th>1970</th>
<th>2000</th>
<th>2029</th>
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<td>0-19</td>
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<td>60+</td>
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Where Do They Live?
Percent of Population Age 65+ in North Carolina, Year 2008
(Source: Division of Aging and Adult Services, DHHS)

The range is from 6.5% to 22.8%
The average per county is 12.3%
Projected Growth of 65+ Population from 2008 to 2029

The projected growth rate for NC is 92.6 %
The range is from 14% to 256%

Source: Based on 2008 and 2029 projections from Office of State Budget and Management, September 2009
Percent of County Population Projected to Be Age 65+ in 2029

The range is from 10% - 29%
The average per county is 17.2%

Source: Based on 2029 projections from Office of State Budget and Management, September 2009
What Types of Programs and Services are Available in NC?
Range of Services and Programs

Healthy/
Active

End of Life
Care
Overview of Types of Programs and Services

• There are many programs and services that support older adults whether they are active, live in their home with services, or live in a long-term care facility.

• This portion of the presentation is designed to just give you an overview, it does not cover all of the services and programs offered.
Senior Games

- Provides year-round health promotion and education for individuals 55 years of age and older.
- Serves all NC counties with over 50,000 participants.
- Local Senior Games in Spring.
- Spring Qualifiers participate Senior Games State Finals held in Raleigh in the Fall.
- Every 2 years, State Finals winners qualify to represent North Carolina at the National Senior Games.
Senior Centers

Locations in the community for older adults to:

- participate in recreational, educational, and health-promoting activities;
- obtain information & individual assistance with community programs and services;
- and interact with others.

- There are 163 recognized centers with two certification levels:
  - Center of Merit (5 Centers)
  - Center of Excellence (65 Centers)
Adult Day Care and Adult Day Health Care

- Models: Social & Health
  - 40 Adult Day Care
  - 57 Adult Day/Adult Day Health
  - 4 Adult Day Health only
  - 101 programs in 54 counties

- Programs provide physically and mentally stimulating activities, nutritious meals and snacks.

- Often provide care while primary caregiver works.

- State provides some funding, but in most cases much of the funding is provided through fund-raising or the support of the sponsor (e.g. church, etc).
Support for Adults to Remain in their Homes/Community

- **State/County Special Assistance (In-Home Program)** - An alternative to placement in an adult care home for individuals who can live at home safely with additional support services and income. The standard monthly payment is up to 75% of the amount an individual would receive if they resided in an adult care home. Recipients must be eligible for full Medicaid.

- **Community Alternatives Program for Disabled Adults (CAP/DA)** - A package of services allowing adults who qualify for nursing facility care to remain in their private residences. The program is available in all North Carolina counties and contributes to the quality of the participants and their families/caregivers, while providing care that is cost-effective in comparison to the Medicaid cost for nursing facility care.
Home and Community Care Block Grant Funding (HCCBG)

• The focus of the HCCBG is to support persons 60+ with their desire to live in the community.
• HCCBG is the consolidation of several funding sources (State, federal, local, and consumer contribution)
• Counties have discretion, flexibility, and authority to determine services, service levels, and service providers.
• **18 Eligible Services:**
  - Adult Day Care, Adult Day Health Care, Care Management, Congregate Nutrition, Group Respite, Health Promotion and Disease Prevention, Health Screening, Home Delivered Meals, Housing and Home Improvement, Information and Assistance, In-Home Aide, Institutional Respite Care, Mental Health Counseling, Senior Center Operations, Senior Companion, Skilled Home (Health) Care, Transportation, and Volunteer Program Development.
• There are many individuals on waiting lists for services, primarily in-home aide and home-delivered meals.
• The Commission historically supports HCCBG funding increases.
Options For Care
When an Individual Can no Longer Live in their Home or with Relatives
Assisted Living Residence

• Any group housing and services program for two or more unrelated adults, that makes available at a minimum, one meal a day and housekeeping services and provides personal care services directly or through a formal agreement with one or more licensed home care or hospice agencies. Services are delivered in self-contained apartment units, or single or shared room units with private or area baths.

• Licensed or Registered Assisted Living:
  – Adult Care Homes (including Family Care Homes)
  – Adult Care Homes That Serve Only Elderly Persons
  – Multiunit Assisted Housing with Services (MAHS)
Multiunit Assisted Housing with Services

- An assisted living residence in which hands-on personal care services and nursing services are arranged by housing management and provided by a licensed home care or hospice agency.

- Residents, or their agents, must be capable, through informed consent, of entering into a contract and must not be in need of 24-hour supervision.

- These are not licensed, but are required to register with the Division of Health Service Regulation.
Adult Care Homes
(Source: NC DHHS Division of Health Service Regulation)

- Adult Care Homes provide 24-hour scheduled services for aged or disabled persons whose principal need is a home with shelter or personal care. Medical care is usually occasional.
  - Family Care Homes (2-6 beds)
  - Adult Care Homes (7 beds and up)
- In 1997 a moratorium was placed on new adult care home beds. In 2001, they became regulated under the Certificate of Need Law.
- 41,461 adult care home beds in NC.
- Licensed by the Department of Health and Human Services, Division of Health Service Regulation. Rules are adopted by the Medical Care Commission.
- Approximately 70% of adult care home residents receive State/County Special Special Assistance.
Adult Care Homes
Additional Information

**State/County Special Assistance**
- A cash supplement to help low-income individuals pay for care in adult care homes.
- Individuals apply at Departments of Social Services.

**Special Care Units**
- A wing or hallway within an adult care home designated for residents with Alzheimer’s disease or other dementias, a mental health disability, or other special needs disease.
Nursing Homes

- Nursing homes are for chronic or convalescent patients, who, on admission, are not as a rule acutely ill and who do not usually require special facilities (operating room, x-ray facilities, laboratory facilities, etc.) A nursing home provides medical and nursing care, but the patient is not sick enough to require general hospital care. Some patients are admitted for short-term rehabilitative or convalescent care following hospitalization, most patients are in need of long-term care.
- 42,328 licensed beds in nursing homes. (Quantity is regulated by the Certificate of Need Law.)
- Licensed by the Department of Health and Human Services, Division of Health Service Regulation. Rules are adopted by the Medical Care Commission.
- Nursing homes that receive Medicare or Medicaid must be certified in accordance with federal law.
Continuing Care Retirement Communities

- Continuing Care Retirement Communities (CCRC) furnish lodging together with nursing services, medical services, or other health related services, under an agreement effective for the life of the individual, or for a period longer than one year.
- Involves a contract or agreement and usually requires a large up front fee (entrance fee) and monthly fees.
- Currently 57 facilities.
- Typically provide 3 levels of care: independent living, assisted living, and skilled nursing care.
- Regulated by the Department of Insurance and the Division of Health Service Regulation, if the facility has licensed adult care or nursing home beds.
Medicare/Medicaid
Medicaid

• Medicaid is a state administered program available to certain low-income individuals and families who fit into an eligibility group recognized by federal and state law.

• Depending on medical status and level of care needs, Medicaid recipients over the age of 65 (and disabled recipients under age 65) may be eligible for NC Medicaid for:
  - Adult Care Home
  - Special Assistance in-Home
Medicare & Dually Eligible

Medicare – A health insurance program for people:
- Age 65 or older.
- Under age 65 with certain disabilities.
- All ages with End-Stage Renal Disease.

Medicare has Two Parts:
- Part A (Hospital Insurance)
- Part B (Medical Insurance)

Medicare Part D – Prescription Drug Coverage

- Dually Eligible - describes those individuals who have Medicare as their primary medical insurance and Medicaid as their secondary coverage. (All may not be over 65.)

- According to most recent data:
  180,869 Dually Eligible Recipients
  2,283 Not Dual Recipients
  183,152 Total Recipients over age 65 Served
Additional Information and Resources
Area Agencies on Aging

Located in the regional Councils of Government. AAAs have functions in five basic areas: (1) advocacy, (2) planning, (3) program and resource development, (4) information brokerage, and (5) funds administration and quality assurance.
County Departments of Social Services

• Access to Services for Older Adults and Younger Adults with Disabilities:
  – Adult Protective Services
  – Guardianship Services
  – Medicaid At-Risk Case Management Services
  – Personal and Family Counseling
  – Health Support Services
  – Special Assistance for adults in Adult Care Homes
  – Special Assistance In-Home Program

• Additional Services, Programs & Positions located at the local DSS:
  – Adult Care Home Specialists
  – Adult Care Home Case Management Services
  – Energy Assistance
  – Long-Term Care Information/Placement Services
  – Nutrition Programs

Local DSS Directory: http://www.dhhs.state.nc.us/dss/local/
Department of Health and Human Services

• **Office of Long-Term Services and Supports**
  Maria Spaulding, Deputy Secretary for Long-Term Care and Family Services

• **Division of Aging and Adult Services**
  Dennis Streets, Division Director

• **Division of Health Service Regulation**
  Jeff Horton, Acting Director

• **Division of Medical Assistance**
  Craigan Gray, MD, Director