

# 60 Years of Caring



*60<sup>th</sup>*  
*Anniversary*

July 2014

## The Role of the Florida Health Care Association

Florida Health Care Association has a strong history of leadership and advocacy that dates back to 1954. The founding members were passionate about improving care for elder Floridians and recognized that their ability to shape public policy would be greatly enhanced by the creation of a statewide organization that brought together like-minded individuals. Today, FHCA is a federation representing more than 1,000 members and more than 500 facilities that provide skilled nursing, post-acute and sub-acute care, short-term rehabilitation, assisted living and other services to the frail elderly and individuals with disabilities in Florida. FHCA also has more than 400 associate members/companies that provide valuable products and services to long term care providers.

Governed by its Board of Directors, FHCA furthers the mission of advancing the quality of services, image, professional development and financial stability of its members. The association works to promote the importance of investing in the well-being of Florida's frail elders and individuals with disabilities and to ensure their continued access to high-quality long term care.

Throughout the past 60 years, each new leader of FHCA has experienced a unique set of challenges facing the association's membership. From regulations and funding sources to consumer demographics and expectations of care delivery, the association has evolved to meet these changes to become a leader in Florida and across the country. Together with its advocacy partner, Our Florida Promise, FHCA ensures that the voices of long term care providers are heard through grassroots campaigning, political action and legislative advocacy.

FHCA supports its members in their delivery of professional, compassionate care to thousands of Floridians. Quality improvement initiatives, survey readiness, regulatory guidance, emergency preparedness support, labor and workforce resources and training tools are just a few of the ways long term care providers benefit from FHCA membership. FHCA also offers excellent networking, professional development and continuing education opportunities, all designed to help long term care professionals take their careers to the next level while staying up to date on long term care developments and trends.

FHCA is the state affiliate of the American Health Care Association/National Center for Assisted Living in Washington, D.C., and earned the national organization's Advocacy in Action Award in 2010.

As we commemorate Florida Health Care Association's 60th Anniversary, the association remembers its humble beginnings, builds on its outstanding past and celebrates a brilliant future, paying tribute to its accomplishments as individual providers and as an association – both of which have maintained the tradition of excellence started by the pioneers who founded this great association.

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# Executive Summary

When babies born today reach high school, about one in four of their fellow Floridians will be older than 65. Seniors will constitute the majority of Florida's predicted population growth between now and 2030, and this boom means Florida will encounter elder issues in a way the state – already a long-time haven for retirees – has never done before.

Six decades ago, Florida was a place where seniors merely lived out their retirement years. Year-round sunshine, maybe a bit of golf, fishing or shuffleboard – this was the popular perception of the so-called Golden Years. Today, however, that model is increasingly being replaced by a generation of “elders” who continue to work long past the traditional retirement age, who share the roadways by the millions into their late 80s and beyond, whose purchasing power helps fuel the state's economic engine, and whose greater life expectancies have profound implications on everything from housing and transportation to medicine and long term care.

The past 60 years have seen innumerable advances in technology, medicine and communication in American society. During this time, the unique contributions and needs of older Americans have also become increasingly important to support and address.

In Florida, it is vitally important that we develop and reinforce a system that provides for a continuum of care for aging Floridians. This must include not only opportunities for the active lifestyle we all hope to enjoy in our later years, but also resources to deal with the inevitable decline of so many elders – things like access to geriatric specialists, home-based assistance, rehabilitation services, assisted living and skilled nursing facilities, hospice care and community wide supports.

The good news is that Florida is well on the way, serving as a national model for improvements to elder care throughout the spectrum of care settings. Florida leaders have made it a priority to ensure that seniors have the opportunity to age in the least restrictive, most comfortable and most secure settings possible. Over 60 years of dramatic change, the Florida Health Care Association has been an integral partner in establishing and maintaining the highest standards for long term care in the state.

Over the past six decades, the organization that evolved to become the Florida Health Care Association has made an important difference for members of the long term care profession and, most importantly, for the comfort and well-being of the countless Floridians who have been entrusted to their care. The quality of Florida's facilities and the quality of life enjoyed within them has never been better.

Yet challenges lie ahead. Among them, Florida (like the nation) faces a substantial shortage of geriatricians and nurses to treat the growing population of elders. At the same time, the incidence of Alzheimer's disease is on the rise; appropriate affordable housing for seniors can be hard to find; and state and federal funding for long term care services, as well as transportation resources for elders, are far from adequate.

Reflecting these challenges, Floridians with aging parents are largely unsure how they will be able to help their parents address the increasing challenges of age-related decline, both physical and mental. A new public opinion poll commissioned by FHCA found that these Floridians are nervous about their ability to help meet their parents' needs, apprehensive about the strain those needs might place on their own lives and families, and interested in making sure Florida provides enough options as their parents get older.

This report details aging in Florida over the six decades that the Florida Health Care Association has been a leading advocacy voice for the long term care profession. Florida has come a long way in this time, yet it has so much more to learn about the promises and challenges that lie ahead.

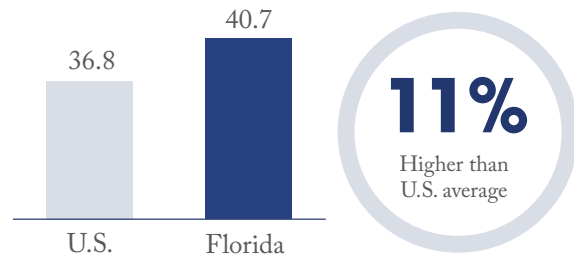
## Key Findings

The nature of society is to constantly evolve, but over the past 60 years the social fabric of Florida has evolved with a speed previously unimaginable. Tremendous population growth, unprecedented technological developments and seemingly magical advances in medicine and health care have rocketed Florida from a sleepy subtropical paradise to the forefront of the modern world.

## Demographic Trends

- Over the past six decades, Florida's population has undergone a rapid growth, this year becoming the third most populous state in the United States.
- Florida already has a large population of elders, and that trend will continue to accelerate. Persons age 65 and older currently make up about 18.2 percent of Florida's population. By 2020, more than one in five Floridians is expected to be part of this age group, and by 2030 it will be almost one in four.
- As Florida adds almost a quarter-million additional residents each year through 2030, the majority of these new residents – 56.9 percent of them – will be age 60 and older.
- Florida has the highest median age of any state at 41.5 years. At the same time, the state's age dependency ratio – the share of residents whose advanced age makes them dependent on others – is the nation's highest at 28.5 percent, more than one-third higher than the U.S. average of 20.7 percent.

### Florida Has Highest Median Age in U.S.



## Continuum of Care Quality Trends

- Florida has become a leader in offering long term care options for families. The portion of people residing in skilled nursing facilities (often referred to as nursing homes) is far smaller in Florida than in other states. Instead, home- and community-based care programs provide affordable and comfortable options for many families. For those residents who do seek skilled nursing care, Florida facilities have become nationally noted for their outstanding quality and high standards.
- In 2014, U.S. News & World Report named 205 Florida skilled nursing facilities to its "Best in Nursing Homes" list, representing almost 30 percent of all Florida facilities. The report awarded five stars – the highest ranking possible – to 10 percent more Florida skilled nursing facilities than the previous year. In addition, Florida skilled nursing facilities receive far fewer deficiencies than the national rate for actual harm or jeopardy – only 9.4 percent of Florida facilities received this category of deficiencies compared with the national average of 21.9 percent.
- The Florida Gold Seal Award program was established in 2002 and implemented by the Governor's Panel on Excellence in Long Term Care. Today, Florida boasts 23 Gold Seal skilled nursing facilities, each of which has been recognized for demonstrating the highest standards of quality care and quality of life for its residents.
- In numerous other national measures, Florida's skilled nursing facilities provide better care for their residents, and those residents report far fewer problems. Florida fares better than the national averages in measurements of such things as skilled nursing facility residents reporting moderate to severe pain; residents receiving anti-psychotics (absent condition); and residents reported to have little to no activity.

## Attitudes on Aging

To better understand the attitudes and perspectives of adults with aging parents in Florida, the Florida Health Care Association commissioned a public opinion survey of Floridians who have a parent or in-law at least 56 years old.



Among the findings of the public opinion poll of Florida adults with aging parents, commissioned by FHCA:

- 58 percent are concerned about their ability to care for the physical health of an aging parent.
- 67 percent are unsure of their own ability to provide care when faced with an aging parent's diminishing mental capabilities.
- 48 percent are concerned that the needs of an aging parent will create a financial strain.
- 67 percent are concerned that the parent's needs will cause emotional strain in their own lives.
- Only 57 percent had discussed with their aging parent how to handle care decisions if the parent can no longer make those decisions on his or her own.

**Welcome to Florida:**  
By 2030, 57% of new  
residents will be 65+

## Challenges to Providing A Continuum of Care for Aging Floridians

- **Shortage of geriatric specialists**  
Nationwide by 2030, about 3.5 million additional eldercare professionals will be required to meet the care needs of aging Americans. Based on current elder care trends, the gap between this need and the anticipated workforce is growing, not shrinking as necessary.
- **Nursing shortage**  
One in seven Florida nurses works in a skilled nursing or hospice facility, yet skilled nursing facilities experience a 62.4 percent turnover rate in direct care registered nurses – the highest rate among six categories measured. The most difficult positions to fill will be those requiring RNs with experience and/or advanced education in caring for an increasingly elderly population.<sup>1</sup>
- **Increasing rates of Alzheimer's disease and related dementias**  
Alzheimer's disease is the No. 1 most costly condition to Medicare and Medicaid budgets, more costly to the nation than heart disease or cancer. In Florida alone, an estimated 480,000 older adults live with Alzheimer's today – and this figure is expected to increase to 720,000 in the next 11 years.<sup>2</sup>

- **Limited transportation options for aging residents**

One of the most unpleasant days for seniors occurs when they have to give up the car keys – and with it, their unfettered mobility and sense of independence. Yet access to transit is severely lacking for seniors in Florida and around the nation, leading to what has been dubbed “the mobility crisis” threatening the baby boom generation.<sup>3</sup> A case study of Jacksonville, Fla., projected that by 2015, about 53 percent of seniors living in urban areas, and an astounding 96 percent of those living in suburban and rural areas, will have poor access to public transportation.

- **The rise of two-career families**

In just a single decade from 1996 to 2006, the number of dual-income American families grew by 31 percent. By 2012, three in five American families with children had two working parents. This greatly impacts a family's interest and ability to care for aging parents in the home setting.

- **Rising litigation costs boost the price of long term care**

Despite the high quality rankings received by Florida's skilled nursing facilities compared to the rest of the nation, those facilities are forced to spend dramatically more than their non-Florida counterparts to defend excessive, often frivolous lawsuits. To the average nursing facility with 100 residents, this can mean a loss of a half-million dollars each year on litigation-related costs alone, resources that otherwise could be used for resident care.

- **Reimbursement rates for long term care are insufficient to cover costs**

Over the past five years, Florida nursing facilities have experienced significant reductions to funding from the state Medicaid and federal Medicare programs. Medicaid underfunds nursing facility care by almost \$21 per patient per day, making it difficult for facilities to maintain the quality of care residents deserve.

- **The move to managed long term care**

In 2014, the Florida Medicaid program implemented a statewide managed long term care system, enabling Medicaid recipients to receive long term care services (adult day care, assisted living, home health, skilled nursing and nurse registries). It is too soon to assess the full impact this change will have on the delivery of care to Florida's seniors.

- **Death rates from falls among older men and women are rising**

Death rates from falls have risen sharply over the past 10 years, and falls are now the leading cause of fatal and nonfatal injuries among older adults. One out of three adults older than 65 will fall each year, resulting in direct medical costs of about \$30 billion annually.<sup>4</sup>



# A History of Aging in Florida

## Changing Demographics

Through the first several decades of the 20th Century, Florida was little more than a small Southern state with pleasant weather, unrivaled fishing and miles and miles of citrus groves.

Then in the 1930s, the Sunshine State was transformed by the advent of window air conditioners, which increased the appeal of areas that had previously been intolerable for northerners. However, the most dramatic transformation began at the end of World War II, when countless military personnel who had been stationed here during the war realized how much they liked Florida and decided to stay permanently.

Before the war, the 1940 U.S. Census recorded less than 1.9 million residents in Florida. Just ten years later, the figure had already grown by almost half, to 2.7 million. And that was just setting the stage for Florida's decades-long period of growth and prosperity.

The 1950s saw an even greater population boom in Florida, with a staggering 78.7 percent increase that raised the state's population to 4.9 million by the end of the decade. At times in the 1970s and 1980s the state was adding new residents at a

### Senior Spending Power

**\$135  
Billion  
Annually**  
for ages 60+

**50%**  
of new home  
construction

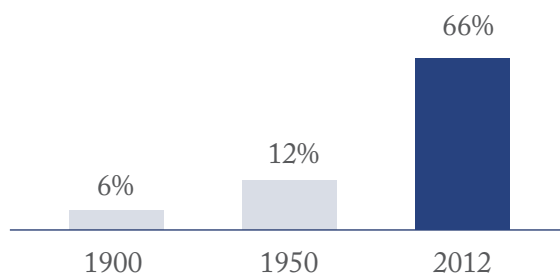
**\$2.8  
Billion**  
net tax benefit

rate of 1,000 people per day, and today Florida's population approaches 20 million and status as the third largest state in the nation.<sup>5</sup>

To be sure, the mid-1950s was a far simpler time in Florida. The state moved at a more languid pace, and "hustle and bustle" happened in other places, usually "up North." From Florida's emerging urban centers to the rural expanses that covered most of the state, families often cared for their own, from birth through old age. It was not at all uncommon for multiple generations and branches of a family to live within a few miles of each other, where relatives were always nearby to help care for one another.

## Less Help At Home for Aging Parents

Women who work outside the home



But sometimes, that simpler life was paired with a lower threshold for individual safety and well-being. Smoking was considered commonplace, even among expectant mothers. Seat belts were almost unheard of. The polio vaccine was still unknown to anyone outside of medical science. And in Florida and the rest of the South, segregation kept large segments of the population from receiving the best available health care, housing, food and other goods and services to sustain.

Still, increasing numbers of older Americans began to realize the dream of spending their Golden Years in the warmth and ease of Florida. Even those who could no longer live independently came, despite the lax standards under which many care facilities were allowed to operate.

Much changed on Palm Sunday in 1953, when a tragic fire claimed the lives of 29 nursing home residents in Largo, a community just outside St. Petersburg. The fire became a call to action on the need for statewide regulation and monitoring of nursing homes. Leading this effort was a small group of South Florida nursing home providers intent on ensuring that quality care and the quality of life was the standard for residents.

On January 29, 1954, this fledgling group went statewide and became known as the Florida State Nursing Home Association. The FSNHA, later renamed the Florida Health Care Association, would provide its members with a wide range of advice on achieving higher standards and complying with legal requirements, and would advocate at the state and national levels for higher standards and better resources.

Through the rapid population growth of the 1950s and 1960s, aging services in Florida were run largely by small family-owned and charitable organizations. But as Florida grew and federal funding for aging services became more available, outside interest in the state's needs grew, too. Larger out-of-state companies began opening nursing homes in Florida, in some areas exceeding the number of family-owned local operators. This added another layer of negative publicity to a profession that already had its share.

To deal with these challenges and build higher expectations of quality, the Florida Health Care Association quickly became a unified voice for long term care providers throughout the state. The association's story is one of commitment and adaption throughout periods of substantial social and regulatory change.

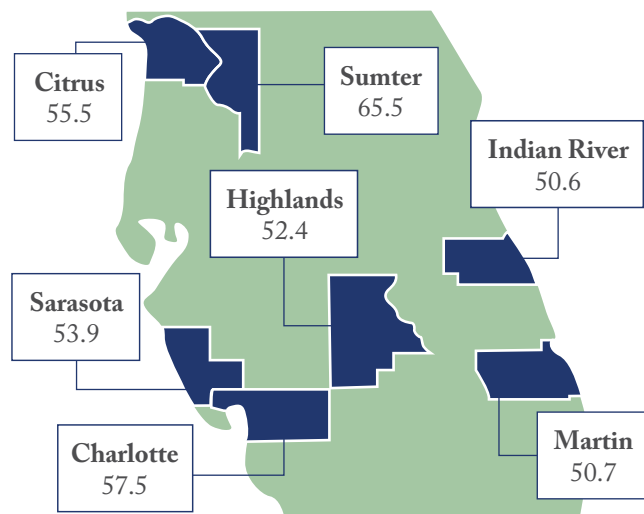
As it marks its 60th anniversary, the association has grown to more than 1,000 members and represents some 500 of the state's 682 skilled nursing facilities. The members who come under this single umbrella provide a continuity of care through skilled nursing, post-acute and sub-acute care, short-term rehabilitation, assisted living and other services that enhance the lives of frail elders and individuals with disabilities.

Once the unattainable retirement mecca for so many, Florida is now the nation's most important state regarding issues of senior living, elder care and geriatric medicine.

Florida has the highest median age of any state, at 41.5 years. In 2000 and again in 2010, Florida was home to the top three U.S. counties with the highest median ages among those with a population of at least 100,000: Charlotte (55.9 years), Citrus (54.0) and Sarasota (52.5).<sup>6</sup>

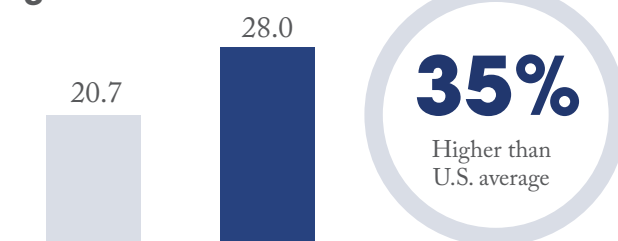
Where someone age 50 used to be considered approaching "old age," as of June 2014 seven Florida counties have median ages of 50 or older, ranging from Sumter's 65.5 years to Indian River's 50.6. Others in this "50 isn't so old" grouping include Charlotte, Citrus, Sarasota, Highlands and Martin.<sup>7</sup>

## 7 Florida Counties Have Median Ages Over 50



Similarly, Florida's age dependency ratio – a measurement of residents who are dependent on others based on their age – is also the nation's highest at 28.2 percent, as reported by the U.S. Census in 2012. This is more than one-third higher than the U.S. average of 20.7 percent.<sup>8</sup>

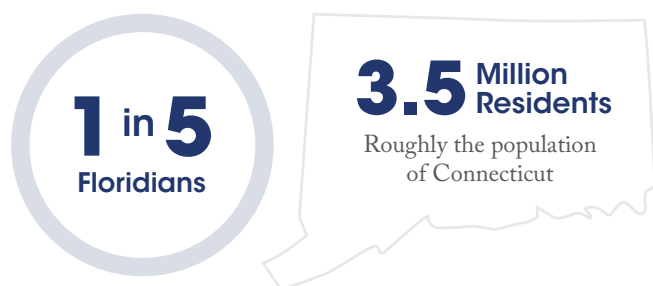
## Florida Age Dependency Ratio is Highest in U.S.





Today, persons age 65 and older make up about 18 percent of Florida's population, some 3.5 million people. That's like having a population roughly the size of the entire state of Connecticut, all of them at traditional "retirement age," all of them hoping to ease off the hectic pace of a workaday life – yet all of them facing the mounting health challenges so common in their age group.

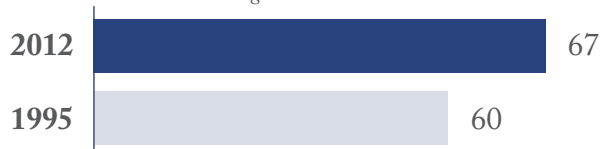
### Today, Florida's 65+ Population Equals:



And the share of seniors within Florida's population will continue to grow, to 20.4 percent by the end of this decade and then 24.1 percent by 2030.<sup>9</sup> Of the 4.8 million new Floridians expected by 2030, the majority (56.9 percent) are anticipated to be age 60 and older. The share of Florida seniors living in poverty is about the same as the national average, 14 percent, but that translates into much higher numbers in Florida than elsewhere.

### Americans Delaying Retirement

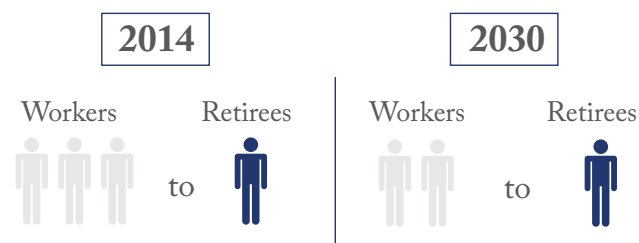
*Age at retirement*



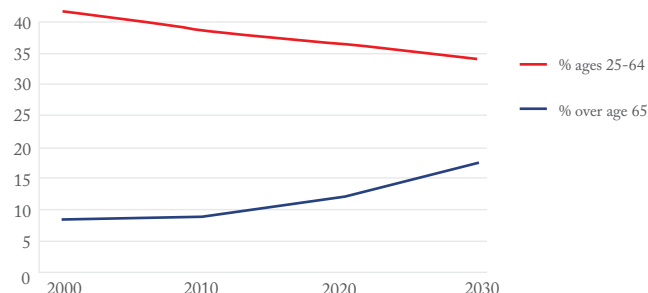
One of the hidden challenges of this demographic trend is the declining share of working age Floridians, those who will be expected to fuel the economy and pay the taxes that will provide services for an aging population.

In 2000, Florida's working age population – those ages 25-54 – represented 41.5 percent of the total population. Today, with some of the oldest Baby Boomers entering retirement, working age residents represent just 39.1 percent of Florida's total population and this figure is expected to drop to 36.1 percent by 2030.<sup>10</sup> While Florida now has three workers to every one retiree, by 2030 that ratio is likely to be just two to one.<sup>11</sup>

### Florida's Workforce to Retiree Ratio



### Florida's Aging Population Projections 2000-2030



### Trends in Long Term Care Utilization

Even though Florida has the highest portion of seniors among its overall population, a comparatively small share of them needs to rely on skilled nursing facilities. This suggests that Florida does an outstanding job of maintaining the health and well-being of its older residents by offering a more robust menu of activities and care choices, all designed to help them remain in their homes and communities as much as possible. And when they do need more extensive services, federal assessments show that Florida offers some of the best skilled nursing facility care to be found anywhere.

Skilled nursing facilities currently take care of two distinct groups of individuals: those who need rehabilitation after an acute illness or significant injury and those who need long term care because they are unable to independently live at home or in an assisted living facility.

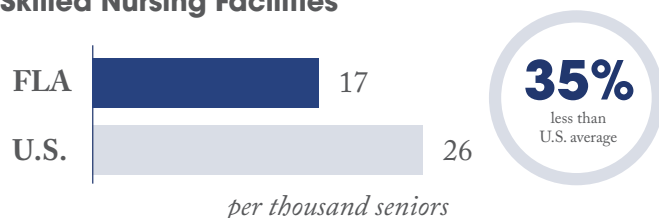
Medicare admissions, which include individuals admitted from acute care hospitals, make up the largest type of admissions to skilled nursing facilities. Non-Medicare admissions are individuals who come to a facility either from a non-qualifying Medicare acute hospital stay or from the community. Long-stay residents include those who have been at nursing facilities for more than 12 months.

Measurements of both physical and cognitive function are used to determine which individuals have increasingly complex medical conditions and extensive needs for care and support. Of those individuals who are assessed on five activities of daily living – bathing, bed mobility, transfer, toilet use and eating – almost all (95.2 percent) who enter a facility for a post-acute stay covered by Medicare require assistance with four, or even all five, of these activities. Among long-stay residents at facilities for at least one year, 85.6 percent need that same level of assistance. In addition, almost two-thirds (61.1 percent) of long-stay residents have dementia, while only 37.7 percent of Medicare admissions have dementia.

At the start of 2014, Florida was home to 682 skilled nursing facilities, where more than 70,000 residents receive the kind of skilled care they cannot receive in other settings. Most of these facilities are in Florida's cities and their suburbs; only about 7 percent are located in rural areas. According to a 2013 report by the National Center for Health Statistics<sup>12</sup>, about 17

of every 1,000 Florida seniors were residents in a skilled nursing facility on any given day in 2012. This is one-third lower than the national average of 26 per 1,000 seniors.

### Percentage of Florida Seniors in Skilled Nursing Facilities



The same report showed that another 15 of every 1,000 Florida seniors resided in a residential care community (comparable to the national average), while 116 of every 1,000 seniors utilized a home health agency – almost one-fourth more than the national average. Finally, 2 of every 1,000 Florida seniors enrolled in an adult day service center (about half the national rate) while 31 out of every 1,000 received hospice care.

### Use of Long Term Care Services per 1,000 Residents Age 65+ on Any Given Day (2012)

	Adult day services center	Nursing home	Residential care community	Home health agency	Hospice
U.S.	4.05	26.05	15.42	94.35	28.40
Florida	2.15	17.34	14.75	116.42	31.21

Source: "Long-Term Care Services in the United States: 2013 Overview," National Center for Health Statistics

Lower utilization of nursing facilities in Florida is due in large part to strong state efforts to direct funds toward home- and community-based services through a variety of Medicaid waiver programs, including the Aged and Disabled Adult program, Assisted Living for the Elderly and Nursing Home Diversion.

Florida's home- and community-based care programs are designed to provide lower-cost alternatives to nursing facility placement for seniors who qualify for skilled nursing care under Medicaid. The concept behind these programs is that most seniors prefer to continue living in or near their homes, even if that requires a little extra help, and the cost savings allow the state to provide more services to more seniors.

These programs have evolved since 1982, when Florida began providing alternatives to skilled nursing facility placement in order to lower costs and keep residents in the least restrictive care settings, preferably within their homes and communities.<sup>13</sup> These options emerged from the federal Omnibus Budget Reconciliation Act of 1981, which authorized Medicaid home- and community-based services.

Florida's Nursing Home Diversion waiver served 21,381 clients in 2012, and another 10,560 were served under the Aged and Disabled Adult waiver.<sup>14</sup> These two programs are Florida's most widely used of their kind.

Various state-level reports validate the view that nursing home diversion programs successfully reduce extended skilled nursing facility stays among waiver participants, but do not eliminate the need entirely. Among Floridians who had spent two years in the Nursing Home Diversion program, approximately 12 percent had been in a skilled nursing facility at least 30 days within a two-month period – just one-fourth as many as otherwise similar seniors who were not part of the diversion program.

## Quality Improvements Over Time

Today, Florida boasts a long term care system that is a national model for its quality and commitment to promoting the independence of aging residents. Florida seniors increasingly can count on having home- and community-based resources accessible to them, with the security of knowing that top-rated skilled nursing facilities are available when needed as part of a continuum of care.

### But this has not always been the case.

In fact, before the Florida Health Care Association became an effective advocacy voice for quality of care for older residents, Florida's approach to caring for the aging was frequently defined and shaped by harsh realities. Advocates and stakeholders have had to work from the inside out, often under FHCA's leadership, to insist on expanded protections and standards for Florida seniors.



### The 1800s and Early 1900s

In the mid- to late- 1800s around the growing nation, a number of factors increased the need for community-wide aging services. Urbanization contributed to care needs; advances in medicine meant people were living to older ages; and the completion of the transcontinental railroad in the late 1860s and proper

roads to accommodate the advent of automobiles introduced a far greater sense of mobility to young adults. They could now move great distances with relative ease, in the process leaving older family members without as much local support.

Yet during this time there were no age-restricted homes dedicated to the care of the elderly. Rather, aged people in need of care or shelter were moved to insane asylums, “poor farms” or almshouses where they would live among populations very different from themselves. In the early 1900s, the spread of tuberculosis further spurred the need for institutions designed to provide chronic care. Then in the 1930s, the Great Depression hit the elderly particularly hard.<sup>15</sup>

Churches and other charitable groups began opening special homes for the aged, hoping to prevent the horrors of the “poor farms” by providing age-appropriate attentive refuge.

## The Mid-to-Late 1900s

The Great Depression gave way to World War II, and the post-War period introduced profound changes to the nation. Florida began decades of unprecedented growth, spurred in significant part by military veterans who trained in Florida and, after the War, realized it would be a wonderful place to live permanently. At the same time, many older Northerners saw the same benefits to spending their Golden Years in the Sunshine State.

Public attention to issues of aging increased dramatically in the 1950s, both in Florida and nationally. In large part, this heightened attention was due to the intersection of two factors: tragedy and political action.



The deadly 1953 fire at a nursing home in Largo served as a call to action on the need for statewide regulation and monitoring of nursing homes. It was through these circumstances that a small group of nursing home providers founded the Florida State Nursing Home Association, which later became the Florida Health Care Association. The members were motivated to achieve higher standards for residents and knew that changes to

state and federal laws would be necessary to do so. These local providers were concerned by an influx of out-of-state, absentee owners opening nursing homes in the state, and knew that uniform rules and enforcement were necessary to properly protect residents.

To deal with these challenges and drive up quality expectations, the Florida Health Care Association rapidly became a unified voice for long term care providers throughout the state.

Simultaneously, political efforts underway would forever change our nation's approach to caring for the aging. President Harry S. Truman directed the Federal Security Administration to host a national conference on aging in 1950. Four years later, the

American Society on Aging was founded, and the American Association of Retired Persons (AARP) was formed in 1958. In Florida, Governor LeRoy Collins held the first Governor's Conference on Aging in 1961, and Governor C. Farris Bryant created the Florida Commission on Aging in 1963.<sup>16</sup>

But even as pension plans and the birth of Social Security began pumping dollars into the aging care system in the mid-1960s, nursing home environments struggled.

Living conditions in many facilities were substandard, with rampant instances of inadequate staff, food and medical care. The era of formal regulations emerged in response to these conditions in the early 1970s, providing baseline standards and opening avenues of recourse for residents and families. Reforms to Social Security in 1972 created minimum quality requirements in order for facilities to receive Medicare or Medicaid dollars.

Some of the most notable long term care reforms have been made at the state level. Beginning with Gov. Bob Martinez in the late 1980s, each Florida governor has increased funding and attention to aging issues. Gov. Martinez launched the Better Living for Seniors Initiative in 1988, and Gov. Lawton Chiles established the Department of Elder Affairs in 1991 after voters created it in the Florida Constitution the previous year. Gov. Jeb Bush initiated the Communities for a Lifetime program in 1999; Gov. Charlie Crist substantially increased funding for Community Care for the Elderly and aging waiver programs; and Gov. Rick Scott further increased waiver funding and initiated major advances in Alzheimer's care with the founding of the Purple Ribbon Task Force.

## The 21st Century



Like Florida's governors, the Legislature has also done its part in recent years. Lawmakers have focused on long term care regulations designed to provide for better continuity of care and to substantially improve nursing facility conditions. The Florida Health Care Association entered the new century as a leading, vocal advocate for significant reforms in long term care in order to better meet the needs of Florida elders entrusted to the care of its members.



One result of FHCA's close work with the Legislature was the passage in 2001 of Senate Bill 1202, a landmark elder care reform measure that resulted in tougher regulation, increased staffing requirements and quality improvement and risk management programs. All of these reforms are enforced through a combined state and federal survey process, and Florida nursing home care has steadily improved as a result. Florida now exceeds the national average in total nursing staff hours, providing the fourth highest rate in the United States: 4.5 nurse hours per resident day in certified nursing facilities.<sup>17</sup>

With the population and demographic changes in Florida, nursing facilities have become an integral part of Florida's economic vitality even as they provide an important spectrum of options for frail elderly or disabled Floridians who need specialized care.<sup>18</sup> A January 2011 report from the American Health Care Association and National Center for Assisted Living shows that long term care facilities in Florida support an estimated \$20.2 billion of the state's economic activity and provide almost 260,000 direct and indirect jobs.<sup>19</sup>

Just as their importance has grown, Florida's long term care facilities have performed better in quality assessments. Since 2001, average deficiencies per facility have declined, while citations for serious deficiencies have decreased dramatically and are lower than the national average. Other critical measures of resident care outcomes have also improved during this time.<sup>20</sup> Measurements of nursing facility quality issued by the federal Centers for Medicaid and Medicare Services found that Florida facilities surpass the national average in almost all categories.

### A few other examples of quality:<sup>21</sup>

- Just 5.5 percent of Florida nursing facility residents were found to have moderate to severe pain, compared with 7.4 percent nationally
- 12 percent of Florida nursing facility residents were receiving anti-psychotics (absent condition), compared with 18.4 percent nationally
- Just 1.6 percent of Florida residents were reported to have little to no activity, compared with 5.5 percent nationally.

Judgments by experts outside the government also reflect favorably on the state of Florida's nursing facilities:

- According to the Kaiser Commission on Medicaid and the Uninsured, fewer than half as many Florida nursing facilities receive deficiencies for actual harm or jeopardy than the national average (9.4 percent vs. 21.9 percent).<sup>22</sup>



- U.S. News & World Report in 2014 named 205 Florida skilled nursing facilities to its "Best in Nursing Homes" list, reflecting almost 30 percent of all Florida facilities. This marked a significant 10 percent increase from the previous year in the number of Florida nursing homes receiving the top five-star rating.<sup>23</sup>



## Quality Care: Not Just A Slogan, But A Reality

Between 2009 and 2014, the percentage of Florida facilities earning impressive 4- or 5- star ratings grew by half, from 39.6 percent in 2009 to 59.1 percent 2014. Likewise, the share of Florida facilities with sub-par 1- or 2- star ratings dropped by more than one-third, from 38.6 percent 2009 to 24.8 percent in 2014.

What these figures mean is that in April 2014, a total of 404 facilities out of 682 in Florida – two out of every three in the most prominent state for long term care – received 4 or 5 stars in their overall rating.

As important as experts' assessments may be, the true value of Florida's long term care community is measured by the facilities' residents and their loved ones. Thanks in part to one of the highest staff-to-resident ratios in the United States, the National Research Corporation<sup>24</sup> has reported that customer satisfaction in Florida nursing homes is at an all-time high. The 2013-2014 report shows that Florida outperformed the nation for resident satisfaction, with 91 percent of residents saying their overall satisfaction is excellent or good and an equal percentage saying they would recommend their long term care facility to others.



Improved customer satisfaction has also come as a result of FHCA member facilities' move to a more person-centered care experience. "Culture change" is the name commonly given to the national movement to transform older adult services, so that they are based on person-directed values and practices where the voices of elders and those working with them are considered and respected. Core person-directed values include choice, dignity, respect, self-determination and purposeful living.

In recent years residents and their caregivers have begun coming together to express choice and to practice self-determination in meaningful ways at every level of daily life. Examples of culture change now being implemented in FHCA member facilities include residents living in small "neighborhoods" rather than up and down long institutional halls; rooms that are more personalized; small kitchens within the neighborhoods to stock residents' favorite snacks and drinks; smaller dining room tables so people can talk with one another during meals; and smaller "care stations" so staff are not segregated from residents. These changes in organization practices, physical environments, relationships at all levels and workforce models are leading to better outcomes for residents and improved circumstances for direct care workers.

Skilled nursing facilities in Florida do not shy away from quality initiatives, and in fact have taken an active role in this important pursuit of excellence. One such program is the National Quality Initiative<sup>25</sup>, which focuses on four measurable goals in key areas of quality care: reduction of off-label use of antipsychotics; reduction in hospital readmissions; decreased staffing turnover; and increased customer satisfaction.

Through these efforts, Florida's long term care facilities have seen substantial improvement across the board.

For example, between 2011 and 2013, the hospital readmission rate among residents of Florida nursing homes declined by 2.5 percent, and by 3 percent among those facilities that are members of FHCA. An impressive 348 facilities experienced positive outcomes through this initiative.

Over the same time period, the off-label use of antipsychotic drugs in Florida dropped by a significant 9.4 percent, and by 11 percent among FHCA member facilities. By 2013, more than 40 percent of FHCA members had already achieved the goal of reducing this type of off-label drug use by 15 percent or more, and other facilities continue to pursue this goal.

And that's not all. More than 80 percent of FHCA's member nursing homes are enrolled in the Advancing Excellence in America's Nursing Homes Campaign, which is focused on supporting skilled nursing facilities as they work to improve performance. Facilities voluntarily enroll in the program and are required to select goals and set targets for quality improvement in several different areas. FHCA and other stakeholders have organized to support participating facilities in achieving the Advancing Excellence goals through information, educational programming, resource tools and collaboration.

The State of Florida has also recognized the exceptional performance of the state's long term care facilities. As of May 2014 a total of 23 Florida facilities had been named recipients of the elite Governor's Gold Seal Award, which recognizes nursing homes that demonstrate the highest standards of quality of life and quality of care for their residents. Facilities earning Gold Seal status meet a quality of care standard that places them in the top 10 percent in their region or top 15 percent in the state. Among other requirements, facilities must have a 5-star rating in the Nursing Home Guide, participate in a consumer satisfaction process, and have an outstanding record with the State Long-Term Care Ombudsman Council.

The image and realities of nursing facility care in Florida have evolved substantially over the decades, with the last ten years bringing perhaps the most impactful reforms. But more remains to be done. The future of aging in Florida is one in which residents receive a true continuum of care across a wide range of settings, from the preferred comfort of their own homes to more specialized facilities providing assisted living, skilled nursing or hospice care. It is only through seamless and individualized attention that Floridians can have the assurance that the care they receive as they age will be what they need, when they need it.

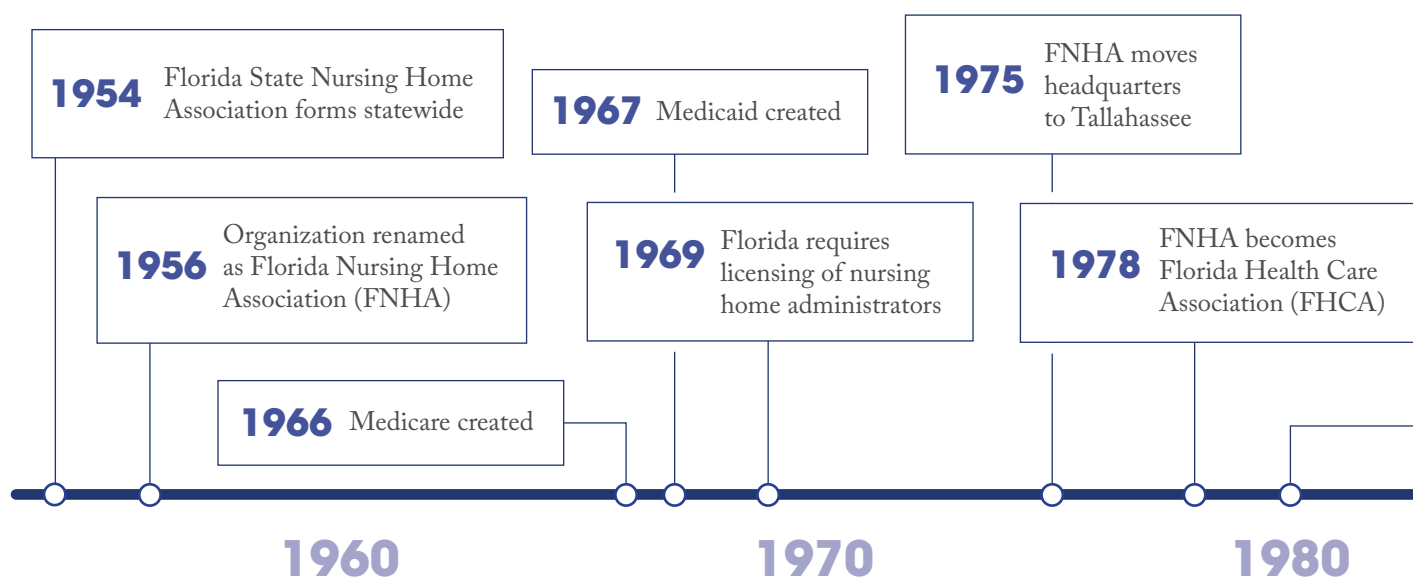
## Florida's Commitment to Excellence: An Illustration

Florida is also a leader in the National Quality Award Program conducted by the American Health Care Association/National Center for Assisted Living. This progressive, three-step initiative is based on criteria established by the prestigious Baldrige Performance Excellence Program. Participating facilities apply for recognition and awards at three levels – Bronze, Silver and Gold – with each level requiring a more detailed and comprehensive demonstration of systematic quality. A facility must receive an award at one level before it can progress to the next step.

Since 2008, the number of FHCA member facilities vying for an AHCA/NCAL National Quality Award has more than tripled, with facilities moving from Bronze to Silver and, now, to Gold. Through the 2014 award cycle, 283 Florida facilities had earned a Bronze Award and another 31 had earned Silver. In 2013, Florida's first Gold Award was brought home by FHCA Past President Nina Willingham and her team at Life Care Center of Sarasota.



# FHCA Timeline



## 1952

The Convalescent Homes Association of Dade County is formed, consisting of nine Dade County owner/operators.

## 1953

Following a tragic fire that claims 29 lives at a Largo nursing home, the Legislature assigns the State Board of Health to regulate nursing homes.

## 1954

The Convalescent Homes Association of Dade County goes statewide, establishing itself as the Florida State Nursing Home Association (FSNHA) with Jack Rice as its first president. Local districts begin to form beyond the Miami area, starting in Orlando.

## 1956

The statewide organization adopts a new charter and changes its name to the Florida Nursing Home Association (FNHA).

## 1960

Nursing home operations in Florida change, and out-of-state operators become more numerous than family-owned and operated nursing homes; FNHA members bring their concerns about this trend to the White House Conference on Aging.

The Florida Legislature requires that in order to be licensed, facilities must submit an ownership and personnel data form and a statement of financial condition.

## 1965

FNHA hires Gordon Wiggin as its first executive director.

## 1966

Congress establishes Medicare to provide health insurance for older Americans.

## 1967

Congress establishes Medicaid to provide health insurance for low-income Americans and certain others.

## 1969

The Florida Legislature requires licensing of nursing home administrators, under the state Department of Professional Regulation.

## 1970

Florida Governor Claude Kirk reorganizes the structure of state government and creates the Department of Health and Rehabilitative Services (HRS).

## 1971

FNHA sues the State of Florida, seeking adequate Medicaid funding. In response, HRS allows nursing homes to charge families of Medicaid patients, and allows facilities to solicit and receive contributions for the costs of care.

## 1972

The FNHA office moves to Orlando. Nursing homes receive their first-ever increase in Medicaid payments.

## 1975

FNHA moves its headquarters to Tallahassee. Now with 14 districts, the association establishes four regions.

## 1976

HRS amends nursing home rules to develop a deficiency formula and a grading system that helps standardize quality of care.

## 1978

FNHA amends its articles of incorporation to change its name to the Florida Health Care Association (FHCA).

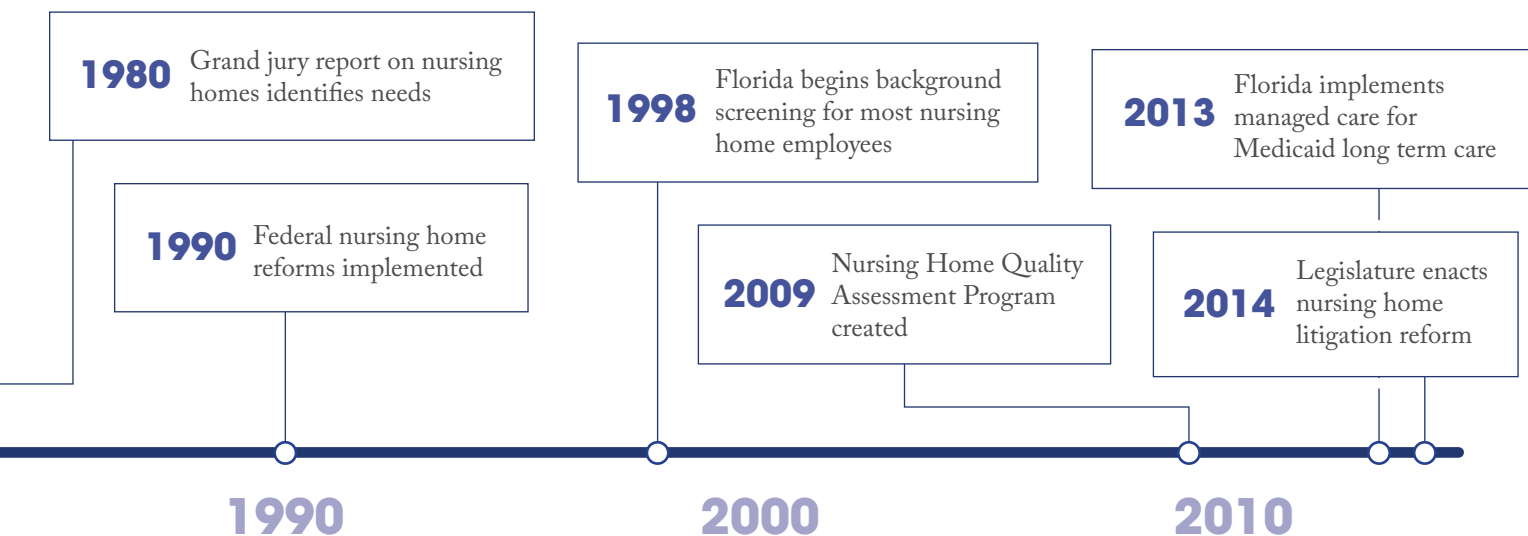
## 1980

A Duval County grand jury report finds that nursing homes are regulated by 50 separate agencies; that the Medicaid reimbursement program does not pay enough to provide adequate care; and that minimum staffing levels are too low to provide adequate care.

## 1986

FHCA moves into new headquarters in Tallahassee, just four blocks from the Capitol Building.

The Patient Care and Services survey process is implemented, and for the first time surveyors measure patient outcomes, quality of care and quality of life; patient care improves substantially throughout the nation.



## 1990

The federal Omnibus Budget Reconciliation Act (OBRA) of 1987, which includes sweeping reforms of nursing home regulation, is fully implemented.

## 1992

Hurricane Andrew pounds South Florida, and FHCA members work diligently to help facility residents and others in the hardest hit areas.

## 1998

Florida law requiring background screening for most nursing home employees goes into effect.

## 1999

A study shows that the average lawsuit loss in Florida is \$2,602 per bed, five times higher than the national average, and the average claim cost at a Florida nursing home is more than triple the rest of the nation.

## 2000

FHCA creates the Quality Credentialing Foundation, the first such peer review group in the country requiring participation for membership in the Association.

## 2003

Approximately 40 percent of all nursing home lawsuits of \$1 million or more are in Florida, and one in five Florida nursing home beds is in Chapter 11 bankruptcy; the “Don’t Drop the Ball” campaign draws national attention to lawsuit problems in Florida.

## 2004

FHCA starts its Lobby Days grassroots initiative.

## 2006

Voluntary submission of data by providers, part of the American Health Care Association’s National Advancing Excellence initiative, enhances transparency in performance outcomes for consumers and facility staff.

## 2007

Florida becomes the first state to implement the automated Quality Indicator Survey process under the auspices of CMS.

## 2008

FHCA hosts a National Transportation Evacuation Summit to examine access to transportation resources during emergency situations.

## 2009

The Florida Legislature creates the Nursing Home Quality Assessment Program, allowing nursing homes to draw down additional federal dollars to fund Medicaid nursing home care.

## 2010

FHCA receives the American Health Care Association Action in Advocacy award and the Tallahassee Chamber of Commerce Association of the Year award.

## 2011

The Florida Legislature passes sweeping Medicaid reform via the Statewide Medicaid Managed Care Long Term Care Program.

The federal Elder Justice Act includes new mandates to assure that serious offenses against residents of long term care facilities are promptly and appropriately reported and investigated.

## 2012

FHCA forms a workgroup with state agencies and the Florida Hospital Association to facilitate work on electronic health records and the exchange of information.

## 2013

Florida implements the statewide takeover of Medicaid long term care by managed care entities.

Florida marks its first AHCA/NCAL Gold National Quality Award recipient, the Life Care Center of Sarasota.

## 2014

The Florida Legislature enacts historic long term care legislation, including litigation reform to eliminate excessive lawsuits, Certificate of Need changes allowing greater flexibility to meet the need for beds, and increased funding that triples the personal needs allowance for residents.

# Attitudes on Aging in Florida

Florida's rapid emergence from a quiet state of farmers, vacationers and retirees into a thriving hub of growth and development began in the 1970s. That transition brought hundreds of thousands of working-age adults who started raising their families in this new land of opportunity. Four decades later, those transplants are reaching retirement age, and it is their once-young children who are now helping their parents cope with the challenges of aging.

To be sure, the approaching arrival of Baby Boomers at retirement age has been the focus of considerable public conversation. Yet surveys on aging issues have tended to focus on the attitudes, fears and expectations of older Americans. While these surveys certainly warrant attention, far less is understood about the attitudes of the growing "sandwich" generation – those grown children who are now of working age, often sandwiched between raising their own children and caring for aging parents at the same time.

To better understand the attitudes and perspectives of adults with aging parents in Florida, the Florida Health Care Association commissioned a public opinion survey of Floridians who have a parent or in-law of at least 56 years of age. The survey, a statewide representative telephone poll, was conducted by Mason-Dixon Polling & Research, Inc., in mid-May 2014. Among the respondents, 42 percent were over the age of 50, another 31 percent were between 40 and 49 years old, and the remainder were between 18 and 39 years old.

## Survey Results

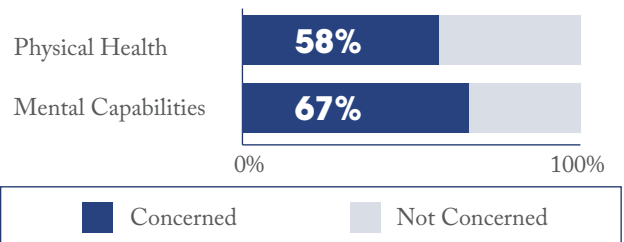
So how do adult Floridians view the potential challenges of aging parents and an aging population?

By and large, they are:

- nervous about their ability to help meet parents' needs
- apprehensive about the strain those needs might place on their own lives and families
- anxious for Florida to provide enough options as their parents advance in age

Florida adults with aging parents wonder how they will be able to help their parents face the increasing challenges of age-related decline, both physical and mental. Almost three in five (58 percent) are concerned about their ability to care for the physical health of an aging parent, while fully two-thirds (67 percent) are unsure of their own ability to provide care faced with an aging parent's diminishing mental capabilities.

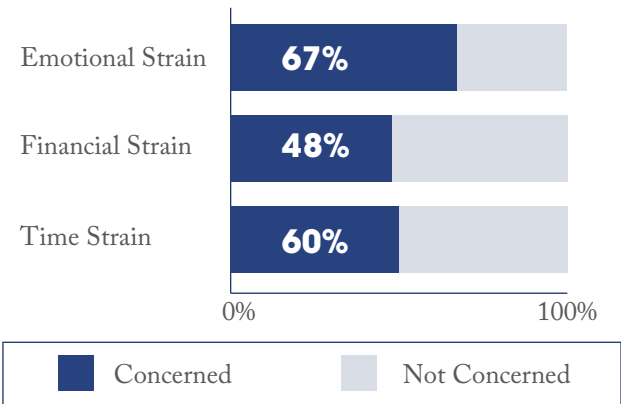
### Ability to Care for Aging Parents





At the same time that they worry about the impact aging will have on their parents, Florida adults also see potential impact on their own lives. Roughly half (48 percent) are concerned that the needs of an aging parent will create a financial strain, while 67 percent believe the parent’s needs could cause emotional strain in their own lives. Three in five (60 percent) fear they will not have enough time to meet the day-to-day needs of an aging parent.

Strain of Caring for Aging Parents



According to the Mason-Dixon poll, about three in four Florida adults with aging parents have had the difficult discussion that begins: “Mom (or Dad), how do we handle your care if you can no longer make decisions on your own?” This survey finding suggests that Florida’s long-standing reputation as a retirement haven has created a keener awareness on issues of aging, as it is significantly higher than the national average. According to a 2009 Pew Research survey, just 57 percent of older adults have had this type of conversation with their families.<sup>26</sup>

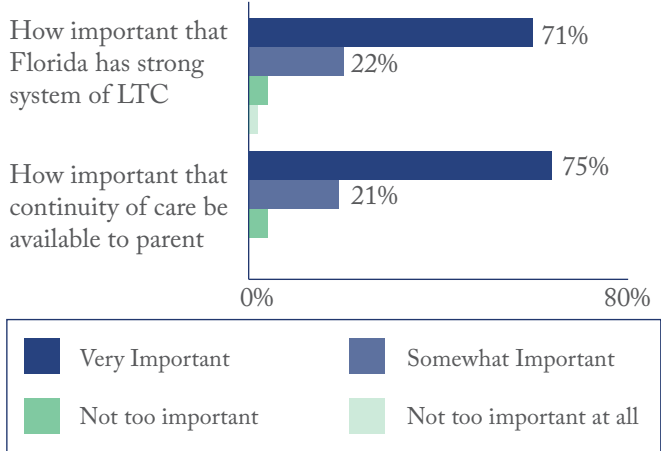
Another solid indicator that Floridians consider aging issues more than most Americans is this: About one in four Americans surveyed by Pew in 2014 considers the growing number of older people to be a problem,<sup>27</sup> a number that pales next to the 81 percent of respondents in the Mason-Dixon survey who consider “the growing number of older people in Florida” to be a challenge.



Only about one-third of respondents in the Florida survey reported being very confident of their ability to personally meet the needs of an aging parent, whether the parent lived independently or in the adult child’s home. Further, only 44 percent said they felt “very confident” in knowing where to turn for information or resources about aging.

These attitudes and concerns of adults with aging parents underscore the importance to Florida’s future of developing and maintaining outstanding aging resources that reflect a true commitment to caring and excellence. An overwhelming 93 percent of Mason-Dixon respondents said they consider it important for Florida to have a strong system of assisted living facilities and nursing homes to help those who are the most fragile and have the greatest needs. Another 96 percent said it is important to offer continuity of care – from home- and community-based services, to assisted living, to skilled nursing care, to hospice – available as parents age and their care needs become greater.

Importance of Aging Resources and Continuity of Care





# Policy Challenges

With a growing share of older residents in Florida, the need for coordinated long term care will constantly increase. Long term care encompasses a wide range of services, care venues and community supports, and through all of these it is a continuity of high-quality care that is the paramount goal for aging Floridians and those with disabilities.

Quality standards, enforcement, education and family engagement are all pieces of the puzzle. But there are other policy factors at play that should be addressed to give the long term care community the resources it needs to provide the best care for the people it serves.

Among these are policies that will ensure that the greatest possible funding is directed toward patients and family resources rather than at unnecessary bureaucracy and external costs. The following identifies some of the greatest challenges facing Florida's aging community in the years ahead.

## Shortage of Geriatric Specialists

Nationwide, older adults account for one-fourth of all physician visits, almost half of all hospital stays and about one-third of all prescriptions and physical therapy visits. Yet the health care workforce specializing in the unique needs of seniors is dwindling. By 2030, about 3.5 million additional elder care professionals will be needed to meet the needs

of aging Americans, but current trends indicate that the gap between the need and the workforce will only continue to expand.<sup>28</sup>

In 2010, some 55 percent of geriatric psychiatry and 44 percent of geriatric medicine residency slots went unfilled in the nation's medical schools – compared with just 2 percent vacancies in more popular fields such as pediatrics or general psychiatry. The geriatric workforce shortage is due, at least in part, to the fact that geriatricians are among the lowest-paid medical specialties.

Florida also faces a shortage of nurses experienced in caring for an increasingly elderly population. According to a January 2014 report from the Florida Center for Nursing,<sup>29</sup> one in seven Florida nurses works in a skilled nursing or hospice facility, yet skilled nursing facilities experience a 62.4 percent turnover rate in direct care RNs – the highest rate among six categories measured (also including hospitals, home health, public health, hospice and psychiatric).

At the start of 2014, Florida had an estimated statewide total of 9,111 vacant RN positions, with another 4,163 estimated new RN positions to be created. The report warns that it will be most difficult to fill positions requiring RNs with experience and/or advanced education, and vacancies and growth will be affected by the changing economy, reimbursement and care delivery models.

If this trend continues, before long Florida's growing population of elders will face very limited options when seeking the expertise of qualified medical personnel.

## Increasing Rates of Alzheimer's Disease and Related Dementias

The prevalence of Alzheimer's disease is on the rise, nationally and in Florida. An estimated 480,000 older Floridians live with Alzheimer's today, but by 2025 this figure is expected to jump to 720,000. Nationally, projections indicate that by the middle of the next decade, the United States will be home to 7.1 million people with Alzheimer's – a 40 percent increase from today.

Alzheimer's is now the sixth leading cause of death in the United States. One in three seniors dies having the disease, yet so far medical science has not been able to produce any disease-modifying treatments or cures. Alzheimer's disease is the No. 1 most costly condition in Medicare and Medicaid budgets, more costly to the nation than heart disease or cancer. Average Medicaid payments for people with Alzheimer's are at least 19 times greater than for individuals with other comorbid conditions.

### Alzheimer's: A Growing and Expensive Concern in Florida



In 2014, the Alzheimer's cost to Medicare nationwide will total at least \$113 billion, and to Medicaid \$37 billion. This does not take into account the \$36 billion burden imposed on families; the untold costs incurred by private insurers or charities; or the estimated \$220.2 billion value of unpaid care provided by families.<sup>30</sup>

Though more than 5 million Americans suffer from Alzheimer's, federal dollars spent on Alzheimer's research are miniscule relative to those spent in search of cures for other diseases. In 2011, the National Institutes of Health spent just \$448 million on Alzheimer's research, compared with \$32 billion on HIV/AIDS, which currently affects about 1.1 million Americans.

## Limited Transportation Options for Aging Residents

Aging in place is an ideal that many families embrace, but it is also one that comes with challenges. Families are constantly facing that moment where they must take away Mom's or Dad's car keys, taking away their older parent's main avenue of mobility. However, access to transit is severely lacking for most seniors around the nation – and certainly in Florida – leading to what has been dubbed the “mobility crisis” threatening the Baby Boom generation.<sup>31</sup>

Seniors who do not drive are forced to rely heavily on family and friends for even their most basic needs, yet many of these go unmet. A 2004 study found that seniors who no longer drive visit a doctor about 15 percent less often than their driving peers, they go out to eat or to shop 59 percent less often and they make 65 percent fewer trips to see friends or family.

Public transportation options are not picking up the slack. A case study of Jacksonville projected that by 2015, about 53 percent of urban seniors and 96 percent of suburban and rural seniors in and around the Northeast Florida community will experience poor access to public transportation.

## The Rise of Two-Career Families

For at least the past generation, social trends within American families have presented a growing challenge for those with aging parents. Between 1996 and 2006, the number of dual-income families increased by one third. By 2012, some 59 percent of American families with children had two working parents. Even if they don't have children, about 48 percent of American married couples both work. For about 40 percent of American households with children, mothers are either the sole or primary earner – the highest rate on record.

This social and economic trend has a direct impact on a family's interest or ability to provide care for aging parents in the home setting. Approximately 66 percent of family caregivers are female. Between 13 and 22 percent of American workers juggle a caregiving role with working, while 70 percent of working caregivers report having suffered employment-related difficulties because of these dual responsibilities. On average, family caregivers spend more than 20 hours per week providing care.<sup>32</sup>

## Increasing Litigation Costs

Despite the fact that Florida's skilled nursing facilities rank highly on quality measures relative to the rest of the nation, facilities in Florida spend dramatically more than those in other states defending lawsuits, many of which are excessive or frivolous. In 2014, Florida's long term care facilities will spend an average of \$5,380 per bed on litigation-related costs, resources that otherwise could be devoted to resident care or facility improvements. This figure is almost triple the national average of \$1,940. To a typical nursing facility with 100 residents, this means half a million dollars each year for litigation-related costs alone.<sup>33</sup>

Loopholes in Florida's tort laws have allowed trial attorneys to sue deep-pocket individuals who are associated with a long term care facility but have no direct involvement in actual day-to-day operations – people like investors and creditors. FHCA advocated for nursing home litigation reform during the 2014 legislative session, and lawmakers adopted historic legislation to close these loopholes. The beneficial impacts of this legislation may not be fully realized for several years.



## Insufficient Reimbursement Rates for Long Term Care

Over the past five years, Florida nursing facilities have experienced significant reductions in state Medicaid and federal Medicare funding, as a result of health care reform and regulatory requirements. Florida's Medicaid program is the primary payer for approximately 59 percent of residents in nursing facilities, with Medicare covering 21 percent and private or other sources covering the remaining 20 percent. More than \$135 million in nursing facility reductions cannot be recouped from federal payers, and Medicaid underfunds nursing facility care by almost \$21 per patient per day. Funding long term care at cost would ensure continuity of care for residents and would provide for dramatically improved staffing and care resources. Given the important link between high quality care and adequate reimbursement, continued advocacy for Medicaid funding is always a top legislative priority for FHCA.

**Medicaid Doesn't Pay the Cost of Care**

**Shortfall = \$21**  
per bed per day



## Medicaid Managed Care

Historically, government payers used the volume of services provided as the basis for payment to health care providers for care given within centers. The traditional fee-for-service approach to payment rewards providers who have higher costs and volumes of service without much attention to quality, resulting in steadily rising costs of care. However, policymakers are now focused on redesigning payment systems across the health care spectrum, including long term and post-acute care, to move away from this volume-based approach to one that ties financial incentives to outcomes or quality. This type of model is often referred to as a pay-for-performance or value-based purchasing arrangement.

In an effort to support this systematic shift to improving quality care Florida, like many states, has implemented a Medicaid managed care program. In 2011, the Florida Legislature agreed to overhaul the state's then-\$22 billion Medicaid program. Among the provisions was the establishment of a statewide, integrated managed care program for all covered Medicaid services, including long term care services. The new approach to long term managed care was fully implemented in 2013.

A major challenge for statewide implementation of managed long term care is the lack of available assisted living facilities, which are primarily privately funded. Nursing homes are increasingly becoming rehabilitative centers for shorter term, Medicare placements. As a result, two primary groups could become the long term care populations that will be served by Medicaid waivers: the traditional Medicaid population

with a high rate of Alzheimer's and related dementia, and the younger population with disabilities.

This program is still in its early stages, and many details remain to be determined. In the meantime, the Florida Health Care Association will continue to work with the Legislature and administrative agencies to ensure adequate payment structures, timely reimbursements, prevention of duplicate regulatory requirements and appropriate placement of elders to ensure that they are in the right place to serve their individual needs.

## Rising Death Rates From Falls Among Older Men and Women

Death rates from falls have risen sharply over the past 10 years, becoming the leading cause of fatal and nonfatal injuries among older adults. One out of three adults older than 65 will suffer a fall each year, resulting in direct medical costs of about \$30 billion annually.<sup>34</sup> In 2010, some 2.3 million seniors were treated in hospital emergency departments following a fall, and 21,700 died from injuries sustained in a fall.

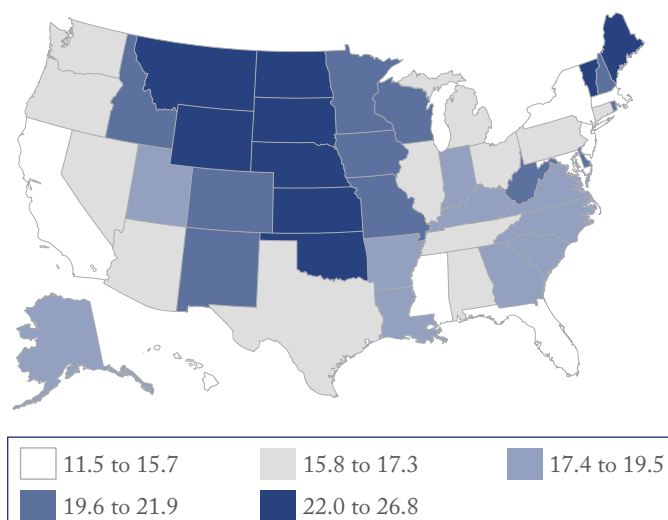
**Falls: The leading cause of injuries 65+**



In part, increased mortality from falls may be a consequence of medical advances that help older individuals live longer. Scientists have only recently begun closely studying fall prevention, and significant advances may not be seen for some time.

Residents of assisted living or skilled nursing facilities are twice as likely to fall as those living independently, most likely due to lower-body weakness common among seniors who live in nursing homes and other institutional care settings.<sup>35</sup> Florida, for its part, is well below the national average for fall-related injuries in nursing homes.<sup>36</sup>

**Percentage of Nursing Home Residents with a Recent Fall: United States, 2011**





# References:

- <sup>1</sup> Retooling for an Aging America: Building the Health Care Workforce. IOM.
- <sup>2</sup> 2014 Alzheimer's Disease Facts and Figures. Alzheimer's Association. [https://www.alz.org/downloads/Facts\\_Figures\\_2014.pdf](https://www.alz.org/downloads/Facts_Figures_2014.pdf)
- <sup>3</sup> Aging in Place, Stuck without Options: Fixing the Mobility Crisis Threatening the Baby Boom Generation. Transportation for America. <http://t4america.org/docs/SeniorsMobilityCrisis.pdf>
- <sup>4</sup> Falls Among Older Adults: An Overview. Centers for Disease Control and Prevention. <http://www.cdc.gov/homeandrecreationalsafety/falls/adultfalls.html>
- <sup>5</sup> February 23, 2014: The Day Florida Passes New York in Population. exMiami. <http://www.exmiami.org/index.php/february-23-2014-day-florida-passes-new-york-population/>
- <sup>6</sup> Age and Sex Composition: 2010. United States Census Bureau. <http://www.census.gov/prod/cen2010/briefs/c2010br-03.pdf>
- <sup>7</sup> Annual Estimates of the Resident Population for Selected Age Groups. United States Census Bureau. [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=PEP\\_2013\\_PEPAGESEX&prodType=table](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=PEP_2013_PEPAGESEX&prodType=table)
- <sup>8</sup> Age Dependency Ratios by State: 2000 and 2010. United States Census Bureau. <http://www.census.gov/compendia/statab/2012/tables/12s0017.pdf>
- <sup>9</sup> Florida Population by Age Group. The Florida Legislature Office of Economic and Demographic Research. [http://edr.state.fl.us/Content/population-demographics/data/Pop\\_Census\\_Day.pdf](http://edr.state.fl.us/Content/population-demographics/data/Pop_Census_Day.pdf)
- <sup>10</sup> Demographic Overview & Population Trends. The Florida Legislature Office of Economic and Demographic Research. [http://edr.state.fl.us/Content/presentations/population-demographics/DemographicTrends\\_11-6-13.pdf](http://edr.state.fl.us/Content/presentations/population-demographics/DemographicTrends_11-6-13.pdf)
- <sup>11</sup> Demographic Overview & Population Trends. The Florida Legislature Office of Economic and Demographic Research. [http://edr.state.fl.us/Content/presentations/population-demographics/DemographicTrends\\_11-6-13.pdf](http://edr.state.fl.us/Content/presentations/population-demographics/DemographicTrends_11-6-13.pdf)
- <sup>12</sup> Long-Term Care Services in the United States: 2013 Overview. National Center for Health Statistics.
- <sup>13</sup> The State Could Consider Several Options to Maximize Its Use of Funds for Medicaid Home and Community-Based Services. Office of Program Policy Analysis and Government Accountability. <http://www.oppaga.state.fl.us/MonitorDocs/Reports/pdf/1033rpt.pdf>
- <sup>14</sup> Department of Elder Affairs Medicaid Home and Community-Based Services. Office of Program Policy Analysis and Government Accountability. <http://www.oppaga.state.fl.us/profiles/5023/>
- <sup>15</sup> History of Aging. Florida Council on Aging. <http://www.fcoa.org/FCOA%20Aging%20History.pdf>
- <sup>16</sup> History of Aging. Florida Council on Aging. <http://www.fcoa.org/FCOA%20Aging%20History.pdf>
- <sup>17</sup> Average Nurse Hours per Resident Day in All Certified Nursing Facilities. The Henry J. Kaiser Family Foundation. <http://kff.org/other/state-indicator/nurse-hours-per-resident-day/>
- <sup>18</sup> The Nursing Home Diversion Program Has Successfully Delayed Nursing Home Entry. Office of Program Policy Analysis and Government Accountability. <http://www.oppaga.state.fl.us/MonitorDocs/Reports/pdf/0645rpt.pdf>
- <sup>19</sup> Economic Impact of Long Term Care Facilities: Florida. Florida Health Care Association. <http://www.fhca.org/images/uploads/pdf/Economic%20Impact%20of%20LTC%20Facilities%20in%20Florida%202011.pdf>
- <sup>20</sup> The Claude Pepper Report on Managed Long-Term Care in Florida. Cited an unpublished 2009 assessment by the University of South Florida, Florida Policy Exchange Center on Aging.
- <sup>21</sup> Nursing Home Compare. Center for Medicare and Medicaid Services. <http://www.medicare.gov/NHCompare>
- <sup>22</sup> Percent of Certified Nursing Facilities Receiving a Deficiency for Actual Harm or Jeopardy. The Henry J. Kaiser Family Foundation. <http://kff.org/other/state-indicator/of-facilities-w-serious-deficiencies/>
- <sup>23</sup> Best Nursing Homes by State. US News. <http://health.usnews.com/best-nursing-homes>
- <sup>24</sup> My InnerView. <http://www.myinnerview.com>
- <sup>25</sup> Improving Quality Proactively. American Health Care Association. [http://www.ahcancal.org/advocacy/issue\\_briefs/Issue%20Briefs/Readmissions\\_IB.pdf](http://www.ahcancal.org/advocacy/issue_briefs/Issue%20Briefs/Readmissions_IB.pdf)
- <sup>26</sup> Growing Old in America: Expectations vs. Reality. Pew Research Center Social & Demographic Trends. <http://www.pewsocialtrends.org/2009/06/29/growing-old-in-america-expectations-vs-reality/>
- <sup>27</sup> Attitudes about Aging: A Global Perspective. Pew Research, January 30, 2014.
- <sup>28</sup> Retooling for an Aging America: Building the Health Care Workforce. IOM.
- <sup>29</sup> Demand for Nurses in Florida: The 2013 Survey of Florida's Nurse Employers. Florida Center for Nursing. [http://www.flcenterfornursing.org/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core\\_Download&EntryId=656&PortalId=0&TabId=151](http://www.flcenterfornursing.org/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core_Download&EntryId=656&PortalId=0&TabId=151)
- <sup>30</sup> Alzheimer's Facts and Figures. Alzheimer's Association. [https://www.alz.org/alzheimers\\_disease\\_facts\\_and\\_figures.asp](https://www.alz.org/alzheimers_disease_facts_and_figures.asp)
- <sup>31</sup> Aging in Place, Stuck without Options: Fixing the Mobility Crisis Threatening the Baby Boom Generation. Transportation for America. <http://t4america.org/docs/SeniorsMobilityCrisis.pdf>
- <sup>32</sup> [https://www.caregiver.org/caregiver/jsp/content\\_node.jsp?nodeid=439](https://www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=439)
- <sup>33</sup> 2013 Long Term Care General Liability and Professional Liability Actuarial Analysis. Aon. [http://www.aon.com/risk-services/thought-leadership/reports-pubs\\_2013-long-term-care-benchmarking-report.jsp](http://www.aon.com/risk-services/thought-leadership/reports-pubs_2013-long-term-care-benchmarking-report.jsp)
- <sup>34</sup> Falls Among Older Adults: An Overview. Centers for Disease Control and Prevention. <http://www.cdc.gov/homeandrecreationalsafety/falls/adultfalls.html>
- <sup>35</sup> Fatal Falls. Herald-Tribune Media Group. <http://www.heraldtribune.com/article/20140102/ARCHIVES/401021048/-1/todayspaper?p=6&tc=pg>
- <sup>36</sup> Nursing Home Data Compendium 2013 Edition. Centers for Medicare & Medicaid Services. [http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/downloads/nursinghomedatacompendium\\_508.pdf](http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/downloads/nursinghomedatacompendium_508.pdf)



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As we commemorate  
Florida Health Care Association's  
60th Anniversary, the association  
remembers its humble beginnings,  
builds on its outstanding past and  
celebrates a brilliant future.

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