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Maryland must not turn its back on its senior citizens

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It's not a sexy issue such as gay marriage or illegal immigration, yet the importance of what we do - or don't do - regarding the health and housing needs of our seniors may have more economic, physical and moral relevance for families than any other problem before us.

Let's face it, Americans simply don't plan for old age - either individually or as a society. We focus on youth; envy and sex lurk behind our every advertised need.

The media, with their focus on the scandalous and the sweet, don't help much. Coverage of senior care means, more often than not, a story about something bad happening at a nursing home. Scary stuff, but not indicative of the thankless care thousands provide our families across the state every day. Or we see cute video clips of seniors when they reach 100 with little mention of the daily lives preceding that century mark.

Many politicians ignore senior issues. They are aided by those among us who equate senior care with "nursing home" - and assume "it won't happen to me."

But we can't ignore the facts. An increasing number of us will be forced to live with disabilities. Senior care is expensive. By 2030, the number of Marylanders age 65 or older will have doubled. Most assisted-living and nursing options cost more than \$60,000 a year - unaffordable to most. Long-term care insurance is one answer, but just 10 percent nationally have purchased it.

What should elected officials be doing to deal with this looming crisis?

For starters, state officials, led by the governor, should overhaul the Medicaid Home and Community-Based Services Waiver program, which allows seniors in assisted living to enroll in Medicaid rather than be forced into a nursing home to gain Medicaid eligibility. The savings for taxpayers are enormous; instead of paying \$5,000 per month for nursing home care, the state, with a waiver, can pay just \$1,600 per month - and the seniors often can stay in their own homes.

Instead, Maryland maintains a 20-year waiting list of more than 7,000 people and reimburses less than half of the daily nursing care per diem of \$193 per day to assisted-living providers -an amount that doesn't even meet expenses. The state should increase the reimbursement rate and fully fund this program. Everybody wins.

It's really all about the money. Since gaining office, Maryland Gov. Robert L. Ehrlich Jr. has taken \$100 million in Medicaid dollars out of the state budget. Providing health and housing services is a cost-based system. Controlling Medicaid costs shouldn't mean reducing provider rates and not reimbursing the cost of care provided - but that's what we are doing.

Controlling costs also has a lot to do with personal responsibility. People should save more toward covering their own care to the extent they are able. We need to encourage that habit with new tax credits, savings plans, insurance products and other incentives. Maryland should stop looking at senior care as an annual budgetary event and plan for it as a lifetime responsibility. Medicaid won't just step in and pay for long-term care services.

We also need action on legislation that would streamline Medicaid eligibility by updating Maryland's computer systems.

Collectively, we have a lousy record when it comes to investing in older people. If there is a bright spot, it is that Maryland is a hot and growing "active adult" market. Nearly 30 such communities are under construction in the Mid-Atlantic corridor. Builders are way ahead when it comes to addressing the needs of seniors. Unfortunately, it isn't enough.

Not so long ago, older Americans faced bleak prospects as old age and misery often met on the same path. Those days may be returning if we don't act responsibly. We need political leaders to champion our concerns and act rather than react to problems.

Improving the lives of Maryland's seniors may not be sexy, but it's the right thing to do.

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