

Voters Speak Out on Long-Term Care

The National Commission for Quality Long-Term Care commissioned this national survey about long-term care. The purpose of the poll is to explore voters' opinions about long-term care, bring the voice of the voters into the discussion about solutions, and call upon the Presidential campaigns to address this issue. The survey of 1,000 registered voters was conducted by telephone September 6 – 11, 2007.

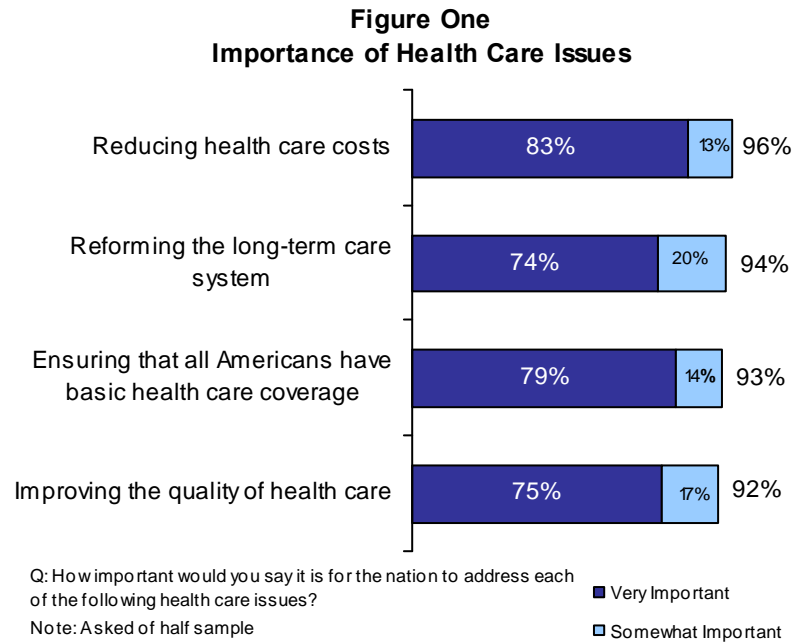
The findings show:

- Voters recognize the need to reform the long-term care system, and most feel the issue has gone largely unaddressed by the presidential candidates.
- Most voters support the creation of a voluntary contribution system for financing long-term care. Almost two in three say they would participate in such a system, even at the cost of \$50 a month.
- The majority of voters have some personal experience with long-term care. Six in ten have experience having a relative in the long-term care system, including a quarter who currently have a relative receiving long-term care.

Selected findings follow.

Voters are concerned about the looming crisis in long-term care.

As Figure One shows, over nine in ten voters (94%) feel reforming the long-term care system is important, including three quarters (74%) who feel it is *very* important. Indeed, voters consider reforming the long-term care system as or almost as important as health care issues, such as reducing cost and covering the uninsured, which policymakers, the press and presidential candidates have focused on to a far greater extent. Majorities of Democrats (99%), Independents (95%) and Republicans (91%) consider reforming the long-term care system important.



Voters believe we are obligated to provide quality long-term care.

Eight in ten voters (85%) agree that as a nation we have an obligation to provide quality long-term care services to the elderly; two thirds (67%) agree *strongly*. Majorities of Democrats (94%), Independents (84%) and Republicans (74%) agree that as a nation we have this obligation.

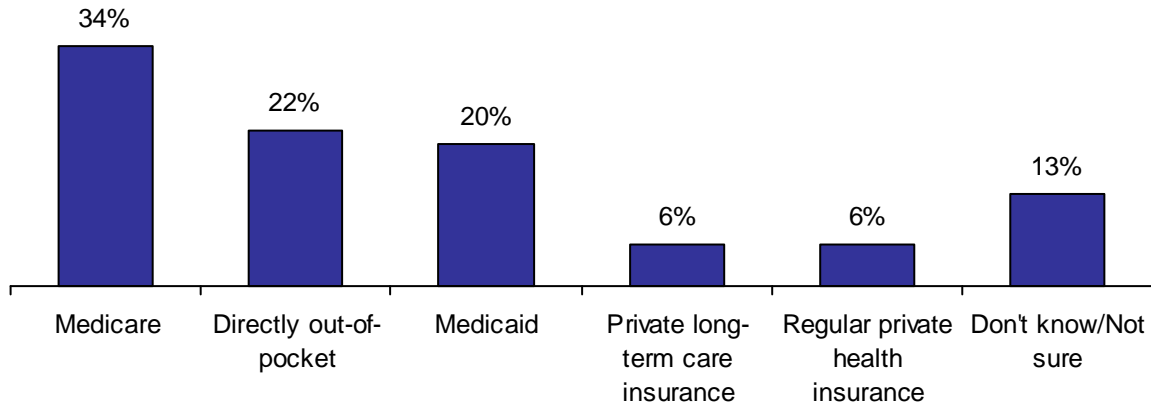
Voters agree that long-term care has not been a focus of the presidential campaign.

Most voters say that, despite their concern about the issue, the presidential candidates are not addressing long-term care. Of those following the campaign closely enough to answer, seven in ten (69%) say that the candidates have talked very little (54%) or not at all (15%) about this issue.

Findings suggest confusion about how long term care is financed.

Voters were asked how most of the long-term care in this country is financed. As Figure Two shows, a third (34%) believe most long-term care is paid for by Medicare, more than believe it is financed by any other source. One in five (20%) believe most long-term care is paid for by Medicaid, and about the same amount (22%) believe most is paid for out-of-pocket by individuals and families. Thirteen percent say they do not know how most long-term care is financed under the current system.

Figure Two
How Voters Think Long-Term Care is Financed



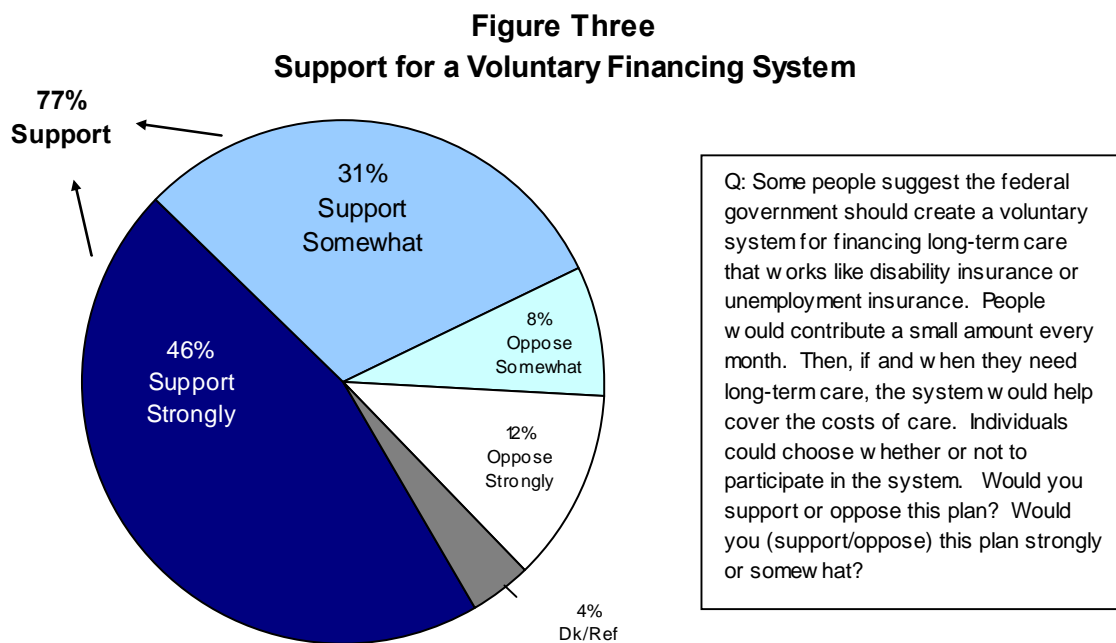
Q: As far as you know, how is most long-term care paid for in the United States under the current long-term health care system? Would you say it is paid for by regular, private health insurance which people get through employers or buy on their own, by Medicare . the government health insurance program for people age 65 and older and for individuals with disabilities, by Medicaid (Medi-Cal) . the government health program for lower-income individuals, by long-term care insurance that people purchase and pay for on their own, or directly out-of-pocket by patients and their families?

In reality, Medicaid is the nation's largest source of financing for long-term care, accounting for 49% of long-term care spending in 2004. Medicare financed 19% of long-term care spending in 2004. The remaining care was paid for out-of-pocket by individuals and families (19%), by private health and long-term care insurance (7%), and through other public payers and private payers (6%).¹

¹ These figures are from an analysis conducted by Georgetown University's Long-Term Care Financing Project and are based on 2004 data on a) expenditures of nursing homes and home health care provided by free-standing facilities, b) Medicare and Medicaid expenditures for nursing homes and home health care provided by hospital-based facilities, and c) Medicaid expenditures for home and community based waiver services. Note that this is a somewhat limited definition of long term care; this definition is more limited than the definition used in this survey.

There is widespread support for a voluntary contribution system for financing long-term care.

As Figure Three shows, the majority of voters (77%) support the creation of a voluntary long-term care financing system in which people would contribute a small amount each month and then, if and when they need long-term care, the system would help cover the cost. Almost half (46%) *strongly* support this idea. This idea appeals to those on both sides of the aisle. Eight in ten Democrats (80%) and Independents (80%) support such a system, as do three-quarters (75%) of Republicans.



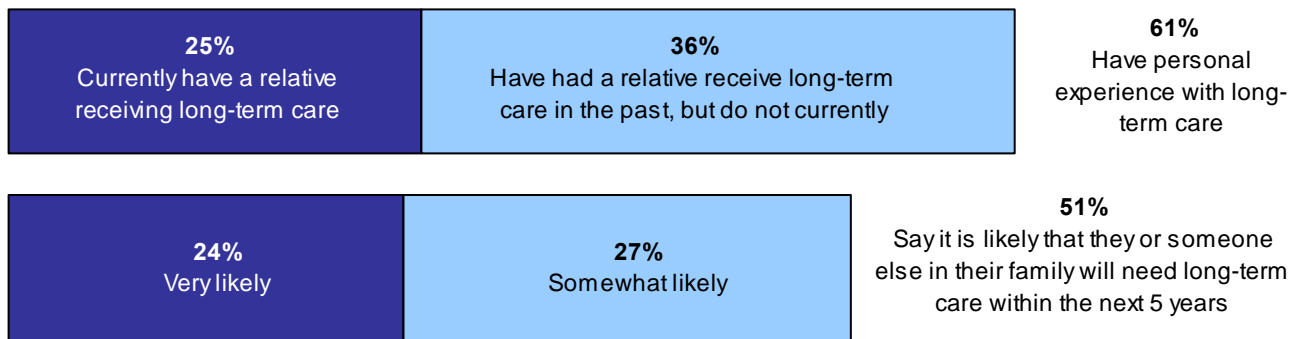
Almost two-thirds of voters (64%) say they would be likely to participate in such a program if the monthly contribution were \$50. Even if the monthly payment were \$100, over half (54%) say they would take part.

The majority of voters have personal experience with long-term care.

Long-term care is a personal issue for many voters. As Figure Four shows, six in ten (61%) have experience having a relative in the long-term care system, including a quarter (25%) of Americans who have a relative who is currently receiving long-term care.

Half the voters surveyed (51%) believe it is likely that they or someone else in their family will need long-term care services within the next five years, including six in ten (61%) voters age 65 and older and over half (53%) of those 35 to 64. Even among voters 18 to 34, four in ten (38%) expect a member of their family will need long term care by 2012.

Figure Four
Long-Term Care: Experience and Expectations



Q: Do you have a spouse, parent, in-law, grandparent, or other relative who now receives long-term care?

Q: Have you ever had a spouse, parent, in-law, grandparent, or other relative receive long-term care?

Q: How likely is it that you or someone in your family will need long-term care within the next 5 years?

A Note on Caregivers

Of those Americans with a relative currently receiving long-term care, almost six in ten (57%) play a caregiving role, either providing care themselves (37%), arranging for or overseeing care (50%), helping to finance their relative's care (27%), or some combination of the three. Those who play this sort of active role – caregivers – make up 14% of the voting population. In other words, one in seven voters acts as a caregiver for a relative in long-term care.

Caregiving affects many aspects of the caregiver's life. Two-thirds of working caregivers (67%) say they have had to miss work as a result of helping to care for their relative. Over one in three caregivers (36%) say playing a caregiving role has had a negative impact on their own health, including one in ten (11%) who say caregiving has had a major negative impact.

Methodology

This survey was designed and analyzed by the National Commission for Quality Long-Term Care and researchers at the Glover Park Group. Interviews were conducted between September 6 and 11, 2007, among a nationally representative random sample of 1,000 respondents 18 years of age and older who identified themselves as registered voters. For results based on the total sample, one can say with 95% confidence that the error attributable to sampling is plus or minus 3.1 percentage points. In addition to sampling error, one should bear in mind that question wording and practical difficulties in conducting surveys can introduce error into the findings of opinion polls.

ABOUT THE COMMISSION

The National Commission for Quality Long-Term Care is a non-partisan, independent body charged with improving long-term care in America. Appointed commissioners reflect a diversity of experience in government, academia, quality improvement and long-term care.

The Commission, which is overseen by The New School, grew out of an industry-led quality initiative called *Quality First, A Covenant for Healthy, Affordable, and Ethical Long Term Care*. In 2004, the three leading industry organizations called for an independent commission to:

- Evaluate the quality of long-term care in America;
- Identify factors influencing the ability to improve quality; and
- Recommend national strategies for sustainable quality improvement.

Funding for the Commission's work is provided by the Alliance for Quality Nursing Home Care, the American Association of Homes and Services for the Aging, and the American Health Care Association.