"Don't Send Me to the Nursing Home!"
Why More Americans Today Prefer Private Home Care

viprivatecare.com   866.863.6800   info@viprivatecare.com
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VIPriavteCare | New York City
DON’T SEND ME TO THE NURSING HOME!

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SUMMARY
The state of healthcare in the United States is rapidly changing. Although we have access to the best technology and medicine, it comes at a high cost for those who are uninsured or underinsured. Elderly and those who require daily care can access the services they need, but compared to health care worldwide, our medical services in nursing homes and assisted living facilities underperform and have worse medical benchmarks. Before the Affordable Care Act, the government has chosen to ignore people who cannot afford to pay for medical care. With the looming repeal of the APA, without a significant plan to replace it having been laid out, there needs to be a greater focus on alternative methods of paying for health care. The medical industry also must figure out how to deliver higher quality health services to an aging population, that focuses on the health and wellbeing of their patients.

More America’s than ever are at retirement age and there’s a huge demand for health services that isn’t being met. Many senior citizens are fearful of going to assisted living facilities or nursing homes, where they won’t be as comfortable aging. There’s also the constant risk of selecting a facility that’s understaffed. Unfortunately, for elder abuse at nursing facilities is a reality, and one that no elderly person requiring care should ever experience. It’s no wonder that today’s seniors favor premium services like at home care.

Previously, home care only included non-medical services. Today, hospitals and insurers view home care as one of the best ways to improve patient health while meeting senior’s goals of aging at home. Because of technological improvements such as telemedicine; domiciliary care and clinical home care patients receive a high level of care and greater control over their treatment options.

Care in the home increases the likelihood that a senior improves their health, and it is the most efficient form of health care available. This paper analyzes why a focus on at home health and alternative methods of paying for services are important for today’s seniors. This comes at a time when the need and desire for a higher standard of care is necessary. It’ll also outline the benefits of paying for your care out of pocket, versus relying on the government or insurance to provide medical services for you. Hopefully this report will influence you to prepare for your future, or the future care needs of your loved one in the best way possible.

INTRODUCTION
Today’s seniors are turning away from traditional methods of health care such as assisting living centers and skilled nursing homes, in favor of receiving in home care, for good reason. Nursing homes don’t have the best track records at providing safe senior care like home care does. All too often we hear reports of malnourishment, difficult staff, or improper care of the elderly. It’s estimated that as many as half of the deaths in nursing homes are wrongful death. Why would anyone want to risk their last moments of life, instead of deciding to age at the comfort of their own home?

There’s also a financial factor to move away from traditional methods of health care, since high priced nursing homes and assisted living centers aren’t economically able to provide a reliable level of care. If a senior requires less than 40 hours a week of at home care, it’s more affordable than assisted living.
Of course, finances aren’t the only consideration while deciding how to spend the remainder of your life, but it is an important factor, that far too few people consider.

A recent AARP study found that 89 percent of seniors prefer at home care. Although this would mean heavily modifying a home and purchasing costly medical equipment in the past, new technology makes at home care affordable for this and future generations. Even if the senior’s family members aren’t available to provide 24/7 family care, people are beginning to realize that at home care is one of the best options for senior care available. Non-medical and medical in-home care is becoming less expensive, as both public and private insurers are beginning to look closely at the value that home care provides.

Unfortunately, seniors and their families usually conduct research on senior care at the last minute. It’s easy to look for living centers, without even considering the value of home care. Most families won’t even discuss senior care until a crisis has developed. This puts our seniors at risk of receiving costly, and potentially life-threatening care. Therefore, there has to be a greater focus placed on educating the public about their home care options, and why it’s becoming the recommended health care delivery service of choice for seniors and those who need long-term care.

CHALLENGES

Over 13 million people will use paid long-term care services this year. Two-thirds of those who need long-term care are elderly, while one-third are under the age of 64. This amount is expected to double by 2050, as the population of elderly US citizens grows steadily. There are also 65.7 million aged, ill, or disabled people receiving informal or family care. Many have chronic and communicable diseases such as cardiovascular disease, hypertension, and dementia. These widespread problems put a greater demand on public health systems.

As the old age population grows, there will be significant gaps in the health care industry. Without a greater focus on saving for health and long-term services and an increased dependence on elderly health care government services, by 2030 many retirees will not be able to afford nursing home stays or health services. The Affordable Care Act’s Community Living Assistance Services and Supports (CLASS) Act and the Center for Medicare and Medicaid Services (CMS) address this problem by offering a choice to select the type of service a patient receives, and gives three hours of home-based care per day to enrollees.

Although CLASS and CMS will increase the number of seniors that opt to avoid skilled nursing facilities, there’s still a risk that both elderly needing government assistance and wealthy citizens needing health care may be overwhelmed when it’s time to pay for the services. 30% of wealthy U.S. citizens polled by the U.S. Trust do not feel financially prepared for health care costs and nearly half have not planned for the potential need of long-term care. A good portion of health services will fall on families of elderly citizens, unless we find an appropriate health care model that takes care of everyone.

The current health care system utilizes a volume-based fee-for-service payment model. This model incentivizes offering services to as many people as possible, but it fails to prevent disease. Unfortunately, the fee-for-service model also fails to reward health providers for reaching their goals of improving health outcomes. Whereas some health care organizations are interested in switching to a new payment model for health services, the existing structure is profitable, and there’s no agreement
on how health providers can measure the dollar amount of services based on cost, quality, and outcome measures.

Overall, the health care industry is presented with a unique set of challenges. American Citizens face the risk of losing Social Security in 2033, the potential repeal of Obamacare could leave millions uninsured, and Medicare and Medicaid may also phase out in the years ahead. With 82% of long-term care spending coming from the Medicare and Medicaid programs, most U.S. citizens must find alternative ways to pay for their health care. There are many significant hurdles to tackle to guarantee that all people receive the level of care required. Fortunately, new technological advances and upcoming changes to the home health care business model can address these challenges, before they grow out of control.

**WHY FACILITY CARE IS NOT THE SOLUTION**

For elderly, especially those who need long-term care, there's no place like home. 90% of long-term care elderly patients would prefer to receive care in their home. It’s offers comfort and convenience for both seniors, and those taking care of them. With today’s technological improvements and the proven benefits of home care, there's no reason seniors should be forced to use traditional methods of health care. Our system needs to work around the needs of the patient, instead of the patient working around the needs of the organization.

At home care is necessary for many reasons. First, it reduces expensive transportation costs. For the elderly, especially those with dementia or Alzheimer's, transportation is risky and stress inducing. Second, there’s less risk of getting illness because of medical examination or treatment. Unfortunately, the medical treatment that seniors seek at U.S. hospitals often harms them instead. Bad hospital care contributes to nearly 440,000 deaths annually, per the Journal of Patient Safety. The risk of dying because of a mistake in the home care setting is greatly reduced, as is the likelihood of medical errors going unnoticed for long periods of time.

Third, there’s a greater reduction in mortality at six months from selecting home care instead of hospital care. This is partially since your home is safer than a hospital, but it’s also due to having a better patient experience at home. When there’s someone assisting you with your day-to-day tasks and giving you one-on-one attention, it’s empowering. With home care, there’s no chance of delaying a patient’s discharge, which can result in the patient acquiring additional health problems. Instead, the patient is in a comfortable location that leads to greater life satisfaction.

Because of these benefits, there’s a current trend toward providing home and community-based services. Even though home based care has many benefits, it currently makes up less than 20% of long-term care expenditures for seniors. Much of our current health spending goes towards nursing homes, intermediate care facilities, and skilled nursing facilities. The question we must ask ourselves is whether facility care provides the best level of service for the billions of dollars American’s spend at care facilities each year. Average expenses in skilled nursing homes is four times costlier than expenditures an individual would receive in the community, begging the question of whether we can spend health care dollars more efficiently.

Consider these 2004 statistics:

- The average daily rate for a skilled nursing facility private room was $192
• The annual cost for a skilled nursing facility was $70,080
• A semi-private room cost $61,685 annually
• A home health aide cost $18.12 an hour

Health care expenditures are projected to increase three-fold by 2040, and one in four people over the age of 45 are not prepared financially to pay for long-term care indefinitely. Home care minimizes the amount people pay for 24-hour care, while decreasing mortality rates and leading to less malpractice accidents. A health report published in Health Affairs suggests that home care patients reduce their cost of care by nearly 20% compared to similar inpatients, with equal or improved health outcomes. Home care patients, especially those who are affluent, have a greater chance of receiving high level care that they otherwise won’t receive in health care facilities.

RECEIVING A HIGHER LEVEL OF CARE IN THE HOME

Long-Term Condition Home Treatment
Diabetes, hypertension, congestive heart failure, chronic obstructive pulmonary disease, fracture prevention, arthritis, Crohn’s disease, and psoriasis are just a few of the long-term chronic conditions that can be treated from home. These conditions impact senior citizens’ lives and require adequate administration of medication to relieve symptoms. With the home care model, medical professionals can help administer drugs to patients, and help patients meet their day-to-day needs.

Most long-term conditions cause pain, loss of mobility, reduce independence, and bring premature mortality. Home care improves patient outcomes for long-term conditions, and increases the one-on-one attention that each patient receives. It’s very easy to monitor the benefits of treatment when a patient receives home care. It also minimizes travel time to the hospital and reduces medical costs.

Because some medical treatments require keeping medications at certain temperatures, and administering the drugs at certain times, there’s often nervousness about taking and storing medicine. This problem is removed when a patient receives home care, as delivery drivers bring medication to the patient’s home, and a nurse stores and administers all medication. In time, patients will learn to take control of their own medicine administration and increase the average time that patient’s stay on their treatment course.

Enhanced Care
Purchasing enhanced care gives you access to your own physician, or medical staff, whenever you need them. To qualify for enhanced care, you pay an annual retainer for doctors’ services, plus any service fees. This gives you access to a nurse, doctors, psychiatrists, and a wide variety of medical professionals who respond to house calls within two hours. The two aims of enhanced care are to prevent the need of admission to a hospital, and to reduce the need for visiting the emergency room for non-urgent care.

MDVIP
The MDVIP wellness program gives you 24/7 access to your primary care doctor. You’re also able to schedule same-day or next-day appointments with your physician. One of the greatest benefits of being a member of MDVIP is that you receive a professional health and wellness plan that focuses on disease prevention. It’s a great option for at home treatment patients who want to truly know their physician and access them quickly.
Membership with Premium Health Care Companies
There are several exclusive medical service companies that offer high-end medical services to patients 24/7. One example is PinnacleCare, a private health firm that helps patients with critical diagnosis access leading doctors from around the world. Through PinnacleCare, you can confirm your diagnosis with a professional in any specific field of study, access physicians you otherwise wouldn’t be able to contact easily, and build a treatment plan with specialists who have treated patients for similar medical conditions.

Daily Living Assistance
There are a wide range of services you receive from certified care aides or certified nursing assistants including:

- Respite care
- Health care and rehabilitation
- Transportation
- Home maintenance
- Overnight companionship
- Program planning
- Assistance with personal care
- Assistance with daily activities

The care you receive and the amount of time home care staff treat you depends on your need and level of independence. Psychological assessment, wound care, pain care, disease and medication management, and education are common services to receive from traditional home medical care.

VALUE OF PRIVATE PAY HOME CARE
When it comes to how you pay for care and the value you receive, there are both pros and cons to paying privately. The most obvious downside to paying out-of-pocket for your care is that it’s an immediate expense. However, as someone who can afford to privately pay, it’s generally better to do so. There are many reasons why this is the case, including enhanced privacy, uninterrupted health service, the freedom to choose what kind of service you receive, an increased chance of receiving efficient treatment, and even reduced service costs.

Private Care and Enhanced Privacy
When you use private or public insurance, third parties receive information about your medical details. When you use private pay, no one else receives information about treatments you receive. Confidentiality and privacy are very important when it comes to medical care, and paying privately will ensure that unwarranted parties don’t receive information they don’t need to know.

Uninterrupted Health Service
Insurers have patients undergo a health diagnoses before paying for service. If you have a preexisting condition, there’s always a chance that your insurance plan won’t go through, or you may pay more expensive premiums. When you use private pay, you’re able to get treatment for any condition, while reducing any diagnosis stigma. If you use private insurance and a diagnosis is placed on your medical record, it can affect any future insurance policies. Through private pay, this isn’t the case. You’ll still
pay the same amount for live insurance and term disability insurance, without worrying that your health service will be interrupted.

**The Freedom to Choose Your Medical Service**

Unfortunately, it you have private or public medical insurance, there’s always a risk that the service you need is not covered by your insurer. This puts you at greater risk of receiving subpar medical attention. When you use private pay, you can pay for any services you want. You'll be able to afford the duration, frequency, and even length of medical care sessions, without worrying whether your insurance will cover the bill. You'll also be able to receive specialty home care services that people who rely solely on insurance cannot. When you pay for your treatment, you'll also benefit from motivation to make the most of your treatment, that people who receive free treatment don’t receive. This makes treatment even more effective for people who pay out-of-pocket.

**CONCLUSION**

There are a wide range of services that you can receive when you choose home care instead of facility care. In addition to providing a greater variety of unique services, home care also allows you to save time and money during treatment, depending on the level of services you need. There’s a great chance of receiving equal or better outcomes while using home care, and the services you decide on are customizable and offer greater flexibility in treatment options. With home care, you only pay for the services you need, and you can select the quality and quantity of the care you receive.

As prices for health care become more expensive, and there’s increasing uncertainty about whether public insurance will remain a priority in the United States, US citizens will need to find alternative ways to pay for medical care. There are many benefits to paying out of pocket, instead of relying on private or public insurance, that improve your health outcomes, and focus on providing you with optimal care. Even if you don’t have any concerns about medical care in the future, this is something you need to consider and plan for today. It will only become more important into the future, as health care prices rise, and there’s a gap in the amount of people offering medical services to those who cannot adequately pay.

In the coming years, home care is going to be one of the primary ways of receiving care. It increases comfortability, improves your chance of improving your health, and costs significantly less than facility care. It’s one form of health care than cannot be overlooked and because of new and immersing technologies, satisfaction from home care will only continue to improve. With increased improvement, people will be increasingly more interested in being discharged home to receive home care, instead of opting to live in a nursing home.

If you, or your loved one have not considered how you’re going to pay for medical care in the future, now’s the time to learn more about private pay. Private pay is the only way to guarantee you get the level of care, and the amount of treatment options that you require, if you need it. With insurance premiums going up, the potential repeal of the ACA, and future uncertainty, it’s the best way to secure a solid future for yourself and your loved ones. Private pay gives you the freedom to age comfortably in the home, and search for the best treatment alternatives nationwide and abroad. Take some time to predict your future health care needs and plan for your old age, so that health care isn’t in the hands of a for profit corporation or the government.