

# Service Delivery to Rural Elderly: Creating and Using a System of Care

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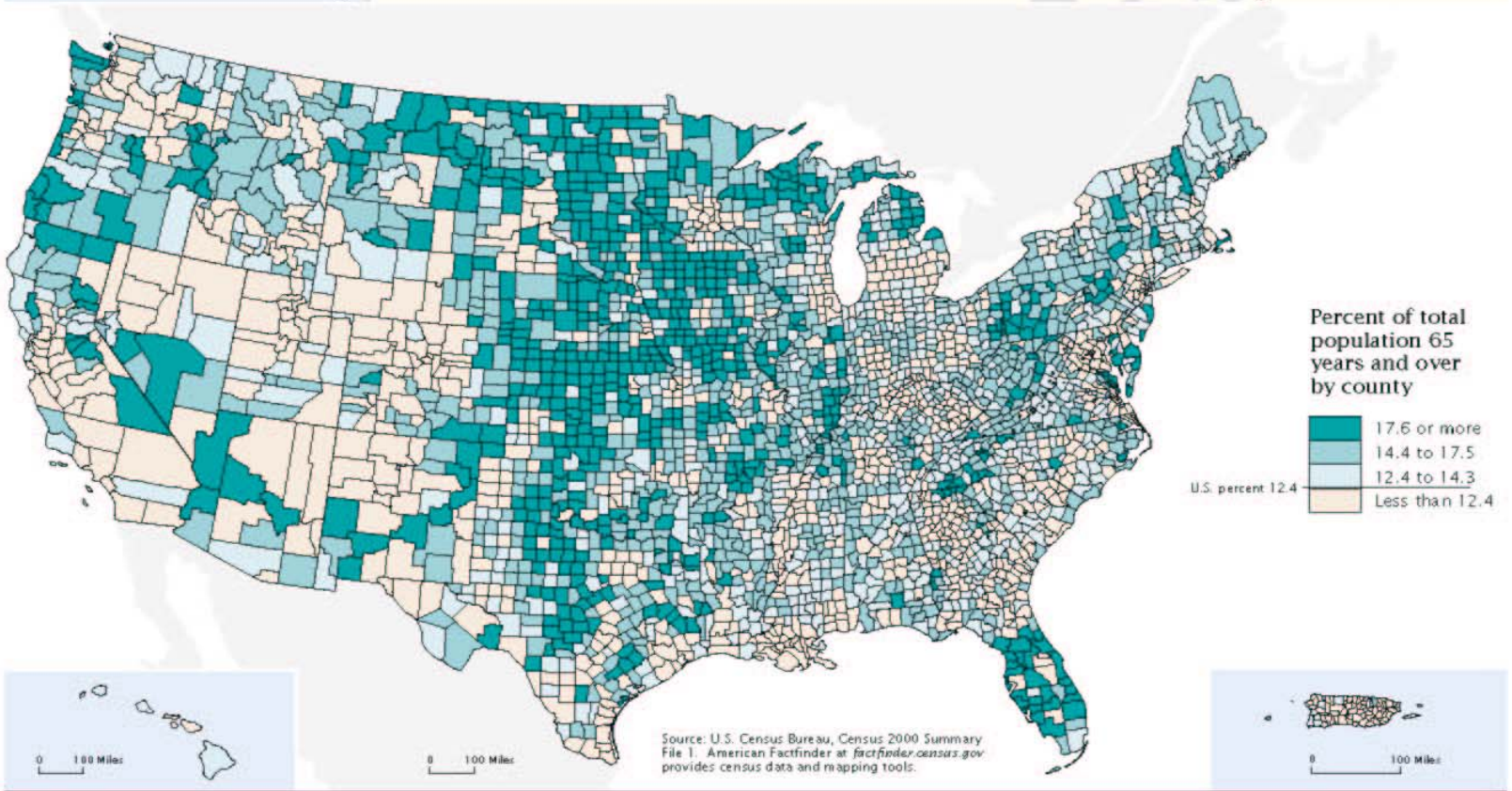
# Will Present:

- Policy Questions
- Answers
- Practices
- Policy Implications

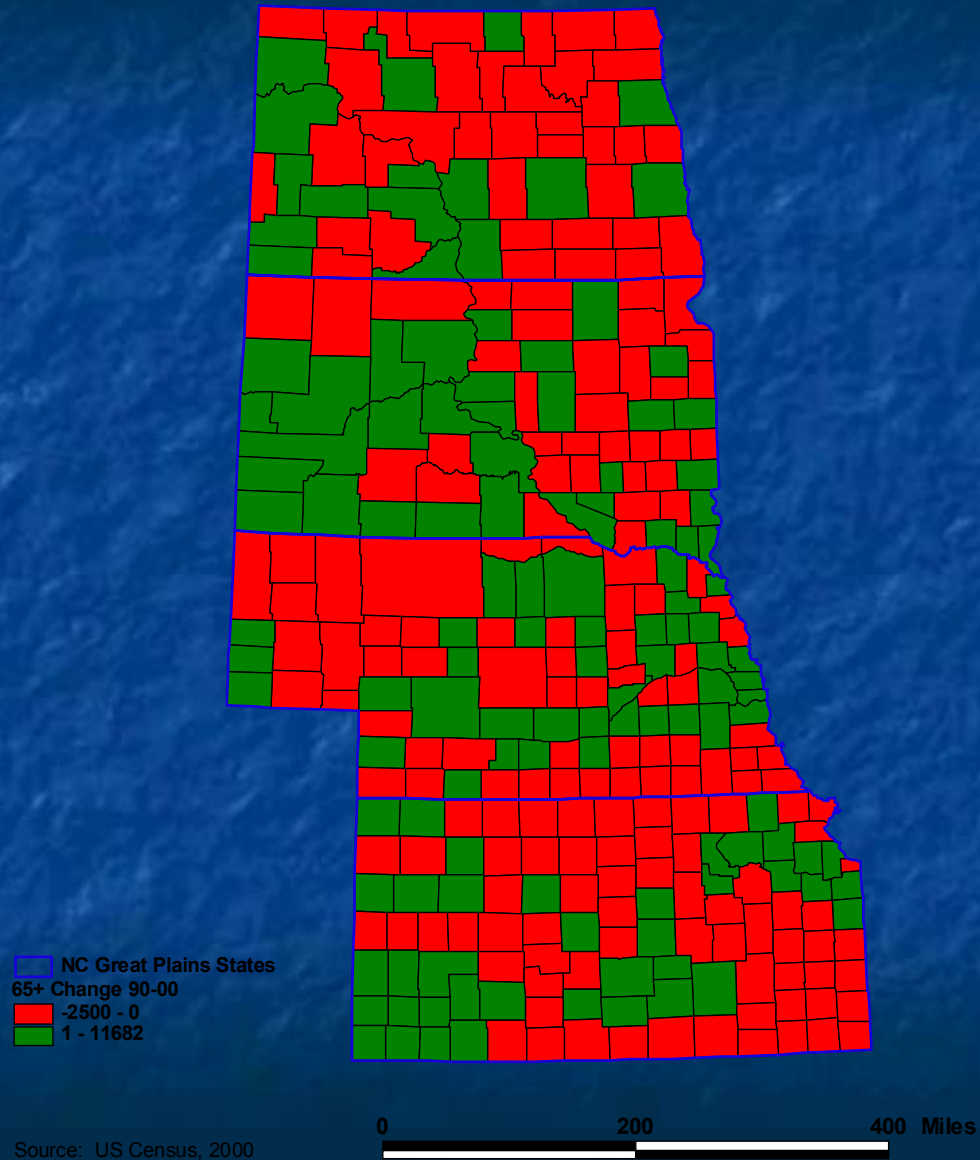
# Policy Questions:

1. What are the implications of the changing composition of the rural population?

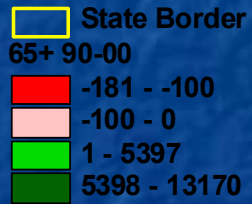
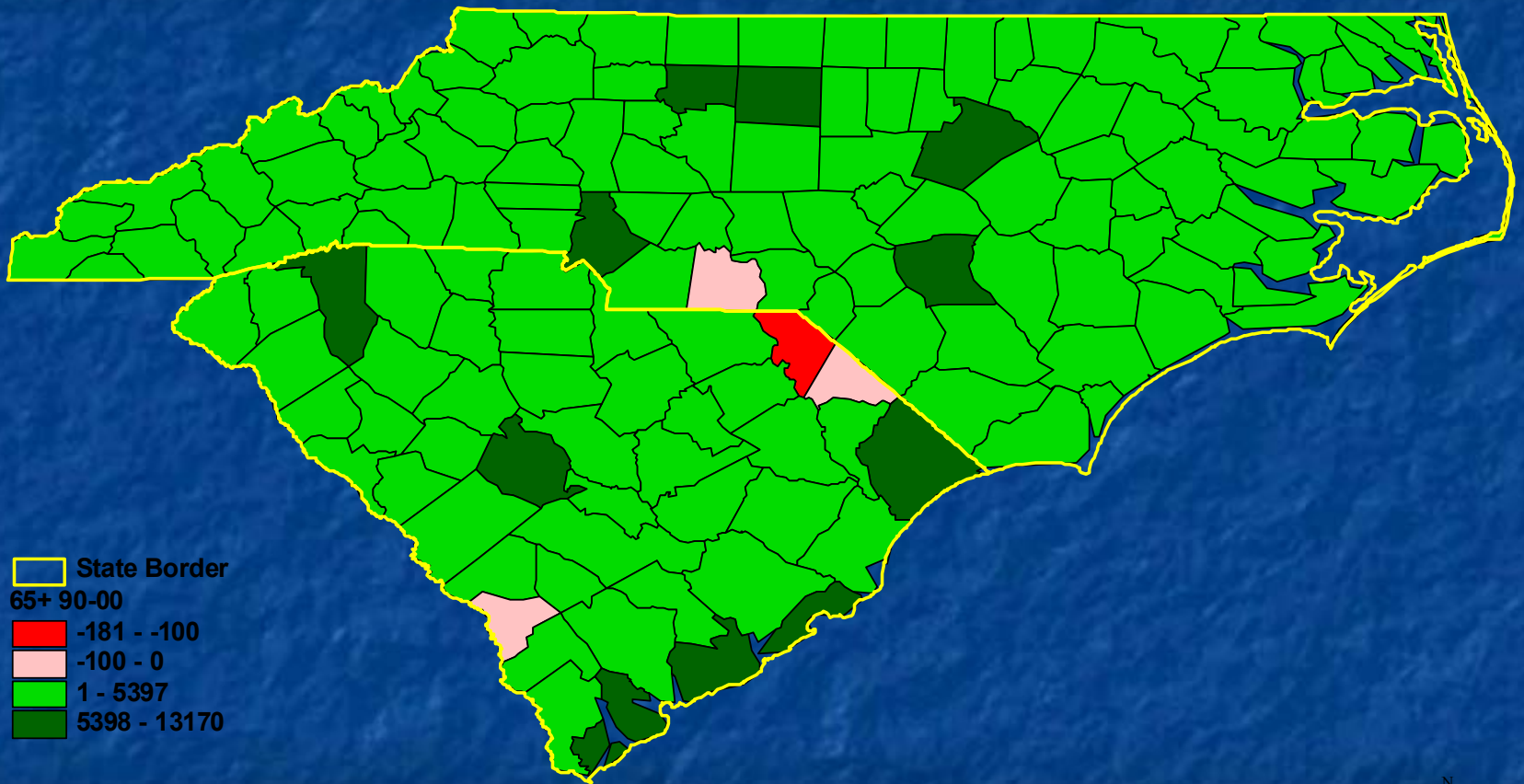




# Change in Age 65 and Older Cohort (1990 - 2000)

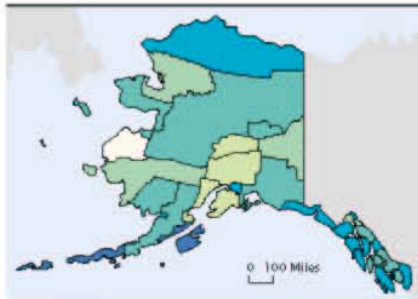


# Change in Age 65+ Cohort (1990 - 2000)

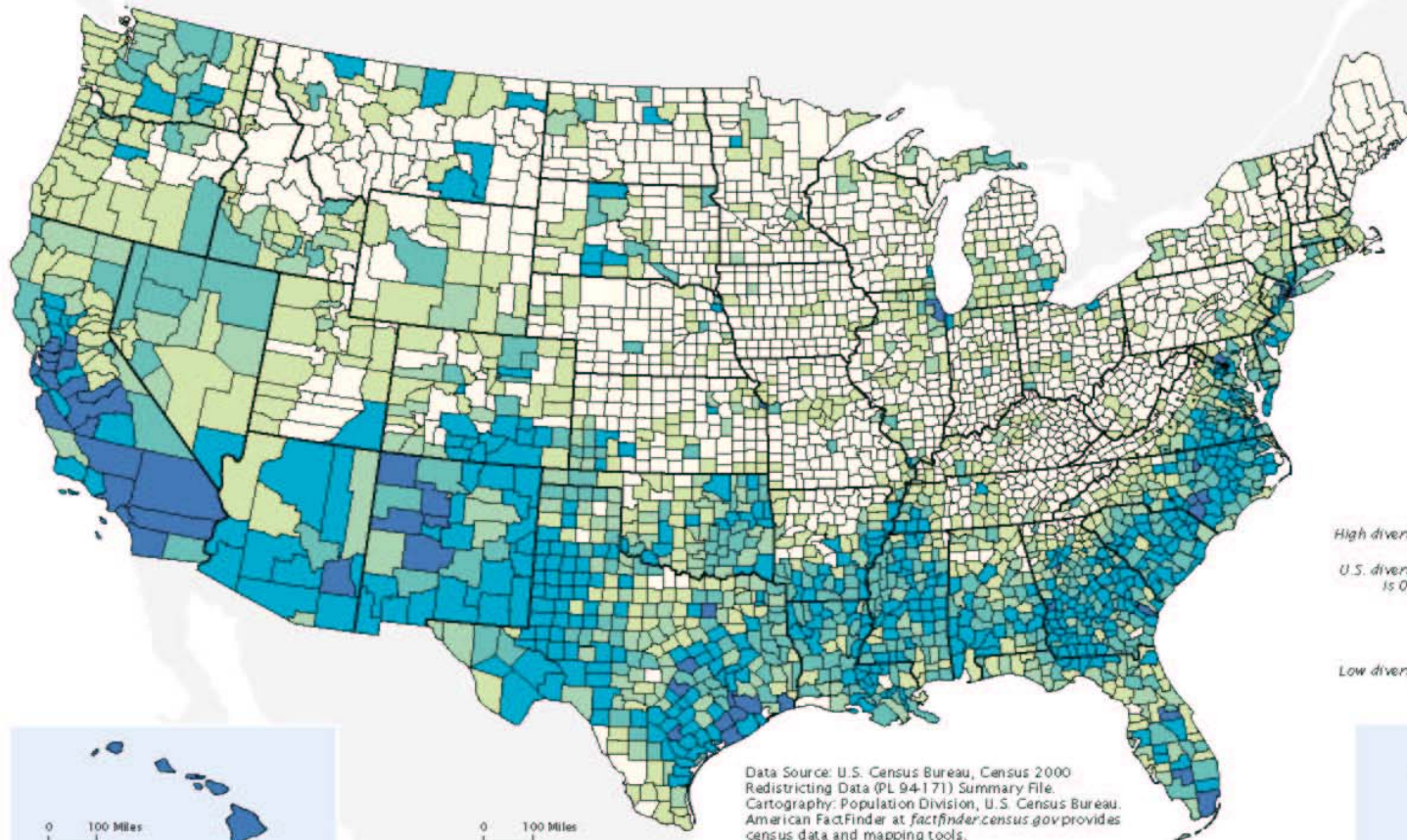
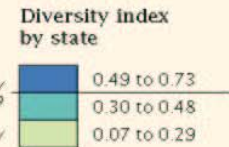
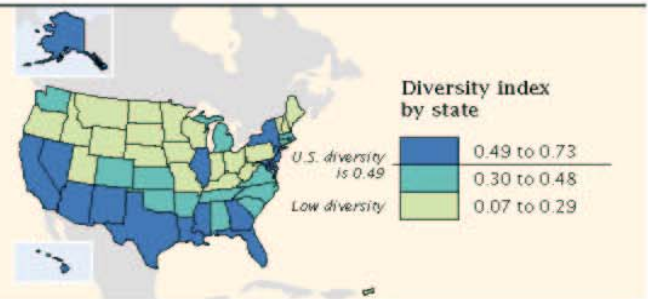


Source: US Census, 2000

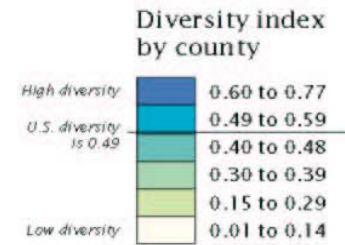




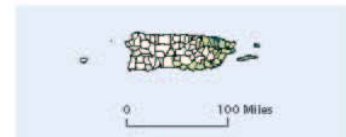
## Diversity, 2000 Hispanic or Latino Origin and All Races



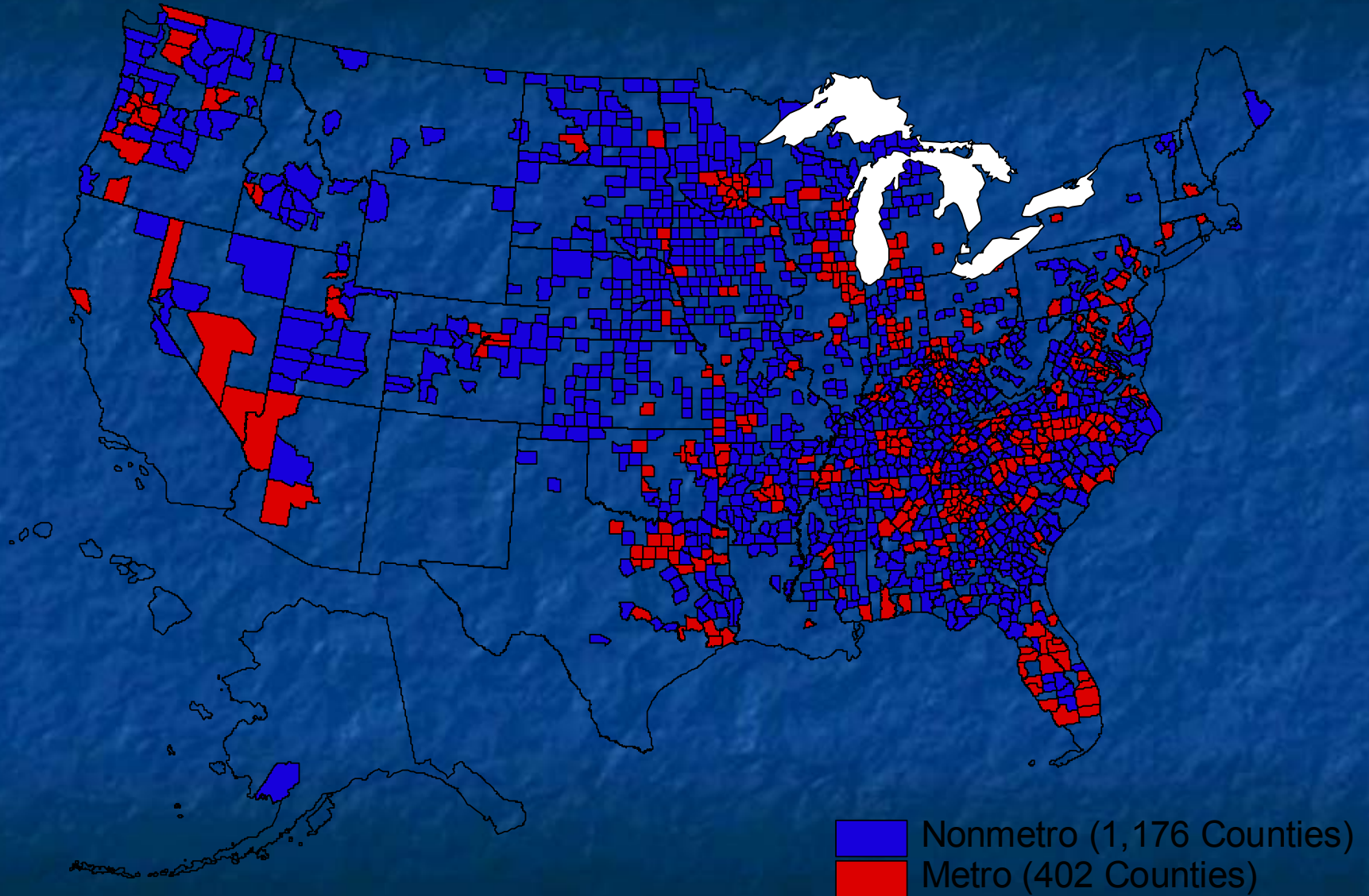
The diversity index reports the percentage of times two randomly selected people would differ by race/ethnicity. Working with percents expressed as ratios (e.g., 63 percent = 0.63), the index is calculated in three steps: A. Square the percent for each group; B. Sum the squares; and C. Subtract the sum from 1.00. Eight groups were used for the index: 1. White, not Hispanic; 2. Black or African American; 3. American Indian and Alaska Native (AIAN); 4. Asian; 5. Native Hawaiian and Other Pacific Islander (NHOPi); 6. Two or more races, not Hispanic; 7. Some other race, not Hispanic; and 8. Hispanic or Latino. People indicating Hispanic origin who also indicated Black, AIAN, Asian, or NHOPi were counted only in their race group (0.5 percent of the population). They were not included in the Hispanic group.



Data Source: U.S. Census Bureau, Census 2000 Redistricting Data (PL 94-171) Summary File.  
Cartography: Population Division, U.S. Census Bureau.  
American FactFinder at [factfinder.census.gov](http://factfinder.census.gov) provides census data and mapping tools.



# Counties with Increase in Hispanic Population of 100 Percent or More, 1990-2000



Source: U.S. Census Bureau  
Map Prepared by RUPRI

03/15/2003



# Policy Questions:

2. Given the anticipated demand for services from the elderly, what is the most cost-effective means of responding to that demand?

# Cost pressures in Medicare and Medicaid:

- Home Health
- Skilled Nursing Care
- Home and Community Based Services

# Policy Questions:

3. What level of government should respond to the demand, and how?



- National: Medicare payment policies, demonstration projects
- State: Medicaid payment policies, waivers, special programs such as grants to convert to assisted living
- Local: Support for community based efforts
- Not-for-profits: Development of community based efforts

# Policy Answers:

1. Need to plan for the population changes

- Building capacity
- Generating the workforce



# Policy Answers

## 2. Assessment of options

# The evaluation component of demonstration and evaluation

- Assessment of needs among the elderly
- Assessment of capacity
- Cost-effective ways of generating capacity
- Public-private partnerships will be crucial

# Policy Answers

3. We will be using devolution, locally-based approaches



- Expanded waiver authority in existing Medicaid
- Interest in increased role for private plans in public programs
- Medicare initiatives defined by states and regions
- Services are locally-based

# Practices:

- Colleagues in this symposium presenting specifics
- Working through rural health networks
- Diffusion of innovation
- Models that Work
- Continued research years after the initial project

# Policy Implications:

- Align incentives
  - changes in practice
  - changes in payment
- Promote innovation
  - demonstration projects sponsored by the federal government
  - Regulatory flexibility



# Policy Implications:

- Adopt new philosophies
  - caretaker to health promotion
  - centralized organizations to amoebic collaboratives
  - public entities to public-private partnerships
- New populations as a positive
  - sustaining quality of life is an economic gain
  - training new minorities
  - workforce from the elderly

# RUPRI Center for Rural Health Policy Analysis



[www.rupri.org/healthpolicy](http://www.rupri.org/healthpolicy)