

No cuts to Medi-Cal long-term care as budget process begins

With the Legislature back in session and the state's annual budget-making process under way, long-term care providers are watching closely to make sure that services for people on Medi-Cal are protected.

Some two-thirds of nursing-facility residents and virtually all clients of intermediate-care facilities for people with developmental disabilities depend on Medi-Cal. Even slight reductions in state – and federal – funding for this program (called Medicaid in other states) could have a dramatic effect on their quality of life.

The good news is that California's political leaders appear committed to preserving and even improving Medi-Cal long-term care.

Study finds most seniors miss out on benefits of Internet access

A few years ago, *Families & Friends Bulletin* ran an encouraging article about elderly long-term care residents broadening their world by learning to use computers and the Internet.

Among other things, the story outlined a heartening trend in which people in nursing facilities and residential-care facilities for the elderly were able to stay in touch with old friends and distant relatives by e-mail.

But unfortunately, new research from the Kaiser Family Foundation finds that most Americans over 65 have never been online – and that means they are not able to take advantage of increasingly important Internet resources for making informed decisions about health and health-care options.

Even slight reductions in Medi-Cal long-term care could have a dramatic effect on services

In his state budget proposal for the 2005-06 fiscal year, released on Jan. 10, Gov. Arnold Schwarzenegger outlined sweeping reforms designed to save the state money. But to the enormous relief of caregivers, he proposed no significant cuts in Medi-Cal long-term care funding.

With the state facing a deficit estimated at more than \$9 billion, there is still cause for concern. For example, the governor did propose funding cuts in such areas as cost-of-living increases for the aged and disabled and wages for in-home care workers.

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Over all, less than a third of Americans over 65 use the Internet, and among seniors with low income or low education, that number drops even further.

“We know that the Internet can be a great health tool for seniors, but the majority are lower-income, less well educated and not online,” said Drew Altman, president of Kaiser Family Foundation. “It's time for a national discussion on how to get seniors online.”

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Myths and realities
about life in a
nursing facility**

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But so far, Gov. Schwarzenegger has avoided proposing any cuts to Medi-Cal nursing facilities and other long-term care facilities and has continued his support for a “redesign” of Medi-Cal that could save money while improving care and services.

Medi-Cal ‘redesign’

The Medi-Cal redesign, an idea which has been under consideration since Gov. Gray Davis was in office, could expand some services, such as those for the blind and disabled, and could fundamentally improve the way long-term care facilities are funded for Medi-Cal residents and clients.

The Medi-Cal redesign is a process in which the members of CAHF – the California Association of Health Facilities – play a key role as stakeholders. Representatives of the Association are taking part in meetings, providing expert testimony and helping with the complicated number-crunching that go into the development of a state budget.

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The survey also found that the next age group – Americans between the ages of 50 and 64 – are much more familiar with the Internet. For example, while only 21 percent of people 65 or older have gone online to look for health information, 53 percent of people age 50 to 64 have done so.

Of course, everyone’s needs and interests differ. But seniors who do not make use of the Internet can miss out on a lot.

The Kaiser study found that among those seniors who do go online, about a third say they consider e-mail and the Internet “an important part of your life that they wouldn’t want to do without.” More than half the survey participants who use e-mail said it makes it “a lot” easier for them to stay in touch with family and friends.

Among seniors who do use the Internet, the survey found that prescription drugs top the list of health-care topics researched. Other popular health-related searches include nutrition, exercise or weight issues, cancer, heart disease and arthritis.

Federal matching funds

Easily overlooked is the fact that an increase in state spending on Medi-Cal actually brings in additional dollars in the form of federal matching funds. Considering the enormous cost of health care, that difference can have a major impact on reducing the state deficit.

The annual budget-making process is long. Following the governor’s proposal this month, both houses of the Legislature will hammer out a plan that won’t be completed until next summer.

Along the way, hard decisions will have to be made. But CAHF will remain steadfast in advocating for long-term care Medi-Cal recipients, and in future editions of *Families & Friends Bulletin*, we will keep you informed of progress.

Details about Gov. Schwarzenegger’s 2005-06 budget proposal are posted on the Internet at www.dof.ca.gov, the Web site of the state Department of Finance.

Some online seniors said they have used the Internet to follow news coverage of health policy issues or to look for information about health providers.

Computers and the Internet can be a great combination for helping people stay in touch and for getting health-care information. On the back cover of this *Families & Friends Bulletin*, you’ll find some of the Web site addresses, or URLs, that CAHF considers especially useful.

*We want to hear
from you*

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Living in a nursing facility: Myths and realities

Many myths or misconceptions persist about nursing-facility life. So, understandably, some people are apprehensive about a move from their own home to a nursing facility. People do not know what to expect and worry about what they believe is relinquishing control over their lives.

Long-term care providers understand these concerns and want residents and their families to know the difference between the myths and the realities of life in a nursing facility.

Myth: A nursing facility is like a hospital

• **Reality:** A nursing facility is not a hospital, although many people enter a nursing facility after a hospital stay and tend to think of the nursing facility as an extension of hospital care.

However, a nursing facility is much different. Medical, rehabilitative and nursing care is provided as needed by health-care professionals and dedicated caregivers. Yet at the same time, nursing facilities try to be homes – where people can feel comfortable, find familiar faces and continue life’s activities appropriate to their age and capabilities.

Unlike hospitals, nursing facilities do not have restrictive visiting hours. Family members and friends are encouraged to visit. Whenever possible, residents eat in dining rooms rather than in their rooms. Various activities and outings are offered each day to stimulate and entertain residents mentally, physically and socially.

Myth: Nursing-facility residents are confused

• **Reality:** Most people slow down physically as they age and perhaps get easily tired. Some may slow down mentally as well. In fact, many people enter a nursing facility, in part, because poor memory makes caring for themselves difficult or impossible.

However, with adequate nutrition, exercise, social stimulation and properly controlled medication, memory problems often can be improved. It is important to take into consideration that a nursing facility has professional caregivers who are extraordinarily capable of interacting with the elderly or persons with a disability in a variety of situations.

It is true that a large number of nursing-facility residents have Alzheimer’s disease, an irreversible disorder that causes progressive mental difficulties. In many cases, Alzheimer’s residents live in distinct units where they can be among people having the same limitations and receive the specialized care they require in a secure setting.

Myth: There’s no privacy in a nursing facility

• **Reality:** Nursing facilities must strike a balance between providing security and adequate supervision while respecting a person’s privacy. Common areas in nursing facilities tend to be open, while resident rooms are considered private. Staff members respect resident privacy by being courteous and by knocking before entering the room.

Myth: Nursing-facility residents never leave

• **Reality:** A primary goal of the nursing-facility staff is to rehabilitate residents so that they can return home or to an assisted-living setting. Health permitting, those who cannot return home permanently may make short visits to home or family without losing their nursing-facility bed.

Myth: Husbands and wives must live apart in a nursing facility

• **Reality:** This is simply not true. Many couples enter nursing facilities together and may share a room if they so choose. Some couples have even met at the nursing facility and decided to marry. Staff members respect the privacy of couples living in nursing facilities.

Myth: Nursing facility residents are not visited regularly by family and friends

• **Reality:** In some cases this is true even though the facility staff does everything possible to encourage visitation. Staff members often become surrogate family members and friends to residents. However, as hard as they try, the staff cannot fully offer the same social and psychological support as friends and family. Staff members recognize this and try to encourage visits and to make visitors feel welcome. Many facilities encourage and facilitate communication via e-mail and the Internet.



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Using the Internet

As you'll read on Page 1 of this *Families & Friends Bulletin*, a new study has found that most senior citizens are not using the Internet – and that means they are missing out on the valuable health-care information available online.

Here are a few of the Internet Web sites (including our own) that we here at CAHF think are important for long-term care consumers. Throughout 2005 we will try to review and pass on information about other useful Web sites.

The goal is to help you make the best health-care decisions – and to make sense out of the often confusing world of health-care policy, regulations and politics.

- California Association of Health Facilities – www.cahf.org
- California Nursing Home Search – www.calnhs.org
- Federal Nursing Home Compare – www.medicare.gov/NHCompare/home.asp
- Medicare – www.medicare.gov
- Federal Centers for Medicare & Medicaid Services (CMS) – www.cms.gov
- The Council on Quality and Leadership in Supports for People with Disabilities – www.thecouncil.org
- NAMI California (National Alliance for the Mentally Ill) – www.namicalifornia.org
- American College of Health Care Administrators – www.achca.org

