

SENIORS FIRST

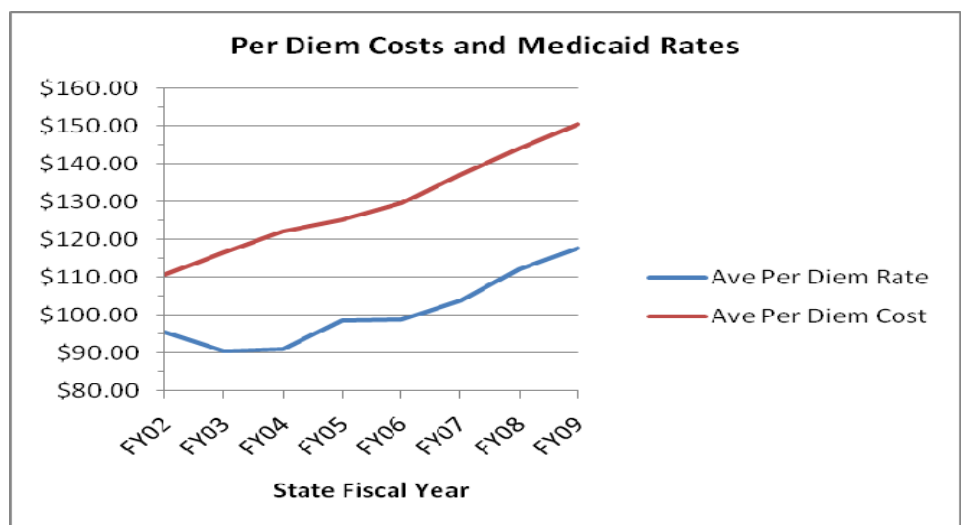


The Changing Face of Long Term Care

2009 – Issue 3

Daily Medicaid Rates Don't Cover Ever-Rising Costs

- ✓ Over the past three years, the Illinois legislature has been faithful in continuing its commitment to the five-year phase-in of the resident-centered MDS reimbursement system. We thank Illinois legislators for their ongoing dedication to quality care for Illinois seniors.
- ✓ We need to continue the fourth, phased-in installment of the groundbreaking, resident-centered MDS Medicaid reimbursement system at a cost of \$90 million (\$36 million GRF).
- ✓ The MDS reimbursement system has been extremely successful in enhancing resident health, independence and well being. We have made great advances in providing cutting edge health services to Illinois' elderly citizens. Illinois needs to build upon its track record of success.



Over the past three years, the legislature has courageously committed itself to a five-year phase-in of a new kind of nursing facility care in Illinois – short-term rehabilitative treatment that results in 80 percent of all discharges in FY 08 going home.

But despite the Medicaid increases toward short-term restorative clinical care through the MDS system, that is only part of the story.

Residents still need to be fed, recognizing the special dietary needs of diabetic, cardiac, and dementia care residents which have risen 8.04 percent in the past two years. Residents still need light and electricity and to be kept warm in the winter and cool in the summer, despite rising utility costs of 15.06 percent in the past two years.

Residents still need to be kept safe from fire and disasters despite constantly changing, unfunded and mandated building codes,

and despite maintenance and repair costs of 13.18 percent in the past two years.

And healthcare workers who care for our seniors deserve fair wages. Support for wages has not been updated since 1999 in the Medicaid reimbursement system, despite an actual and deserved 41.4 percent increase in wages.

MDS clinical reform tells only part of the story. Residents will only be secure in the care they deserve when both the 21st century short term rehabilitative clinical costs under MDS are covered along with the support cost needs of food, utilities, safety and healthcare wages are also covered.

Without that, we are only covering half of the rising cost of having our seniors lead an independent, healthy lifestyle in the community.