Navigating the Future with Confidence

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Care Management Innovations
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Well Researched Megatrends, Cross-Cutting Business Applications

Demographics/Relevance
Technology
Workforce
Funding/Financing

1. Extensive Readings
2. Interviews, Site Visits, Webinars, More Readings
3. White Papers/Predictions
4. Cross-cutting Business Applications (5 Years), Business Plans
5. Annual Review/Course Correction

2015-2030
Abramson Hospice

Abramson Residence
(270 LTC Nursing Home Beds)

Birnhak Transitional Care
(54 Beds)

Mildred Shor Inn
(46 Market Rate PC & 2 IL Units)

Remote Health Monitoring

Outpatient Service
Renal Dialysis
Rehab Services

Medical Adult Day Services

Abramson Home Care

Bundled Services

Web-based Navigation

Counseling for Caregivers

Primary Care/House Calls

Abramson Care Advisor
(Info & Referral/Geriatric Care Management)

Research

Care Transitions

Primary Care
People generally go in the direction you point them. If you point your Board to the future, they will focus on the future.

Dean West
Association Laboratory
Global Predictions from Research, Next 10 Years

- No cure for Alzheimer’s Disease
- Home-based services and retail health
- Significantly more elders with chronic care needs
- Generational wealth transfer but fewer assets for elders on average
- Technology-dependent lives, personalized medicine
- Partnerships with strange bedfellows, competition from multiple other sectors
- The end of volume-based third-party payment
Demographics/Relevance

- Quantified population by age cohort in market - focus on the 80+ and Jewish population

- By county,
  - projected income levels
  - live-alones
  - chronic disease/conditions incidence, co-morbidities

- Old-old living at home and family caregiver availability

- Targeted locations of elders who need and can afford healthcare/supportive services
The U.S. population ages 80 and older will nearly triple between 2010 and 2050; the number of people ages 90 and older will quadruple.

**U.S. population ages 65 and older, 2010-2050**

- **Age 90+**: 40.3 million (2010), 56.0 million (2020), 72.8 million (2030), 79.7 million (2040), 83.7 million (2050)
- **Age 80-89**: 9.4 million (2010), 12.4 million (2020), 16.1 million (2030), 22.1 million (2040), 22.9 million (2050)
- **Age 70-79**: 16.6 million (2010), 24.8 million (2020), 33.2 million (2030), 34.0 million (2040), 32.7 million (2050)
- **Age 65-69**: 1.9 million (2010), 2.8 million (2020), 3.3 million (2030), 5.6 million (2040), 8.0 million (2050)

Demographics/Relevance Predictions 2015-2020

- Volume in market who need/can afford home care
  - 19% increase in old-old
  - Quantified number with income levels of $75,000+
  - Significant increase in chronic diseases = lifestyles + elder volumes
  - Greater percentage of elders at home
    - Fewer move to senior living: older, more medically complex, fewer assets
  - Comorbidities require more home health care (house calls), not just supportive services
Demographics/Relevance
Predictions 2021-2025

- Greater market for home care (health and supportive)
  - Government payment
  - Disease-specific advocacy groups
  - Increase in old-old (33% between 2020 and 2030)

- Services tailored to greater diversity (LGBT, non-Caucasians)

- Lower LTC occupancy means at least 40% fewer nursing home beds needed for LTC in Pennsylvania
• Home, Wearable, Mobile and Telemedicine Technologies
  • Remote patient monitoring
  • Medication optimization
  • Assistive technology
  • Remote training and supervision
  • Technology supported disease management
  • Telemedicine (diagnostics and interventions)
  • Cognitive fitness and assessment
  • Social networking

• Genomics, Personalized Medicine and Biomedical Technology Advances

• Health Information Technologies, EHRs, Data Analytics and Big Data
Technology Predictions 2015-2020

- Wearable's become medical grade, tele-monitoring by large monitoring centers, telemedicine common and reimbursed

- Big data, predictive analytics begin to govern care resources for targeted populations; data sharing among providers cumbersome but required for payment
• Personal genomic information available, but few providers can use

• High tech-high touch strongly desired
Technology Predictions 2021-2025

- Implanted sensors alert caregiver of health problems
- Universal smart chips with all personal health information

- Personalized medicine via genomics; no cure for Alzheimer’s but targeted drug therapy to defer decline

- Gamification = consumer engagement results in deferral of onset of chronic diseases for pre-old and young-old; redesigns rehabilitation
Work Force: Predictions for Shortages

2015-2020
- Physician, therapist, pharmacist shortages (offset some by NPs, PAs), but not as acute for nursing; major issue will be direct care workers
- Special training in chronic disease management/dementia care needed (not served by medical homes)

2021-2025
- Quantified significant shortages in licensed personnel and direct care workers; salary pressures
- New roles for pharmacists

Direct Care Worker Shortages

By 2020: Need additional 1.6 million direct care workers

Number of women aged 25-54 entering the workforce between 2010 and 2020 is only 612,000
Workforce: Predictions for Diversity in 2025

- 5 generations
- >50% non-Caucasian
- 75% Millennials

Unions?
Workforce: Predictions for Technology

- **2015-2020**
  - Technology training
  - Compliance activities
  - No reduction in workforce

- **2021-2015**
  - Integrated EHR = team-based care models
  - Less skilled workers duties formerly only be professionals
  - New job categories based on technologies
  - Assistive devices allow workers to remain in workforce longer
Funding/Financing Predictions: Medicare and Medicaid 2015-2020

- Medicare/managed care payments tied to quality and efficiency outcomes (CMS, ACOs, MCOs, Bundlers)
- Medicare managed care at 35%
- naviHealth now, health systems later
- Post-acute bundled by 2020; likely share in savings
- Hospital mergers and closures
  - Declining Medicare revenues per admission; must increase volumes
- Medicaid mostly managed care – at first, no decrease in per diems
Funding/Financing Predictions: Medicare and Medicaid 2021-2025

- Fee-for-volume payment disappears; transition to capitated rates
- Payment tied to population health outcomes and EBOS required
- Strong growth in home-based targeted complex care management based on predictive analytics
- Home health/homecare model changed: highly technology dependent
- Medicaid managed care
- Preferred networks for post-acute and long-term care (NH and home)
Donors: 2015-2025

- $41 trillion in generational wealth transfer between 2015 and 2050
- Younger donors
  - Catalytic philanthropy
  - Unlike parents’ sense of obligation to support Jewish organizations
  - Social media for attracting donors
  - Small amounts for causes, then convert to larger donors
  - Significant increase in women donors vs. couples
From Research to Predictions to Business Applications to Plans
Refresh: Global Predictions from Research, Next 10 Years

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Longitudinal care management is not core skill for most health systems, primary care physicians, or emerging risk-based payors.
To continue to provide best quality LTC to poor Jewish elders, our organization has to be financially sustainable. We must determine our strategic imperatives, set a course to successfully navigate the future and continually review our businesses to make any needed course corrections.
Expand client base
Geographic, deeper penetration via one-stop eldercare, alternative uses for LTC beds

Grow profitable services
Homecare packages, partnerships, retail, home technologies, risk-based complex care management

Preferred Provider
15 day SNF, costs by condition, payment bundles, 90 day post-acute management

Technology Development & Integration
EHR, HIE, big data access, predictive analytics, Innovation Center, beta-test site

Refine Donor Program
Catalytic philanthropy, donor communications
Questions and Your Input