NAELA Public Policy Guidelines: Long-Term Care

Based on the collective experience of NAELA’s members with millions of clients who are seniors or individuals with disabilities, NAELA supports federal and state legislation to create a national long-term care system that provides coordinated and comprehensive services, including home and community-based health, social, and support services, and institutional services, to people with serious physical and cognitive impairments for individuals of all ages. Any system of long-term care should be founded on the principle of individual/consumer choice and individualized care and be consistent with the following characteristics.

A. NAELA supports effective integration of long-term care policies into our nation’s overall health care policy and recommends that the Medicare program be expanded to become the primary provider of long-term care based on level of impairment.
B. NAELA supports services that are fully accessible to all who need them, regardless of age, illness, or impairment, and are inclusive of persons of all financial means, without causing impoverishment or undue financial hardship to consumers, their spouses, and dependents.
C. NAELA advocates for long-term care services that are as affordable as possible without sacrificing quality of care.
D. NAELA supports the roles of both the public and private sectors in providing for long-term care and in reducing a person's risk of impoverishment when paying for long-term care.
E. NAELA supports public education about the possible need for long-term care and the availability of financing options.
F. NAELA advocates that third-party payers not distort the incentives for a person to choose between home and community-based services and institutional services. An individual's long-term care must reflect his/her actual needs, irrespective of the financial concerns and impediments of third-party payors.
G. NAELA advocates that the system must support consumer choice and participation with respect to all decisions regarding the nature, timing, and setting for delivery of care.
H. NAELA supports services that are fully accessible to all who need them, regardless of age, illness, or impairment, and are inclusive of persons of all financial means, and are without undue financial hardship to consumers, their spouses and dependents.
I. NAELA encourages the system to maximize the independence and dignity of persons in need of care.

J. NAELA advocates that each person receive the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, in accordance with a comprehensive plan of care or self-directed care plan.

K. NAELA advocates that the system provide consistently high-quality care under strong national and state standards that are effectively enforced.

L. NAELA advocates that each person or his/her health care proxy, if applicable, receive meaningful notice of all major decisions affecting his or her care in language that is easily understood; full access to information; and assistance with appeal to an impartial decision maker in a timely manner. NAELA supports impartial decision-making accomplished by a system of both internal and external review.

M. NAELA supports a system that effectively meets the needs of persons with dementia or other mental disability, including the need for supervision, stand-by help, or cueing.

N. NAELA urges that, until comprehensive long-term care financing is in place, Medicaid should be retained as a federal-state program, with a guarantee of coverage to all individuals under state plans, income eligibility rules that recognize out-of-pocket medical expenses including long-term care, protections against impoverishment of spouses of nursing home residents, and adequate funding to accommodate the anticipated growth in the need for assistance.

O. NAELA urges a fundamental shift in the focus for the location where care is provided to seniors and people with disabilities. NAELA believes that there exists a historical bias toward the provision of services to seniors and people with disabilities under the Medicaid program which favors institutionalization over community-based care. NAELA believes a universal preference for the provision of care in a home and community-based setting would improve the quality of care, dignity and choice for Medicaid benefit recipients.

P. NAELA has supported and continues to support efforts to expand the Long-Term Care Partnership Program. NAELA also acknowledges and supports other innovative efforts at the state level to expand the Partnership model to recognize self-insurance options and other sources of payment, in addition to Long-Term Care Insurance, to qualify for Partnership Medicaid coverage and preservation of assets benefits. These efforts, such as the New York Compact, should be fair to all persons in need of long-term care, provide innovations that can help Medicaid financially, and preserve all existing due process protections.

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