Signs of success in Ohio's changes to long-term care

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Changes in state policy are helping Ohio rebalance its long-term-care system in a way that expands choices for consumers and results in cost savings, The Columbus Dispatch reports.

Compared to other states, Ohio has historically been more reliant on nursing homes to provide long-term-care services. However, the state is now placing more and more people into home- and community-based services — an option that state officials say costs about one-third as much as similar care in an institutional setting. The state’s rebalancing strategy has included:

- combining different home- and community-based services into a single budget line item, thus better ensuring consumer access to the level of care they need;
- strengthening the relationship with hospitals to make consumers aware of alternatives to institutional care; and
- allowing the cost of care for an individual in home- and community-based care to rise as his or her needs increase.

According to the Kaiser Family Foundation, the distribution of long-term-care spending (which accounts for 34 percent of Medicaid costs) can vary widely from state to state. For example, home health and personal care accounts for 65 percent of spending in Minnesota (highest in the Midwest) and 29.6 percent in Illinois (lowest in the region).