



Health**Enterprises**Network | Louisville

A Greater Louisville Inc. Affiliate

# **Regional Data & Strategies for Elderhood**

**Michael Price**, Interim Director,  
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Public Policy, Kindred Healthcare

**Crowne Ballroom B**

# **Size of the Elderly Population**

## **Demographic Determinants**

**Michael Price**  
**Kentucky State Data Center**  
**University of Louisville**

**Health Enterprises Network**

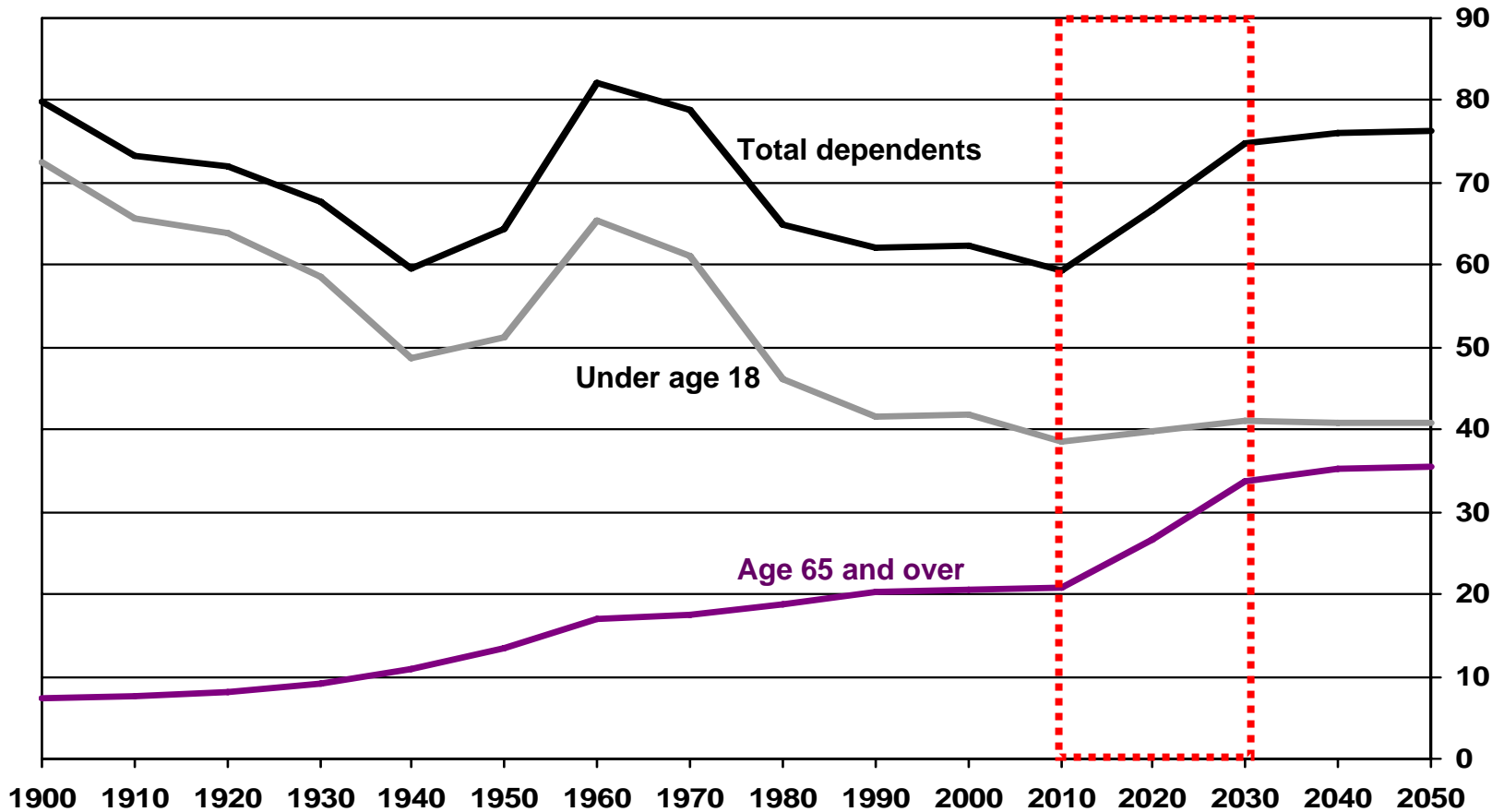
*Leading the Way*  
*Elderhood and Long-Term Living*

**July 21, 2010**  
**Louisville, Kentucky**

# U.S. Age Dependency

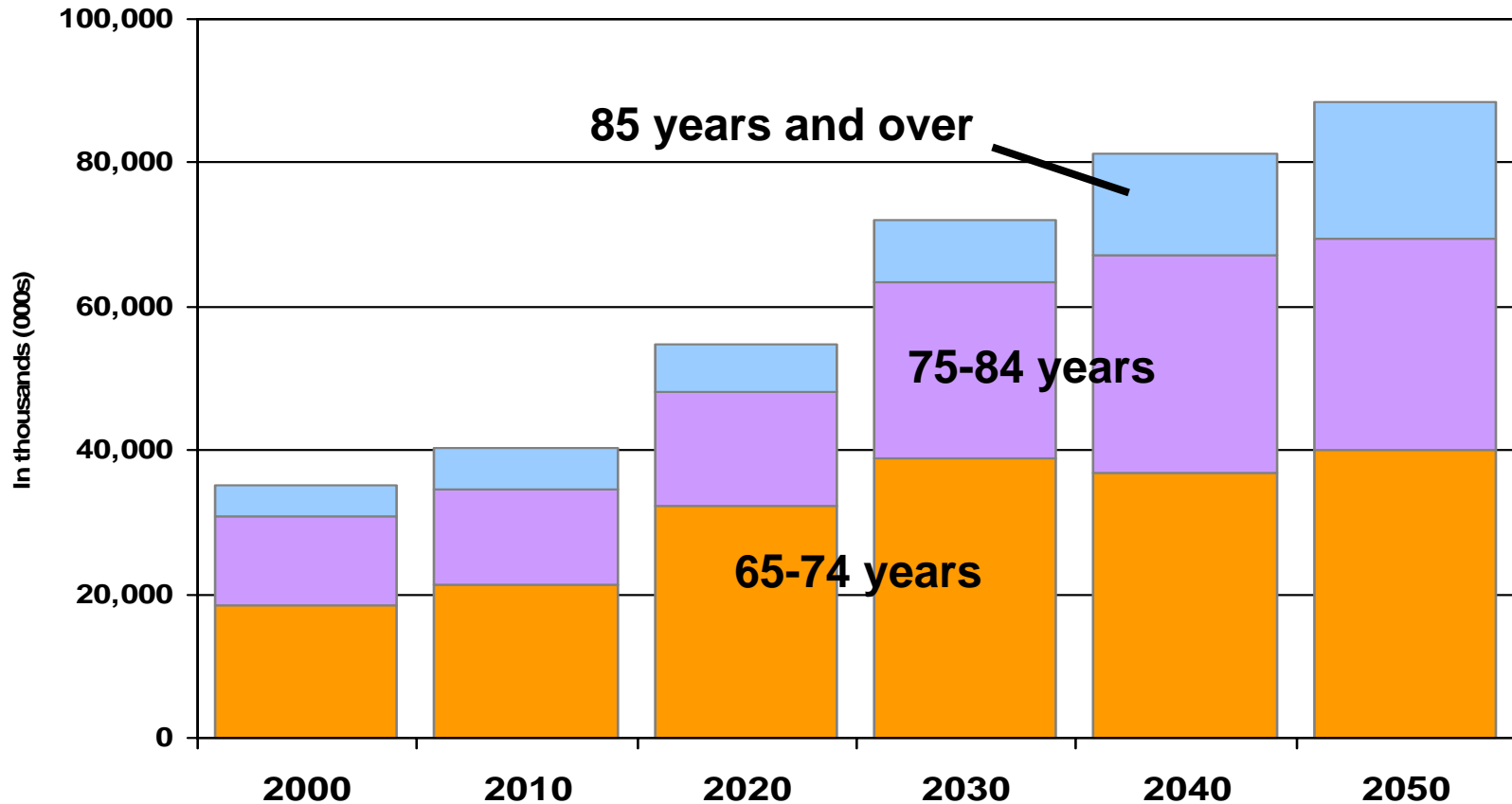
Number of dependents per 100 persons  
ages 18 to 64 years: 1900 to 2050

*Next 20 Years*



Sources: U.S. Census Bureau: Census of Population 1900-2000  
and 2008 National Population Projections (middle series)

# U.S. Population Ages 65 Years and Over



Source: US Census Bureau: 2008 National Projections (middles series)

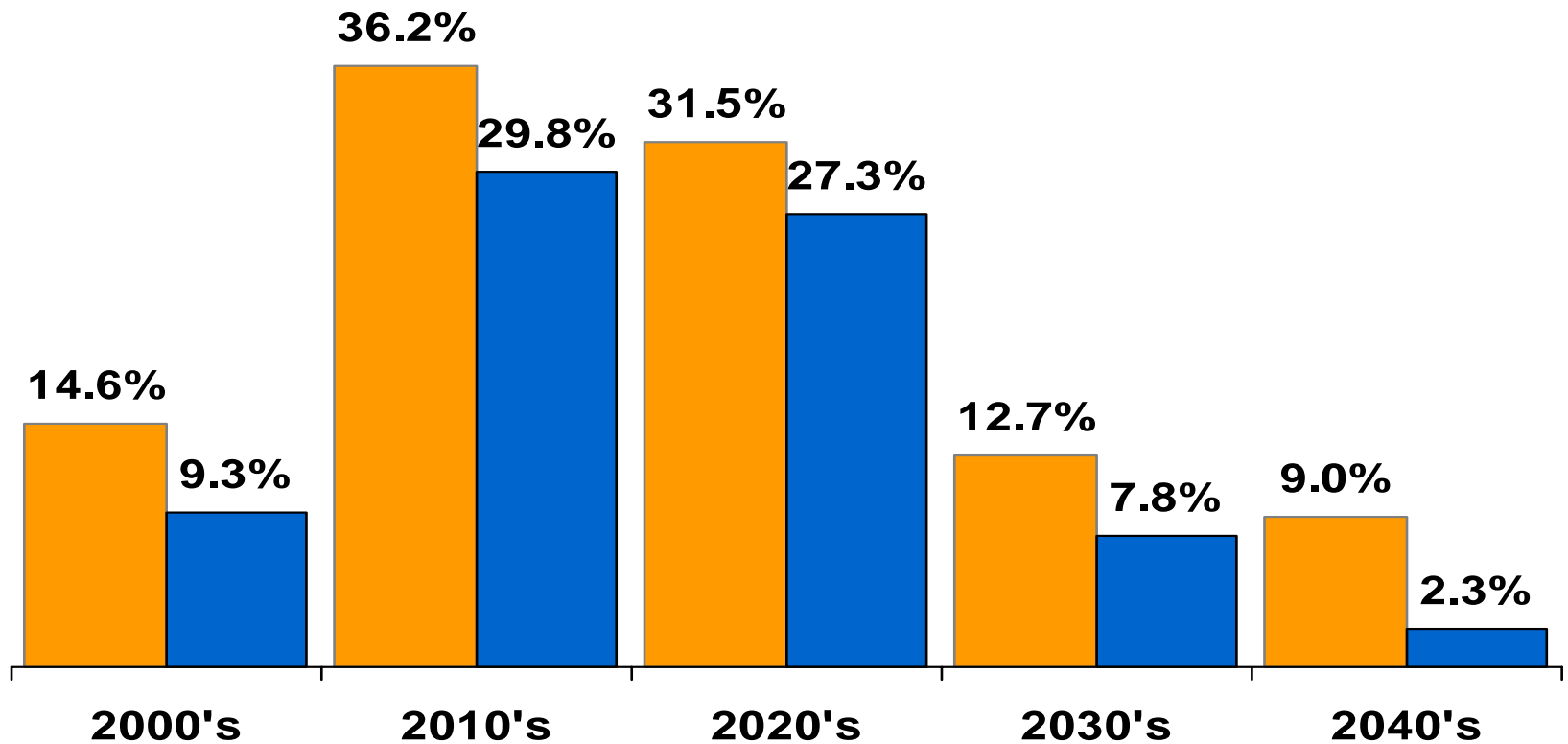
# *Next 20 Years*

## **Size of elderly population**

- ✓ **Baby Boomers aging in place**
- ✓ **Life expectancy**
- ✓ **Elderly migration**

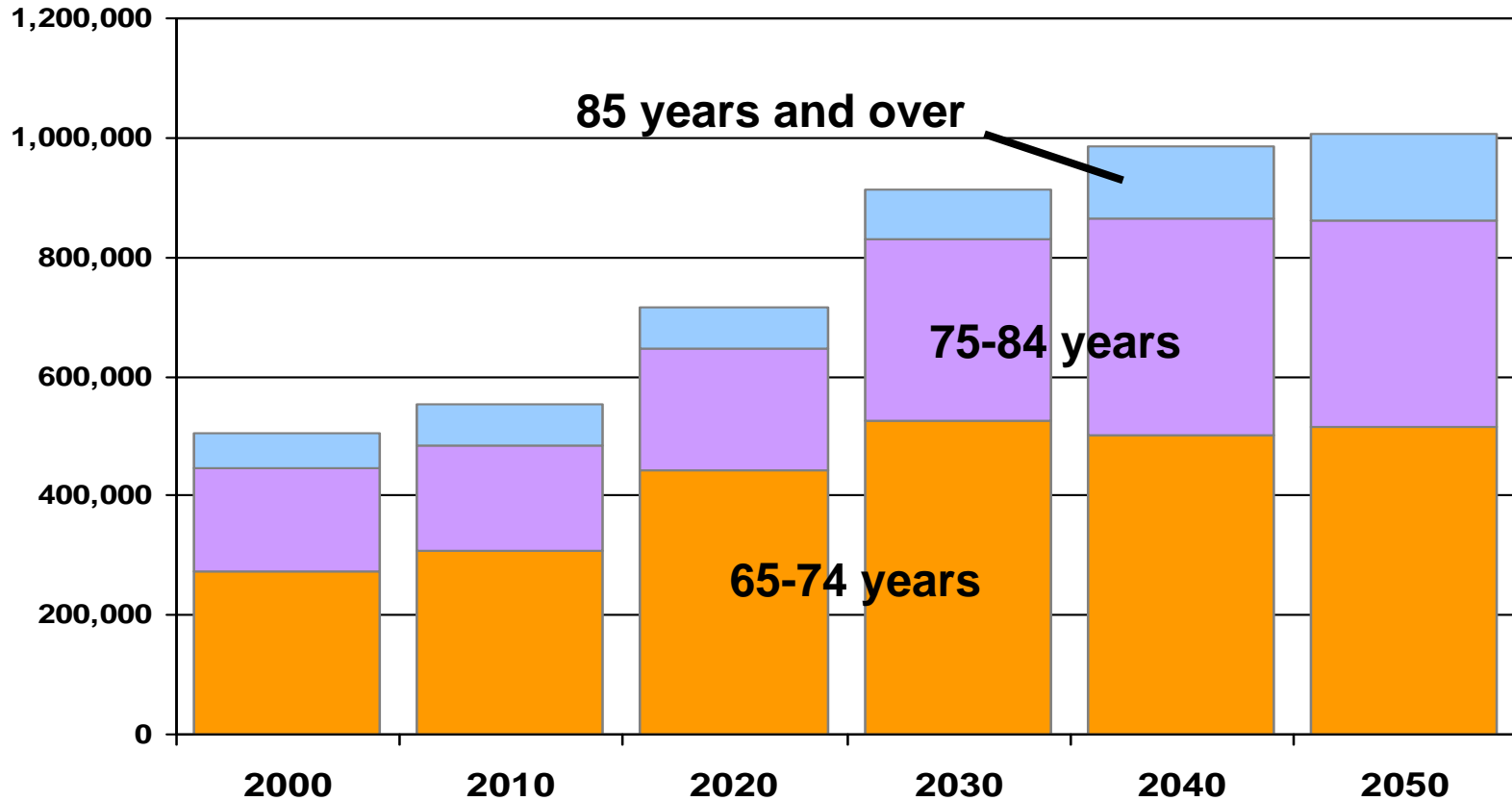
# Projected Growth Rates Population Age 65 Years and Over

■ United States ■ Kentucky



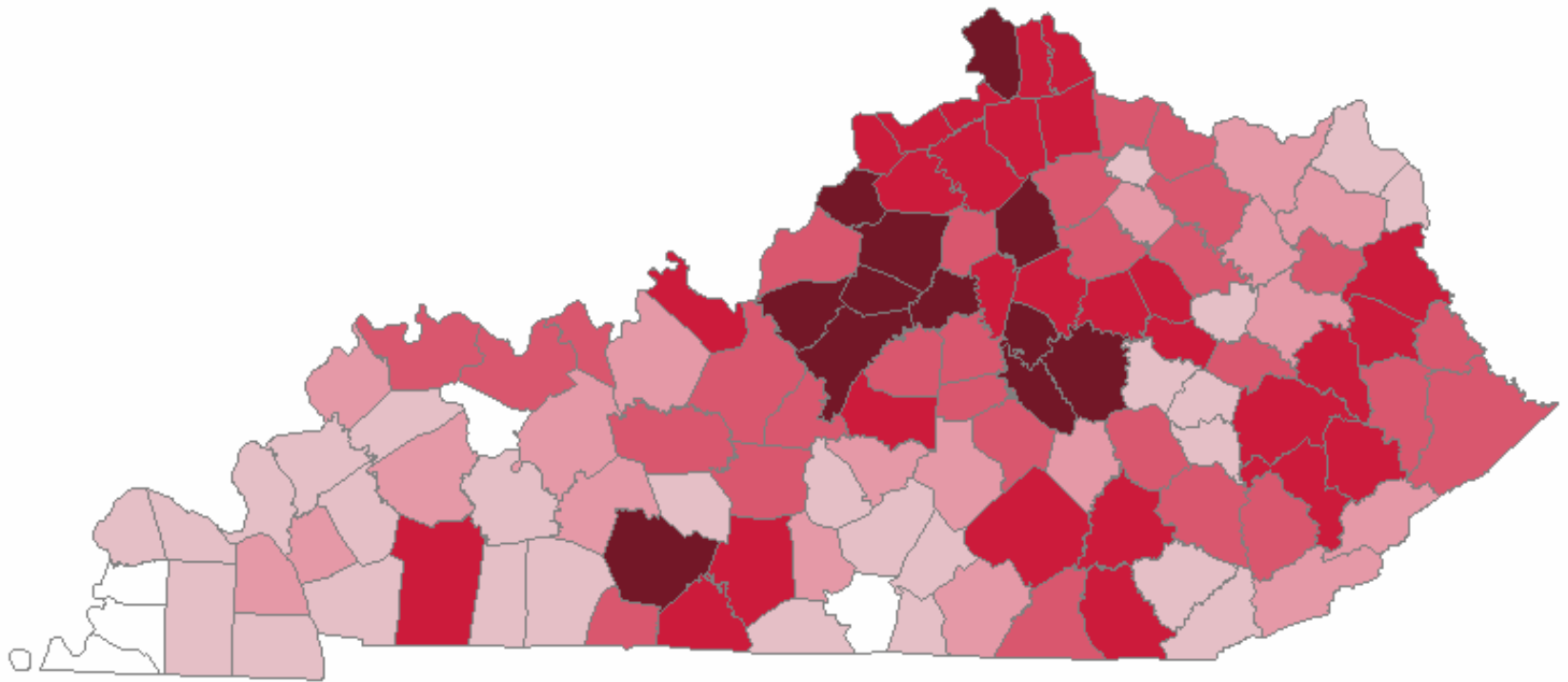
Sources: U.S. Census Bureau, National Population Projections (middle series);  
Kentucky State Data Center, State and County Population Projections.

# Kentucky Population Ages 65 Years and Over



Source: Kentucky State Data Center

# Growth in Elderly Population 2010-2030

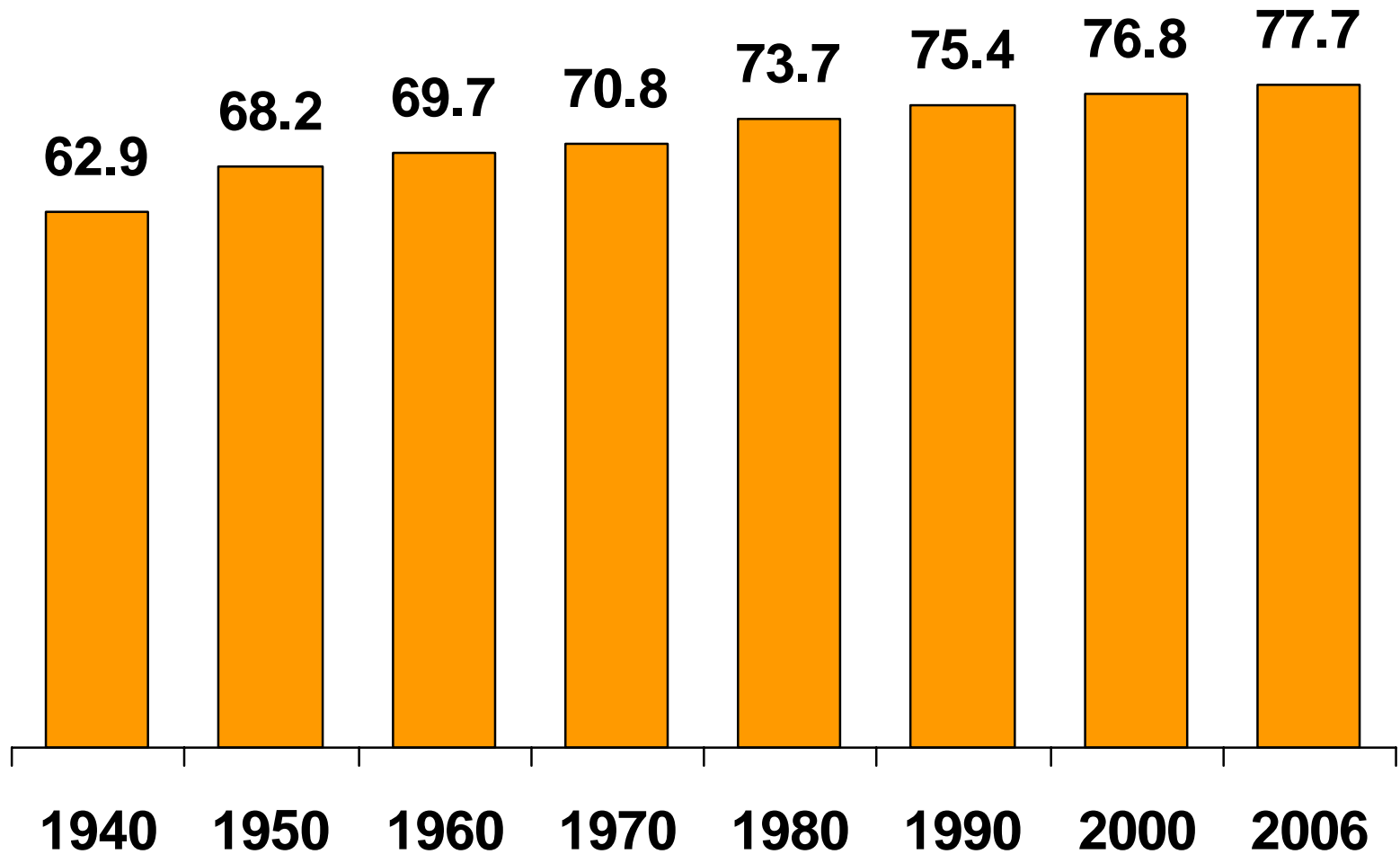


Percent change in number of persons age 65 years and above



# U.S. Life Expectancy

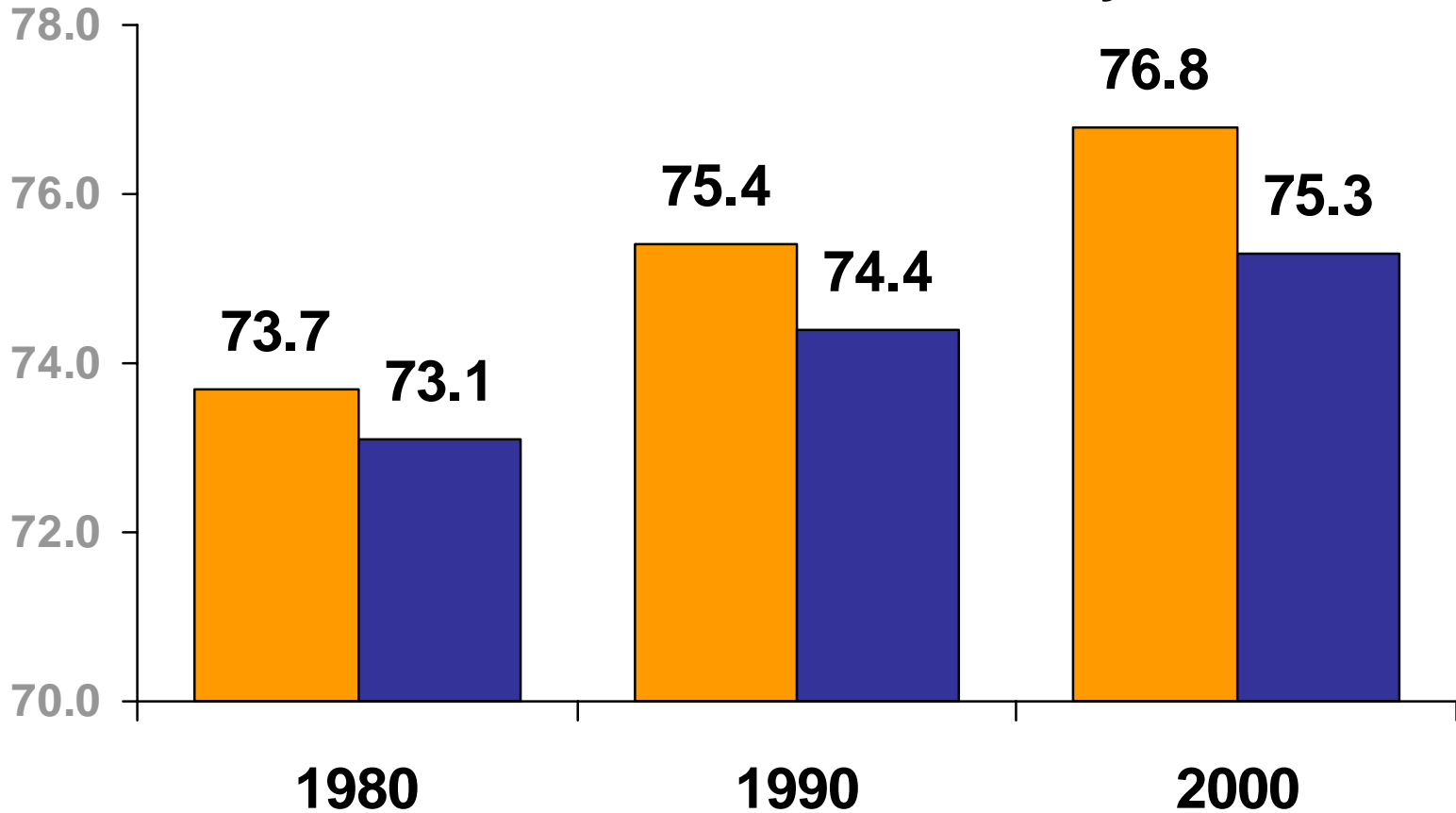
*Average years of life from birth*



# Life Expectancy

*Average years of life from birth*

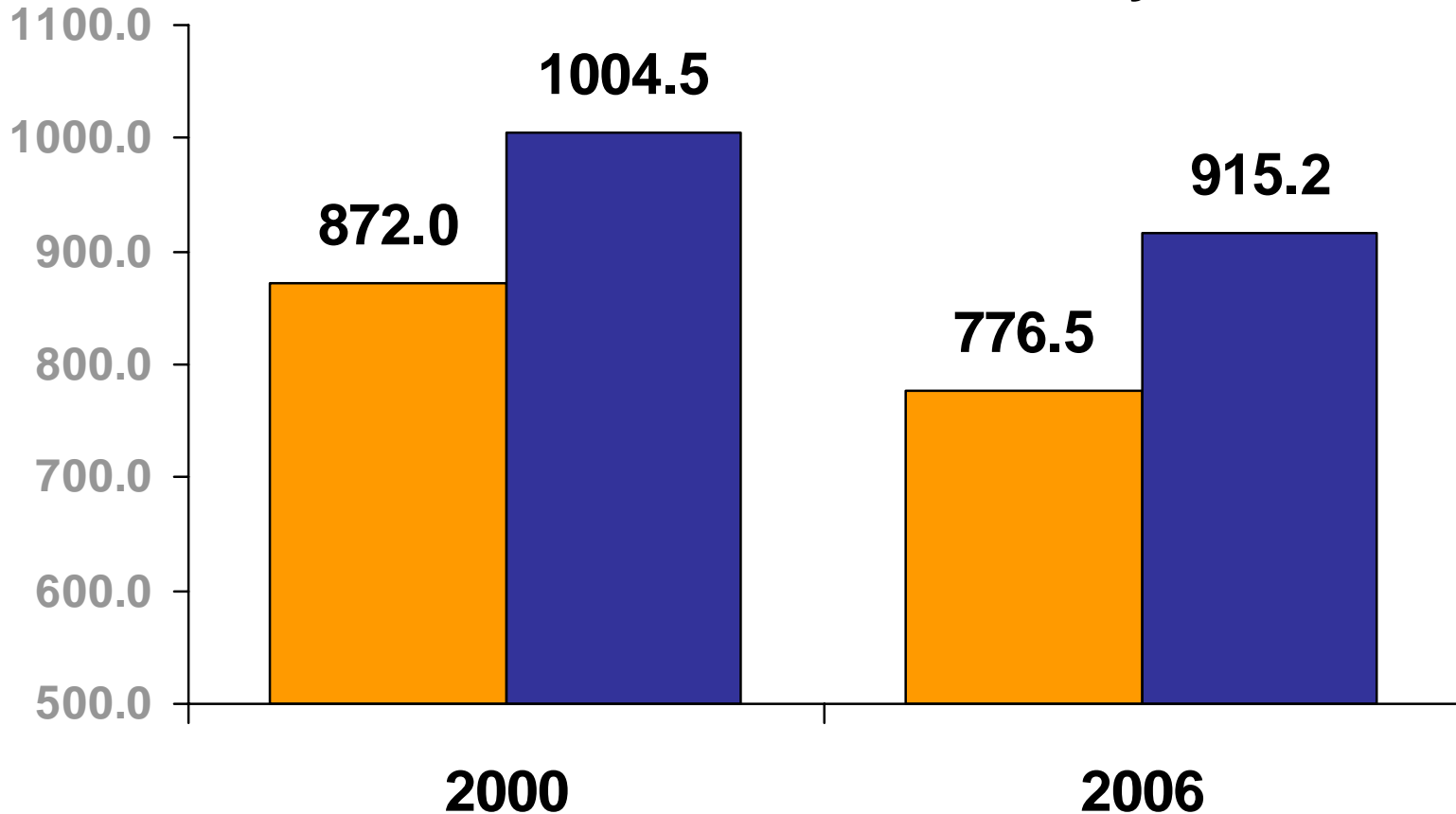
United States Kentucky



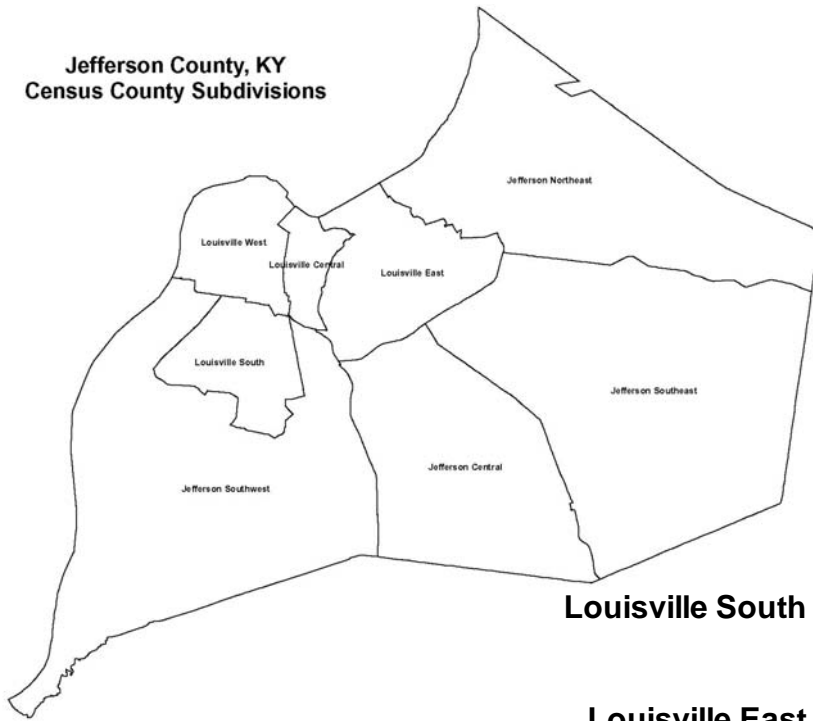
# Age-Adjusted Death Rates

*Number of deaths per 100,000 persons*

■ United States ■ Kentucky

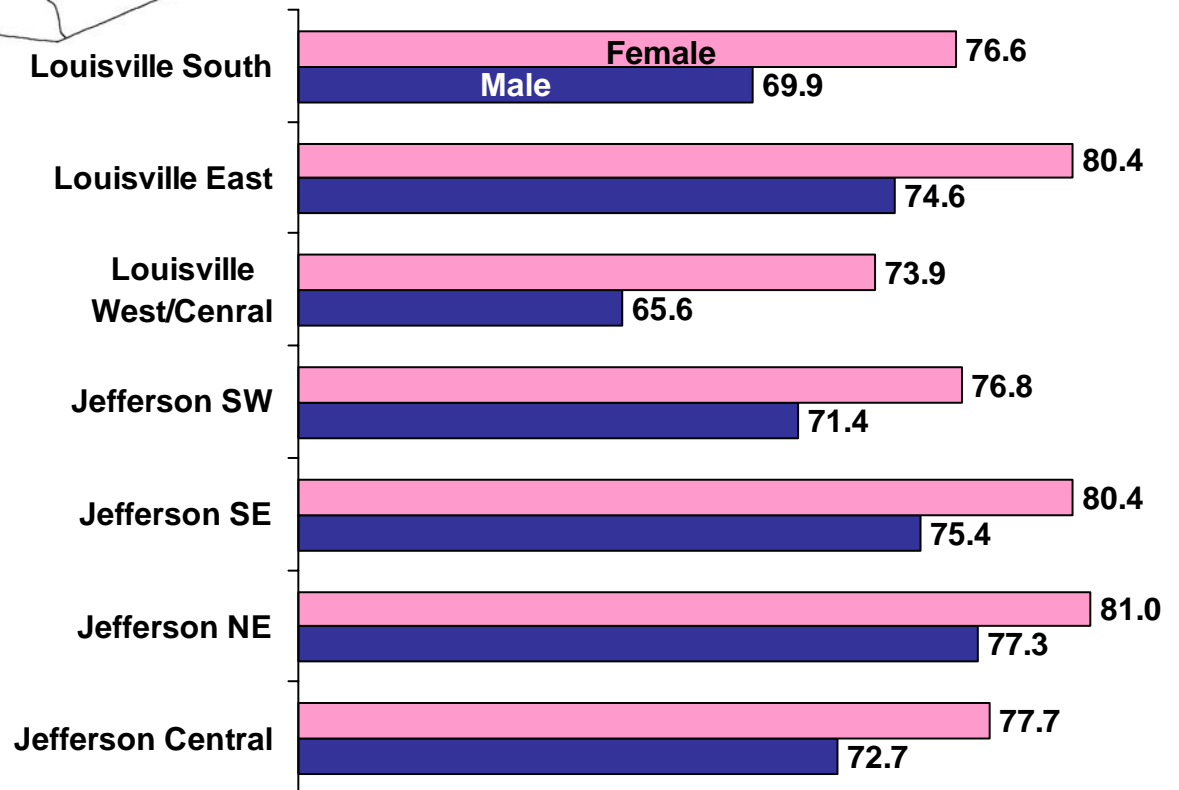


Jefferson County, KY  
Census County Subdivisions

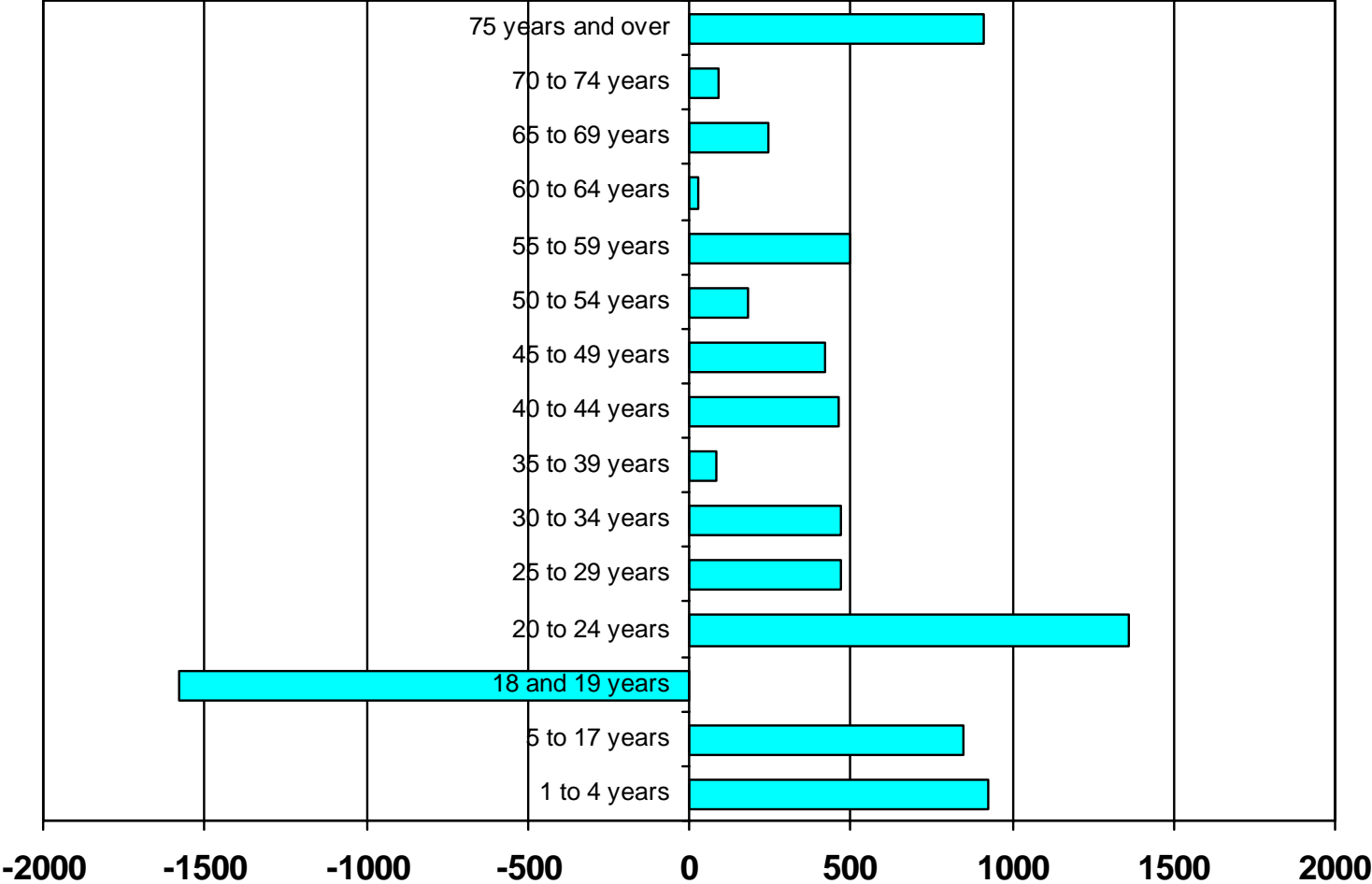


# Life Expectancy

## Across Jefferson County



# Jefferson County Net Domestic Migration by Age



Source: U.S. Census Bureau American Community Survey 2006-2008

# **Regional Data Sources**

## **Kentucky State Data Center**

- **State and county population projections**
- **Special analyses**

## **U.S. Census Bureau**

- **Population estimates**
- **American Community Survey**

## **National Center for Health Statistics**

- **Mortality data**



# Kindred Healthcare

*Leading the Way: Elderhood and Long  
Term Living*

*Health Enterprises Network*

*July 21, 2010*

*William M. Altman*

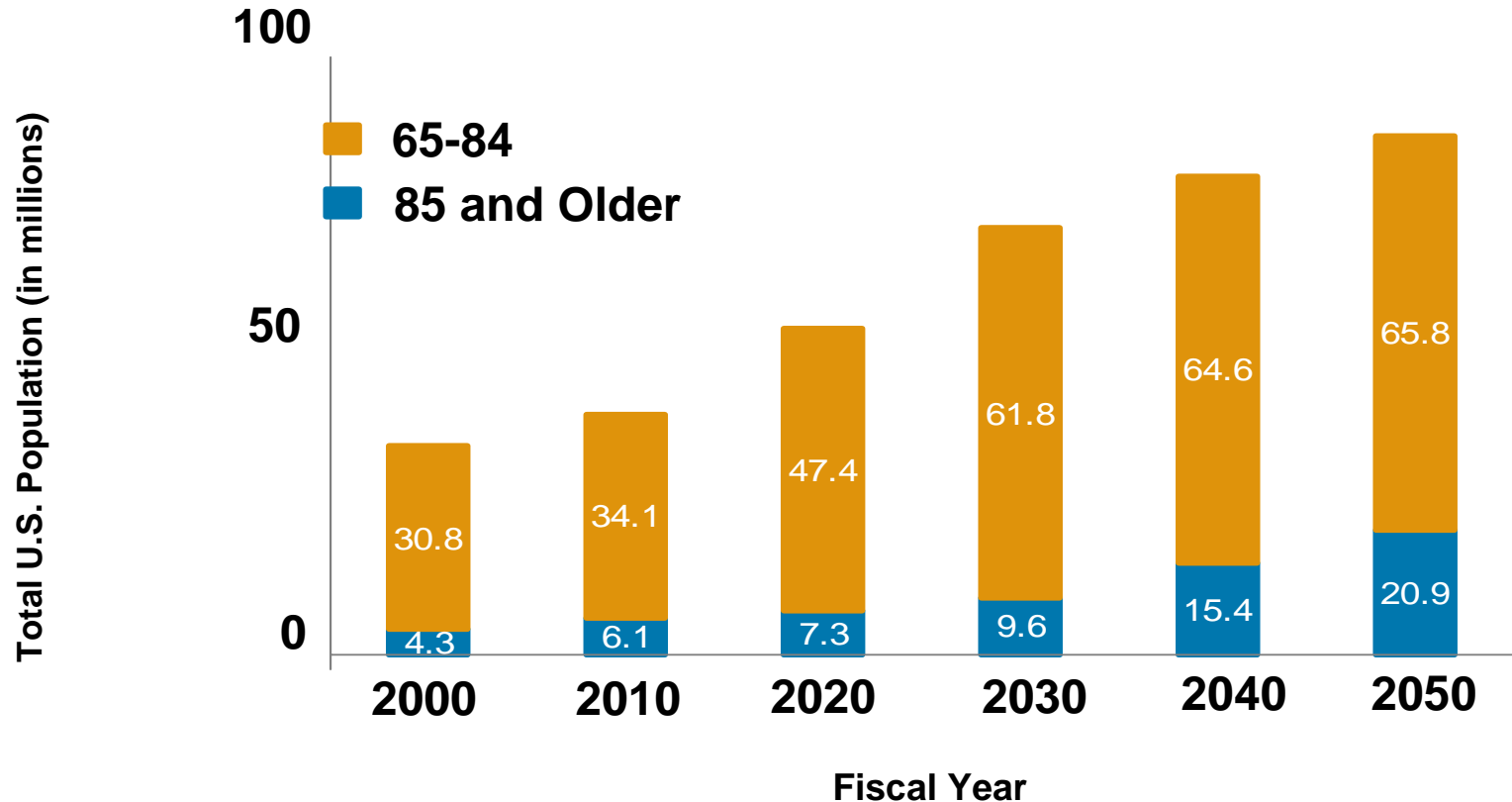
*Senior Vice President of Strategy &  
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Kindred  
Healthcare



**Dedicated** to Hope, Healing and Recovery

# Demographics: Growth in Population over 65 Years



The population over age 65 is expected to almost double between 2010 to 2040, from 40 million to 80 million

Source: U.S. Census Bureau.

# Most Medicare Beneficiaries Suffer from Multiple Chronic Conditions

- Medicare payments per beneficiary rise with increasing comorbidities.
- Medicare beneficiaries with 5 or more chronic conditions represent only 15% of total beneficiaries but account for 25% of Medicare spending.

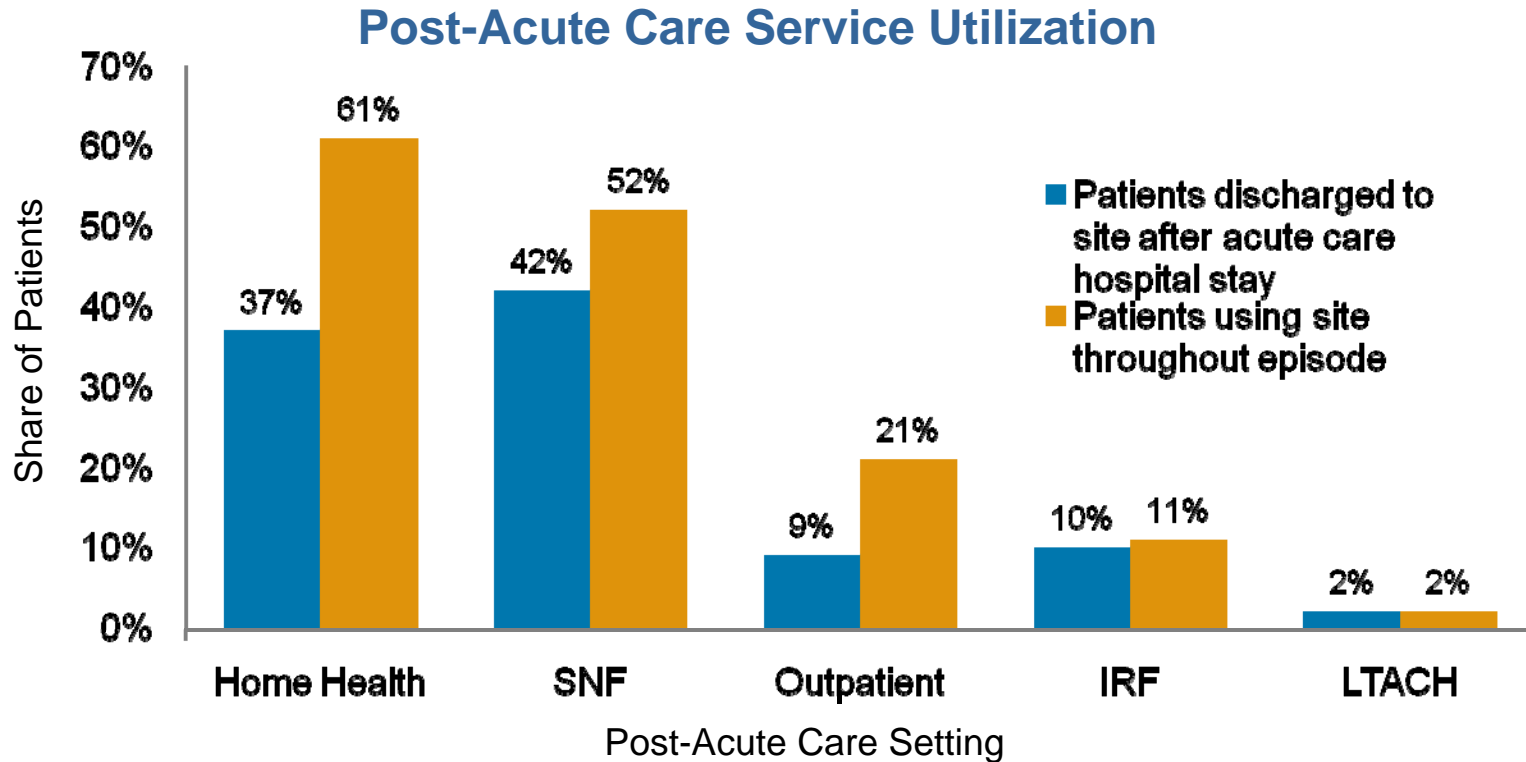
Number of Chronic Conditions	Percent of Total Beneficiaries	Mean Medicare Expenditure per Beneficiary	Medicare Expenditures for the Group as % of Total
0	7.1%	\$2,850	2.8%
1	16.5%	\$4,522	10.5%
2	23.0%	\$5,722	18.5%
3	22.3%	\$7,117	22.3%
4	16.4%	\$9,094	21.0%
5 or more	14.7%	\$12,044	24.9%

Source: Avalere analysis of the Medicare Current Beneficiary Survey Access to Care file, 2005.

Notes: Includes all Medicare payments, including any MA capitation. These findings are based on weighted data. Each beneficiary in the survey is given a weight so that the survey findings may be aggregated to reflect the total Medicare population.

# Medicare Patients Use of Post-Acute Services Throughout an “Episode of Care”

The Department of Health and Human Services commissioned research to evaluate service use and cost for Medicare beneficiaries following discharge from an acute care hospital. The chart below specifically shows the percentage of Medicare patients admitted to different post-acute sites, taking into account both the initial discharge destination and subsequent sites of service used throughout an episode of care.



# Medicare Spending on Post-Acute Care Services After the Passage of Health Reform

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
LTAC	5.1	5.1	5.4	5.9	6.4	6.9	7.4	8.0	8.6	9.3
IRF	6.0	6.4	6.9	7.4	8.0	8.7	9.3	10.1	10.8	11.7
SNF	26.2	28.4	30.2	31.8	33.4	35.3	37.2	39.4	41.7	44.1
Hospice	13.2	13.8	14.6	15.1	15.8	16.3	17.1	17.9	18.9	19.8
Home Health	19.2	20.2	21.5	23.1	24.8	26.6	28.5	30.6	32.9	35.3
<b>Total</b>	<b>69.6</b>	<b>73.9</b>	<b>78.6</b>	<b>83.3</b>	<b>88.3</b>	<b>93.6</b>	<b>99.6</b>	<b>105.9</b>	<b>112.9</b>	<b>120.1</b>

\*Sources: LTACH, IRF, HHA, SNF: OMB 2011 budget estimates (post-reform); CBO estimates of impact of reform;  
Hospice: CBO 2009 baseline (pre-reform); CBO estimates of impact of reform

# Questions?

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