

# POLICY FORUM

## *Long-Term Care Is More Than Just a Referral*

### Introduction

When I read this issue of the NCMJ, it raised a number of questions: Do I have long-term care insurance? What does it cover? Can it assure the quality of life I hope to have when I retire? What sort of future *do* I imagine for my retirement? While this issue cannot answer all of those questions, it may inform our imagination and increase our awareness of options, possibilities, and responsibilities—to ourselves, our families, and our patients.

My father died at home with hospice care, and my mother died at home with in-home care. Although dying at home is the scenario that many older people say they would prefer, it was not as easy as it sounds. As a pediatrician, I had little or no idea of the options that were available for at-home care, nor was I aware of the rules and regulations I would face while trying to arrange the care my parents wished to receive. More shocking to me was the dearth of information that my parents' physicians could share with me. These physicians were all great doctors, but for them hospice and long-term care were "just" referrals. Rather than being the one making referrals, I was now on the receiving end, and I found that being referred was much harder than I had previously realized.

The good news is that long-term care is receiving more and more attention from professionals, patients, and families. There are exciting options tailored to the specific and changing needs of older adults. While we can imagine the comfort of aging at home, family care may be a less feasible option for widespread and increasingly mobile families. Fortunately, nursing homes are now a good alternative. Once considered a bleak option of last resort, nursing homes have improved tremendously. In addition, hospice care has finally come of age, and assisted living and community alternative programs are likewise growing into their own. Finally, changes in long-term care extend beyond the setting of care. With new programs and skills, enhanced support, and improved quality of care, long-term care has made fantastic leaps that stir the imagination and raise new possibilities for the future.

As you read this issue of the NCMJ, I hope you will imagine these possibilities and enjoy their promise, as well as learn about new options and share them with colleagues and friends. I hope these articles will allow health care providers to better understand the fear and uncertainty of patients and families, so they can not only refer, but also reassure families and assure residents a long-term care option of their choice—as if their quality of life depended on it. **NCMJ**

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