Gray Panthers of San Francisco

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Resolution submitted to 2015 CARA Convention: Include Universal Long-Term-Care in Medicare-for-All

WHEREAS California advocates for Medicare-for-All/Single Payer are beginning to consider what benefits they want covered in new plans they propose for California or the US, and

WHEREAS coming decades will see a huge increase in older people, and they are expected to have more chronic disease than today's older people, and

WHEREAS Long-Term-Care is either extremely expensive, or is provided by family or friends, often with little or no compensation or support, and

WHEREAS aging of the population has made care for elders and disabled the fastest-growing occupation, yet poor public funding has financially squeezed elders and disabled, causing high turnover of care workers because of poor pay and working conditions, and

WHEREAS today's Medicare's coverage of Long-Term-Care is extremely limited, and

WHEREAS Medicaid pays for most Long-Term-Care in the US, but patients must be in poverty to qualify for Medicaid assistance or In-Home-Support-Services, and

WHEREAS Long-Term-Care's extreme fragmentation is largely due to different funding sources that pay for different Long-Term-Care services, and

WHEREAS much of Long-Term-Care, particularly that funded by Medicaid, is based in care in institutions like nursing homes, as opposed to care at home or in the community, and

WHEREAS despite Long-Term-Care's high expense, financial analysis of several state's proposed Medicare-for-All/Single Payer plans project that universal Long-Term-Care could be covered, particularly when emphasis is on funding in-home care, and

WHEREAS today's Medicare lacks coverage of certain essential medical services (such as Dental, Podiatry, Eyeglasses, Hearing Aids, and Alternative Medicine) which if covered would ultimately reduce the cost of acute medical interventions, and should therefore also be covered in a Medicare-for-All/Single Payer plan, therefore,

RESOLVED that CARA will work to include Long-Term-Care costs and benefits in every study and analysis, with the intention that these services should become part of the standard benefit package in any Single Payer effort, and

RESOLVED that CARA will also work to have these cost and benefit studies and analyses also include Dental, Podiatry, Eyeglasses, Hearing Aids, and Alternative Medicine.

RESOLVED that the Long-Term-Care component of Single Payer efforts should be based on quality and compassionate principles including emphasis on home and community care, preventative medical care, a smooth continuum of care as patients' conditions change, public education of Long-Term-Care options available, and adequate compensation, working conditions, training, and support of caregivers.