

Baby Boomers in Retirement: Public Policy Challenges and Practical Solutions

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Presented at Eldredge Library
9-27-22

AIM OF THE TWO LECTURES

- Explain the Complexity of Making Sure Older Adults Have Productive, Enjoyable, and Meaningful Lives
- Note What We Have Done Well to Help Older Adults
- Note Where We Can Do Better
- Give Some Hints About How to Navigate This Phase of Life

POST RETIREMENT YEARS ARE A BIG PHASE OF LIFE

- Phase 1 Growing Up and Learning: 18 to 26 Years
- Phase 2 Contributing: Family and Work: 40 to 50 Years
- Phase 3 Post Retirement: 10 to 40 Years

STARS OF THE SHOW: BABY BOOMERS

- 76 Million People Born Between 1946 and 1964
- About Twice the Number Born Between 1928 and 1946
- Oldest Boomers Will Turn 84 By 2030
- Youngest Boomers Will Be Eligible for Medicare and Medicaid by 2030

Four Topics To Cover

- History of Aging and Federal Level Policy to Assist Older Adults
- An Assessment: Can We Economically Afford Aging as a Nation
- The Key Needs of Older Adults That Remain Challenges
- County and Local Level: What We Have and What We Need

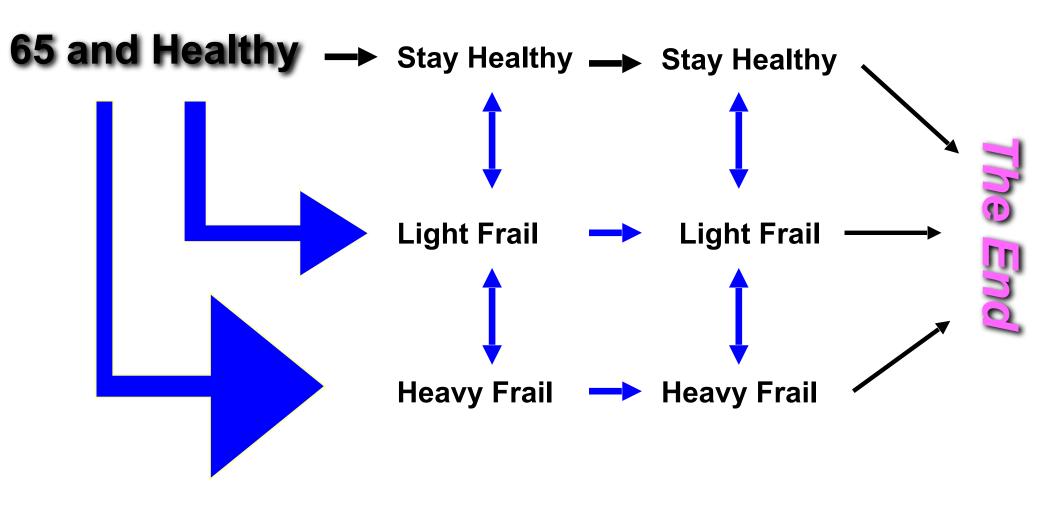
What Are We Hoping Will Happen for Older Adults After Retirement

- Healthy Lives
- Long Lives
- Meaningful and Productive "Phase 3"
- Some Equity Across the Population of Older Adults

Three Phases of Aging

- Healthy Active Phase
- Slowing Down Phase
- Service Needy Phase

The Last Decades of Life





- We Have Faced Huge Changes Over Past 100 Years
- Federal Programs Have Addressed the Impacts of Change
- But, There Is Still Much To Do to Improve "Phase 3"

Aging in the 19th Century

- Families Took Care of the Old and Often Lived Together
- Older Adults Contributed to Family Life
- Older Adults Died Relatively Young and Death in General Happened Throughout the Life-Cycle
- Medical Care Hardly Existed and Was Affordable

Aging in the 20th Century

- Families Moved Around & Often Lived Distances From Grandparents
- Older Adults Lived Longer
- Years When Frail and In Need of Assistance Increased
- Medical Care Became Expensive and Then Unaffordable
- The Federal Government Became a Big Player in Caring for Older Adults

History of Federal Efforts to Help Older Adults

- 1935: Social Security: income support
- 1935: Old Age Assistance: long term care support
- 1952: Administration on Aging: community support
- 1965: Medicare and Medicaid
- No Block Buster New Programs Since 1965
- Attention Focused on Managing Constant Growth in Costs for These Initiatives

Summary of Federal Efforts

- Impressive Commitments
- But Serious Problems Persist
 - \$17,700 Annual Social Security Benefits Are Below Poverty Index for Senior Living
 - Access to Affordable Medical Care is a Mess
 - Long Term Care Services are Unaffordable for Many Older Adults
 - We Need More Community-Based Services
 - Expanded Life Expectancy is An Emerging Big Challenge
 - And.....Are We Sure We Can Afford What Older Adults Need

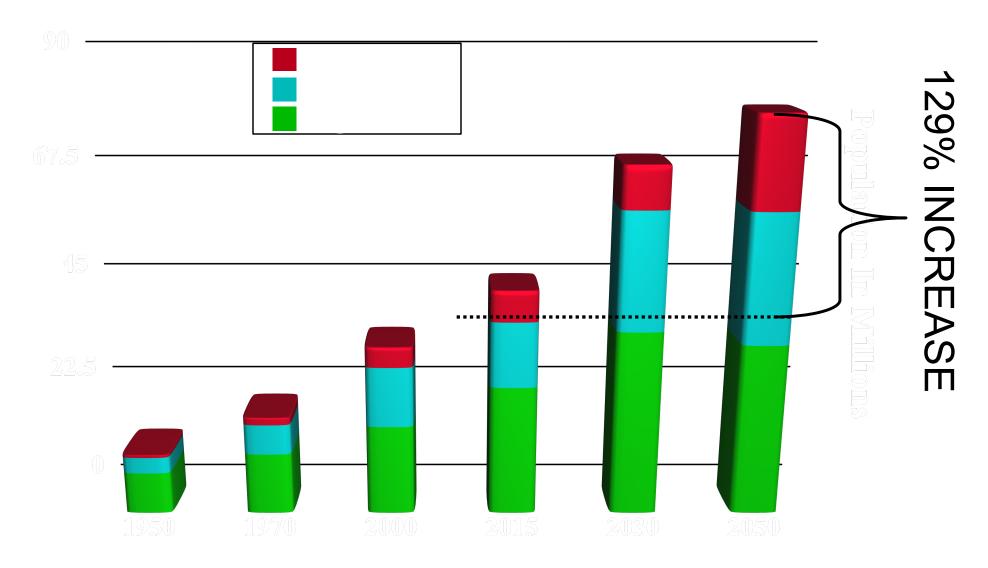


- A Macro Economics Perspective
- A Look at the Statistics of Aging
- The Concept of Dependency Ratios
- Why We May Not Have the Challenges Japan Has Had

A Speedy Introduction to Macro Economics

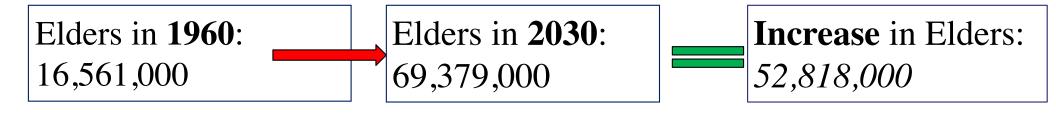
- A Focus on How the Economy Handles Change
- Concerned With the Challenge of Steady Economic Growth
- Little Focus on Personal Details
- Focus is on How We Do As An Entire Population
- Quite Different From Micro-Economics Which Focuses on How Individuals Make Economic Decisions

Population of Americans aged 65 and over, in Millions



Source: Congressional Budget Office tabulations based on population projections, 2012

The Expenditure Explosion



Annual Care Expenses per Elder: \$21,138

Total Extra Social Spend: \$1.4 Trillion per year!!

Roughly \$4,389 per person living in the US!

Size of Age Groups, 1960 vs. 2030

| Age Group | 1960 | 2030 | %Change |
|-----------|------------|-------------|---------|
| 0-19 | 69,005,000 | 92,867,000 | +35% |
| 20-64 | 93,757,000 | 184,653,000 | +97% |
| 65-74 | 10,997,000 | 37,407,000 | +240% |
| 75+ | 5,564,000 | 31,972,000 | +475% |

Calculating Dependency Ratios

| Ratios | 1960 | 2030 | % Change |
|---------------------------------|---------------------|---------------|----------|
| 20-64/ 65+ | 5.7 | 2.7 | - 53% |
| (i.e., The number of 20-64 year | ar olds for every (| 65+ year old) | |
| 20-64/ 0-19&65+ | 1.10 | 1.14 | + 4% |
| 20-64/ 0-19&75+ | 1.26 | 1.48 | +15% |
| 20-74/ 0-19&75+ | 1.40 | 1.78 | +29% |

Serving Elders: Health, Long-Term Care, and Income Challenges

We are concerned about the costs of services in an aging society.

But....at least from a macro economics perspective, we will be able to afford these costs.

And...it will be tough to do logistically.



Repeat: What Are We Hoping Will Happen for Older Adults After Retirement

- Healthy Lives
- Long Lives
- Meaningful and Productive "Phase 3"
- Some Equity Across the Population of Older Adults

Topic 3: How As A Society Do We Make These Needs Be Taken Care Of

- Enough Money for Basic Life Expenses: For Food, Housing, and Active Living
- Access to Good Medical Care and Long-Term Care
- Insurance That Pays for Medical Care and Long-Term Care
- Help Avoiding Social Isolation
- Help Avoiding Falls
- Help Coping With Dementia and Disabling Medical Issues
- Help Finding Meaningful Activities for Enjoyable Living
- Preparing for Extensions to Lifespans

Are There Solutions for Making Sure Retirees Can Pay for Basic Life Expenses

- Realistically: There Probably Are Just Three Options to Keep Social Security Viable and to Raise Minimum Annual Payments
 - Increase Retirement Age
 - Increase Taxable Income Levels
 - Allocate Resources From Regular Taxes
 - Privatize Social Security for Future Generations
- Community Services Can Be Important Players

Are There Solutions for Reducing the Costs of Medical Care and Prescription Drugs

- Realistically: There Probably Are Just Two Options to Reduce Medical Care Costs
 - Have tougher federal regulations to slow the growth in medical care costs: value based payments
 - Easy to say but tough to do
 - Move Towards Medicare Advantage Programs as the Norm or Create a Medicare for all Option
- There probably Is Just One Option for Reducing Drug Costs
 - Regulate the price of drugs
 - Again, Easier to say than to do

Serving Elders: Th Health Promotion Challenge

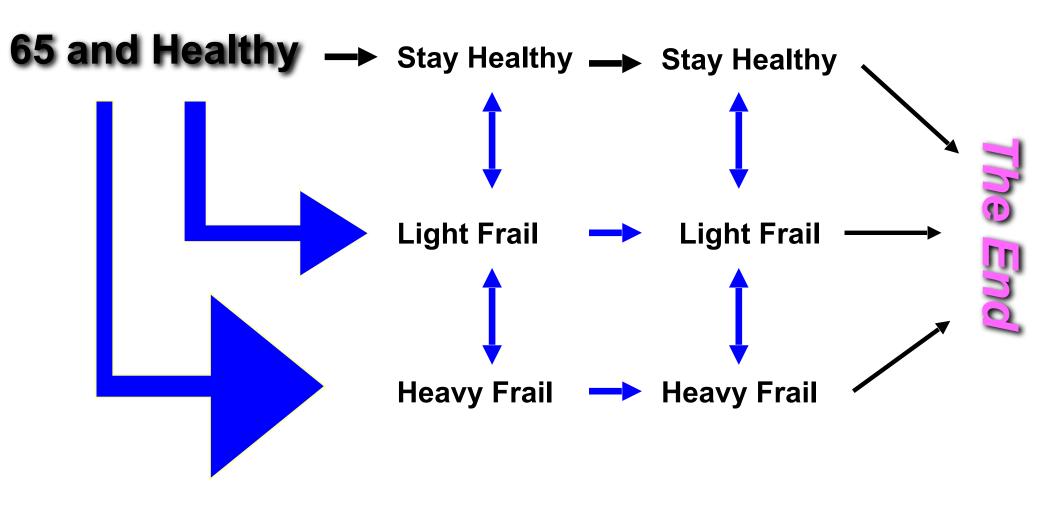
Keeping Elders Healthy Longer Will Improve Quality of Life.....

And.....

It is good for the Economics of Aging Also



The Last Decades of Life



Three Phases of Aging

- Healthy Active Phase
- Slowing Down Phase
- Service Needy Phase

Components of Healthy Aging

- Avoiding disease and disability
 - through medicine
 - through behavior
 - through knowledge
- Maintaining high levels of functioning
 - the elderly have a much higher potential for this than was previously thought
- Nurturing strong interpersonal relationships
 - decreases the risk for cognitive, emotional, and physical decline

Source: Rowe and Kahn, Successful Aging

Are There Solutions for Improving Access to Medical Care

- Address Shortage of Primary Care MDs and Internists
- What Has Caused This Shortage
- Solutions to the Problem

Are There Solutions to Improving Long-Term Care?

- Long-Term Care
 - Rethink The Entire Concept and Existing Funding Approach
 - Use Nursing Homes As Little As Possible
 - Learn from Covid: Make Them Smaller and More Home Like
 - Medicare and Medicaid Already Pays 60% of all LTC costs
 - A Public Private Insurance Option Could Be Rethought

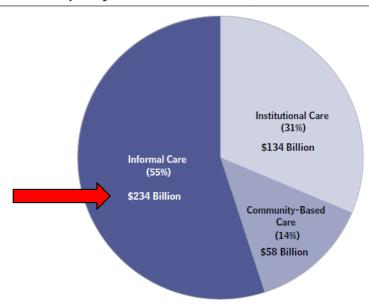
Serving Elders: Part 3 of the Long-Term Care Challenge

9) Informal care is crucial

➤87% of the 12 million Americans who need long-term care receive it from *unpaid* family caregivers

Source: Kaiser Family Foundation, 2009

Estimated Economic Value of Formal and Informal Long-Term Services and Supports for Elderly People in the United States, 2011



Source: Congressional Budget Office based on information from the Centers for Medicare & Medicaid Services, Office of the Actuary (for estimates of spending for formal care); data from the Health and Retirement Study; and data on average hourly wages of home health aides as reported by MetLife Mature Market Institute. For more information, see the supplemental material for this report.



Cash and Counseling Program Concepts

- Choice on when and how services are provided
- Ability to hire friends/family
- Ability to use funds to modify homes, or purchase items that promote independence
- Availability of counselors to help weigh options

Advantages of New Approach

- Greater Access to Caregivers
- Improved Satisfaction
- Better Health Outcomes
- Potential Savings for State Governments

Serving Elders: One last item to remember

Be a part of the solution!!

- Volunteer To Help Older Adults
- Reach Out to Help Neighbors

