

Spillovers of Family Caregiving for Persons with Serious Illness: Considerations for Policy

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“Informal care” the primary source of help in the home for persons with serious illness

- Families rarely plan for future long-term care (LTC) needs even though it is the biggest risk older adults face
 - LTC typically found in an emergency, w/ little understanding about how to select high quality care.
- Nearly 90% of older adults w/ serious illness receive help exclusively from family and friends
 - Caregivers provide high and low skilled care and the majority report unmet needs for training (~50%)
 - We estimate only 5% are directly supported by policies
- Replacement value in 2018 =\$470 billion (AARP)
 - \$21k -164k per caregiver depending on method to value time



Spillover “Benefits” of Family Caregiving

	Informal care leads to . . .
Care recipient utilization	↓ Nursing home entry ↓ Home health care ↓ Medicaid inpatient use
Care recipient health care costs	↓ Medicare inpatient costs ↓ Medicaid inpatient costs ↓ Medicare long-term care costs (SNF, HHA)
Care recipient health outcomes	↑ Self-rated health. Less likely “poor”



Spillover “Costs” of Family Caregiving

	Informal care leads to . . .
Care recipient utilization	↑ Medicare emergency room use, <u>if poor CG well-being</u>
Care recipient health care costs	↑ Medicare expenditures, <u>if poor CG well-being</u>
Care recipient health outcomes	

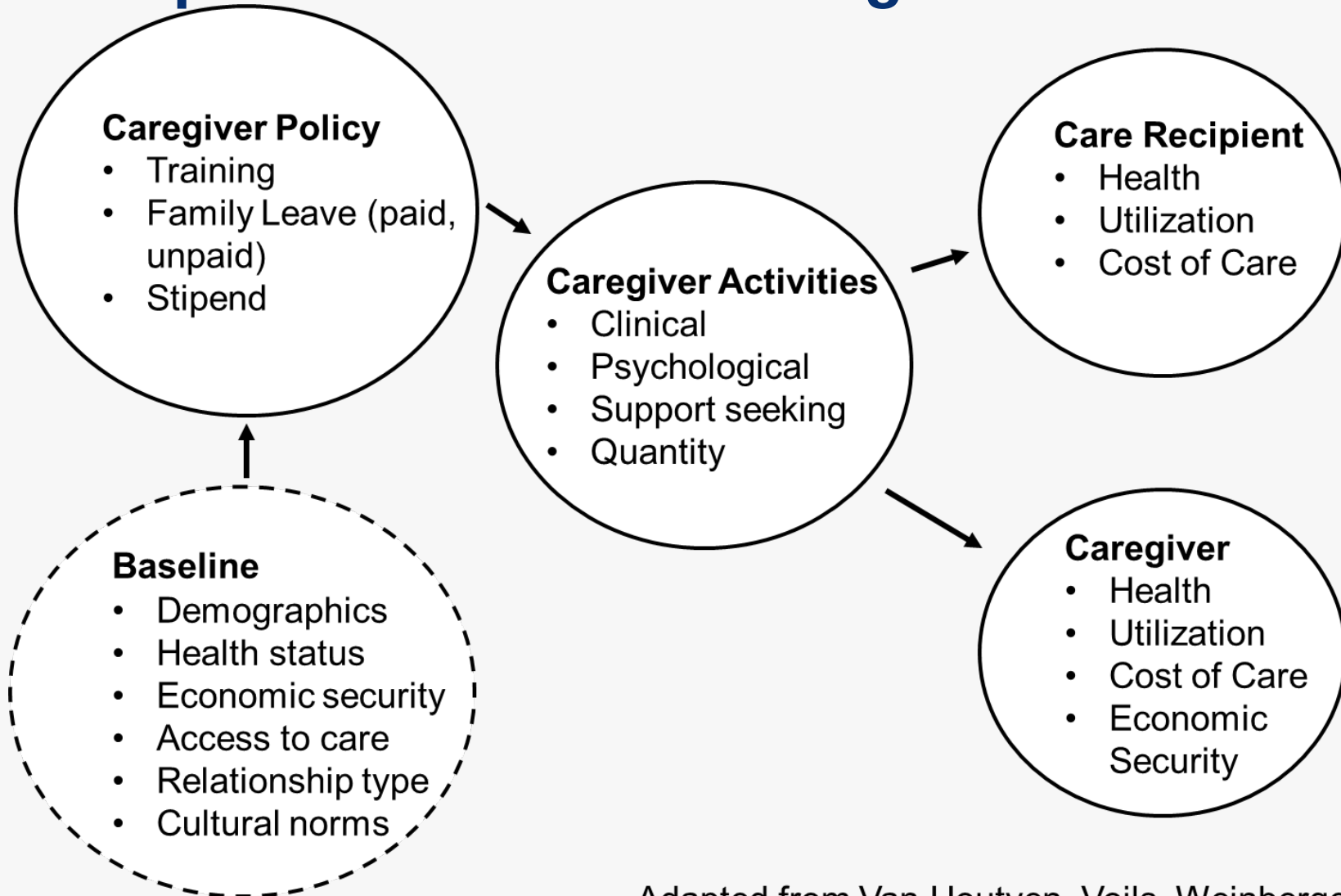


Spillover “Costs” of Family Caregiving

	Informal care leads to . . .
Caregiver utilization	↑ Drug utilization for intensive CG
Caregiver (CG) health status	↑ Depressive symptoms ↑ Worse self-rated health
Caregiver (CG) economic status	↑ Quit work ↑ Retire early ↑ Out-of-pocket costs ↑ Debt ↓ Assets ↑ Missed work days, if CG depressed ↓ Hours of work, if remain working ↓ Wages for female caregivers



Expected Effects of Caregiver Policies



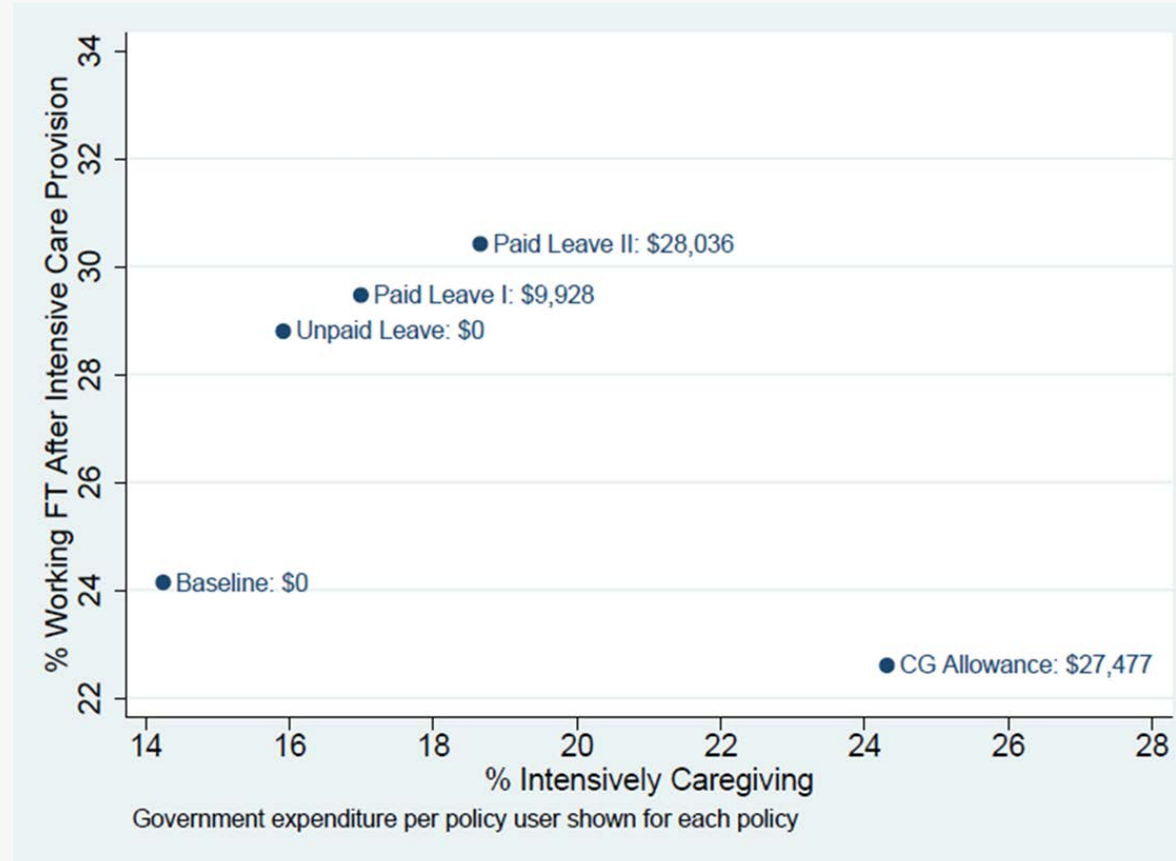
Adapted from Van Houtven, Voils, Weinberger, 2011



Optimal policy will enhance positive and minimize negative spillovers of caregiving in serious illness

Consider CG policy in light of different economic sector goals

- Labor: Keep women working as long as possible → increase tax revenue
- Health: Keep adults w/ serious illness at home → reduce Medicaid costs



Graph from Skira, 2015, w/ permission



Optimal policy will enhance positive and minimize negative spillovers of caregiving in serious illness

- Consider effects of LTC policies more broadly on caregivers and frame against the net benefits of a given CG policy
 - E.g. a policy that increases private LTC insurance coverage reduces informal care and this has spillovers to next generation: LTC insurance increases work activity of the children in next generation (Coe, Goda, Van Houtven, 2018)
 - E.g. a policy that expands formal home care benefits may or may not reduce informal care but may increase caregiver well-being and care recipient outcomes
- Consider all spillovers to understand net welfare gains of a caregiver support policy or other LTC policy



Thank you!

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