Promoting healthy aging throughout the life span and preventing chronic diseases is key to long-term care cost containment and quality of life improvement.

Costs for persons in long-term care facilities under age 65 are shared between federal, state and local government. Since 2003, local governments have been responsible for paying 20% of the state’s share. The counties have reduced the number of people under age 65 who have been in nursing homes more than 90 days; however, some individuals require nursing facility level of care and there are no local community options for them to safely relocate.

A population-based approach is critical to health reform and system innovation, and there is a key role for local government. County-based health care purchasing, ACOs, and IHPs provide an opportunity to build a prevention-focused, community-based local case system that optimizes health while controlling costs for the Medical Assistance population.

**Local Data**
MMS Community Health Behavior Survey

**IN 2014...**
the elderly dependency ratio (65+ years) was 27.4% compared to MN state average of 21%

45.7% of MMS residents 65+ are in good overall health status

7.8% of MMS residents 65+ have used public transportation, such as Trailblazer Transit or Meeker County Transit

92.9% of MMS residents 65+ have seen a doctor, nurse, or other health professional in the past 12 months
65.4% of MMS residents 65+ have been told they have high blood pressure compared to 58.3% of all Minnesota residents 65+

27.1% of MMS residents 65+ have been told they have diabetes or pre-diabetes compared to 22.1% of all MN residents 65+