

Long Term Care: The Potential High Risk for Athletes

Makenzie M. Mroczenski

Department of Actuarial Science, UW-Milwaukee

Abstract

Long term care insurance is complicated, and it is not always clear to people whether or not it is worth the investment. It is very important, especially as more of our population becomes elderly, that people are informed about their long-term care choices. However, long term care and insurance is not only for the older population. Other groups of people such as professional athletes can be at a higher risk for needing it than the average adult. This paper is to ensure that everyone is aware of the basics of long-term care insurance and what type of coverage it can offer. It is essential that people gain coverage before it is too late. Additionally, this paper will explore the relationship between professional athletes from various sports and the potential higher risk they are facing of needing long term care. Some people argue that athletes are healthier and at a lower risk for needing care in the future, but this paper aims to disprove that and explain the chronic injuries that impact athletes for the rest of their lives.

Keywords: long-term care, athletes, injury, eligibility, benefits, insurance, professional sports

Long Term Care: The Potential High Risk for Athletes

Long term care insurance is defined as insurance made to cover long-term services including personal and custodial care in various settings such as your home, nursing home or other facilities (“What”, 2020). It is essential to have coverage for long term care in order to ensure quality care either in one’s home or in a reputable private facility as oppose to a lower quality state owned facility. Long-term care can be very expensive and can cause financial stress on loved ones if an individual is not properly prepared to cover the expenses. Long term care can be necessary in many situations, such as after a life-threatening event such as a stroke or severe car accident, as one ages and experiences repercussions from aging, or even after serious athletic injuries with lasting impacts. Professional athletes endure years of strenuous physical activity and many injuries along the way that can linger for many years after their career is over. Long-term care is different from other types of health care because the goal is not to treat the illness, but rather to maintain a quality of life and daily functioning (Friedland, 2015). Therefore, this paper will explore the basics of long-term care insurance, eligibility, benefits, chronic injuries professional athletes face and athletes’ potential higher risk for needing long term care.

Literature Review

Long-Term Care Basics

Long term care sometimes carries the stereotype of being simply the care provided in nursing homes. Recent studies have shown that approximately fifty-eight percent of adults need nursing home care after age fifty (Johnson, 2019). However, it is much more complex and includes so much beyond nursing homes. According to the NAIC’s “A Shopper’s Guide to Long Term Care Insurance”, “Long-term care services actually may include help with activities of daily living, home care, respite care, hospice care or adult day care. This care may be given in

your own home, an adult day care facility, assisted living facility, nursing home or hospice facility.” Long-term care insurance provides people with many different options for care and the location of their care. This allows individuals to determine what best fits their needs and can help them function as close as possible to their life before the injury or illness. As of 2015, approximately 8,357,100 people were receiving long-term care. Home health agencies accounted for 4,742,500 of the cases, nursing homes were 1,383,700, hospices were 1,244,500, residential care communities were 713,000 and adult day care centers were 273,200 (Friedland, 2015). There are many different options for long-term care and each one has their pros and cons. The only way to be able to freely choose the best option for oneself or a loved one is to ensure that one obtains a proper long-term care insurance plan.

Many people do not plan ahead for the future possibility of needing care from someone other than family and friends. It is extremely important though because long-term care can be expensive. It is estimated that nearly one fifth of people will incur at least \$25,000 in out-of-pocket long-term care costs before they die (Friedland, 2015). The premium price varies depending on the type of plan someone chooses and where and when they purchase it. Out-of-pocket costs accumulate fast without any type of long-term care insurance. For example, here are some average costs in 2018: nursing home care per year was roughly \$89,297, assisted living facilities per year was \$48,000 and in-home care per year was \$34,320 (“A Shopper’s” 2019). These are all extremely costly and most people cannot afford them without assistance. Medicaid can help pay for portions of long-term care for those who qualify, but Medicare and other employee health insurances typically will not (“A Shopper’s” 2019). However, people don’t usually qualify for Medicaid until they have incurred substantial out-of-pocket expenses and have depleted their financial resources (Johnson, 2019). Some people may be able to use their

personal savings and assets, but they generally run out quickly since the cost is so high. In 2012, the approximate total spent on long-term care was \$219.9 billion between public, out-of-pocket and private spending (Friedland, 2015). Many people have conditions or disabilities that should require proper care either in home or in a facility by trained professionals. However, they cannot afford it, so family and friends provide the care at no cost because that is their only option (Johnson, 2019). This highlights the importance of long-term care insurance.

Even though it is so important to have long-term care insurance, many people feel as though they do not need to waste money on it. They think they won't need it or don't need it in the near future, so it is unnecessary to purchase. Therefore, it may be shocking to some that approximately 11 million Americans require long-term care and roughly 70% of people aged 65 and up are expected to need long-term care at least once in their life ("A Shopper's", 2019). This might lead people to believe they can just wait until they are older to purchase it since that is when their chance of needing it will increase.

This approach may seem smart. While it makes sense and helps people save money, it can lead to bigger issues down the road. For instance, if someone is in poor health or has started receiving long-term care services, they may not qualify for long-term care insurance ("What" 2020). Therefore, if people wait until they are older to purchase long-term care insurance, they may be taking the risk that their health deteriorates or an incident occurs that either deems them ineligible or raises their cost tremendously. By purchasing a policy earlier, there is less chance for a "freak" accident to occur or serious problems to arise due to age. There are several factors that contribute to the cost of your long-term care policy and in order to qualify you must go through extensive medical underwriting. Medical underwriting involves several questionnaires that ask questions about the prospective policy holder's health, lifestyle and other questions. The

answers to these questions and other collected information are then used to price the premium for the policy chosen. In an article titled “What is Long-term Care Insurance?”, it is stated that “the cost of your long-term care policy is based on: how old you are when you buy the policy, the maximum amount that a policy will pay per day, the maximum number of days that a policy will pay, the maximum lifetime amount that the policy will pay and any optional benefits you choose, such as benefits that increase with inflation.” This shows that it is not beneficial to wait until the last possible second to get coverage. There are large incentives to purchasing insurance early. There will be a lower premium because at a young age, an individual is seen to be lower risk. Also, it is best to not delay and take the chance of chronic health conditions developing that could wipe out eligibility (NAIC, 2016). For these reasons, it is better to act sooner in order to ensure that the individual receives coverage and for a lower cost.

Long- Term Care Insurance: Benefits

Long-term care insurance is not one size fits all. There are several different options for policies that one can purchase and the types of benefits that are included. Many different companies offer long-term care insurance policies and even some life insurance companies offer long-term care benefits (“A Shopper’s”, 2019). Companies may have very different policies, so it is important to do research and compare in order to find the most suitable one. Life insurance companies are beginning to offer an option to add a long-term care piece to one’s life insurance policy. Then, the policyholder is able to use this to pay for long-term care expenses. However, this will come at the cost of a higher premium and is not simply included (“A Shopper’s”, 2019). Employers may offer group long-term care insurance plans. They are typically at a discount that is better than what one can find individually. Also, most employers let spouses and retirees apply for coverage (“A Shopper’s”, 2019). The government also provides the Federal Long-Term Care

Insurance Program for any U.S. Postal Service employees, members and retired members of the armed forces and relatives of any of those who are eligible (“A Shopper’s”, 2019). The coverage among policies varies, but the most common types of services provided are nursing home care, home care, respite care, hospice care, personal in-home care, assisted living facilities and adult day care. Additionally, policies may only cover certain types of facilities or care. Therefore, it is important to know exactly what type of coverage one is purchasing and which specific care facilities the plan covers. For example, Medicaid typically covers most nursing homes, but very few residential or home care programs (Johnson, 2019). Policies also have some exclusions. The most common situations that typically don’t qualify for benefits are mental or nervous disorders such as Alzheimer’s, alcohol or drug addictions, illness or injury resulting from an act of war, treatment in a government facility and attempted suicide or other self-harm (“A Shopper’s, 2019). It is essential to explore all of the available options and be sure to choose the most appropriate plan for one’s needs.

Benefits that are covered are typically paid by companies in three types of ways. The first is the expense-incurred method. This is where the company pays the policyholder the amount of the expense or the maximum amount of the policy, whichever is less. The second way is the indemnity method. This is where the policyholder receives a predetermined amount regardless of the expense. The third is the disability method. In this method, the policyholder receives a daily benefit whether they are currently receiving long-term care services or not (“A Shopper’s, 2019). According to the NAIC’s “A Shopper’s Guide to Long Term Care Insurance”, most policies use the expense-incurred method. Policies vary greatly on how much coverage they provide and the amount of benefits they will pay. Most policies have a maximum benefit limit which is a total amount they will pay over the life of a policy. This maximum benefit can be specified in either

years or a dollar amount. In addition to a maximum benefit limit, there is usually a daily, weekly or monthly benefit (“A Shopper’s, 2019).

Long-Term Care Insurance: Eligibility

Another essential piece to understanding and choosing the right long-term care policy is eligibility. Eligibility refers to when a policyholder is able to receive benefits. There are two parts to eligibility: the benefit trigger and the elimination period. Benefit triggers are the criteria that an insurance company uses to determine if someone is eligible to receive benefits. Often this is determined by a nurse or social worker and are typically defined in terms of the Activities of Daily Living (ADLs) which are bathing, dressing, transferring, eating, continence and toileting or cognitive impairment. There are two other types of benefit triggers. One is cognitive impairment which is important for people who develop Alzheimer’s, dementia or other neurological conditions. The second is “medical necessity” which is determined by a doctor (“A Shopper’s”, 2019). A majority of policies begin to pay benefits when someone needs assistance with two or more of the six ADLs. Occasionally, companies may have different benefit triggers for home care and facility care, so it is important to pay close attention (“A Shopper’s”, 2019). Additionally, some policies have different definitions of benefit triggers. Some may say that the individual isn’t eligible until they need hands-on assistance with at least two activities of daily living, while others may say the individual is eligible simply if they need someone standing nearby in case they need help with any of the activities of daily living (“A Shopper’s”, 2019). The elimination period is defined as the amount of time that has to occur between a benefit trigger and when one can start receiving payment for services. This is comparable to a deductible in other types of insurance such as health or auto, but it is measured in time rather than dollar amount. Common elimination periods are either 30, 60 or 90 days. During the waiting period, the

policyholder is fully responsible for any costs incurred (“Receiving”, 2020). Typically, a higher premium is associated with a shorter elimination period (“A Shopper’s”, 2019). Therefore, it is important to consider what type of elimination period is right for one compared to the financial burden that comes with it. Finally, some companies or policies may require that the policyholder receives care during the waiting time in order to fully satisfy the elimination period (“Receiving”, 2020). There are two different ways that a company can count an elimination period. The first is called the calendar day method. Every day that the policyholder satisfies the benefit triggers counts toward the elimination period regardless of whether they received any services that day. The second method is called service days method. This method only counts the days where the policyholder actually received and paid for professional services towards the elimination period. This method will take longer if the individual is only receiving care a few days a week and therefore, they will incur more out-of-pocket expenses (“A Shopper’s”, 2019). Additionally, different companies and policies have unique rules regarding the elimination period. With some policies, policyholders may be required to meet the elimination period every single time they require care, whereas other policies may only require that it is met once in their lifetime (“A Shopper’s”, 2019). Once the benefit triggers have been met and the elimination period has been fulfilled, most policies will begin to pay the pre-set daily amount until the lifetime maximum value of the policy is met (“Receiving”, 2020). It is vital to consider the terms of eligibility when purchasing a long-term care insurance policy.

In addition to benefits and eligibility, inflation protection is another highly important feature to consider when choosing a long-term care policy. Inflation protection will increase the premium. However, the reason for this is that it is also increasing the potential benefits (“A Shopper’s”, 2019). The costs of long-term care will rise over the years because of inflation.

Therefore, it is important to consider inflation protection in order to ensure that the benefits are still substantial enough in years to come. Inflation protection is even more important for people who purchase the policies at a young age. There are two different options to purchase inflation protection. One way is called automatic inflation protection. This automatically increases the benefit amounts each year. The other way is special offer inflation protection which lets the policyholder when they want to increase their benefits. They can choose to do it whenever they want, for example, every two or three years. In this case, the premium will increase each time the individual chooses to increase their benefits (“A Shopper’s”, 2019). Inflation protection may not be the best option for everyone and each policy, but it is something put some thought into depending on age and other circumstances.

Professional Athletes: Injuries Sustained During Career

As stated above, there are many aspects to consider when choosing a long-term care policy. Most people are not properly informed, and some wait too long to purchase because they think only elderly people need long-term care. While approximately sixty-three percent of people receiving long-term care are age sixty-five or older, there are several other groups also at a higher risk (Friedland, 2015). One of these groups is professional athletes. Professional athletes endure many years of intense physical training and strong impacts in contact sports. The main reason for this higher risk of needing long-term care is simply the number and severity of injuries sustained while playing. First, it is important to explore the difference between acute and chronic injuries. An acute injury is the result of a traumatic event and usually requires immediate medical attention. It is typically treated within a relatively short amount of time. Chronic injuries are those that are the result of an outstanding condition or overuse of a certain body part. These injuries cannot always be traced to exactly one thing. For this reason and others, they are much

more difficult to treat, and often times are left untreated (Broadbent, Chrzanowski & Fagan, 2011). Chronic injuries are the main ones that pose a concern in the long-term care industry. While playing sports, athletes are often times overusing certain body parts or putting them at risk for injury. This can lead to conditions like osteoarthritis. This can lead them to suffer from pain while performing activities, swelling and a consistent ache even while resting (Broadbent, Chrzanowski & Fagan, 2011). Athletes may suffer certain injuries while playing and later be cleared to play. However, there often are long-term side effects that may not become prevalent until later in the athlete's life.

Brain Injuries: Concussions and Related Diseases

One of the most severe injuries athletes sustain is a concussion or other head trauma. Contra Costa Health Services explains "A concussion is a disturbance in the brain caused by strong force, direct or indirect, applied to the head." (Yasul, 2014). It can cause a variety of physical, cognitive and emotional symptoms (Broadbent, Chrzanowski & Fagan, 2011). There are many common symptoms that occur following the injury. These can include fogginess, headaches, blurred vision, nausea, vomiting, confusion and slowed brain functioning. Additionally, a concussion may cause changes in sleep patterns or behaviors (Yasul, 2014). Concussions take time to heal and it is essential that the athlete waits the proper amount of time before returning to play. It can be extremely dangerous for a player to return to play while they are still suffering from a concussion, even a minor one. A subsequent concussion while still experiencing symptoms from the first one could have damaging health effects (Broadbent, Chrzanowski & Fagan, 2011). Additionally, even when the symptoms resolve, and the concussion is "healed" at the moment, there may still be repercussions in the future.

Sports that possess the highest rates of concussions are high impact such as football, hockey and rugby. Concussions are possible in other sports, but they are much more prevalent in these contact sports. Not only are athletes from these sports more susceptible to a concussion, but they are at risk for suffering from them repeatedly. For example, an NFL player can experience hundreds of concussions throughout their career. Each time their helmet is hit, their brain is slammed against their skull. When this happens, nerve axons are broken or twisted (Broadbent, Chrzanowski & Fagan, 2011). Repeated head trauma may put individuals at risk for cognitive decline, neurobehavioral changes and neurodegenerative disease (McAllister & McCrea, 2017). Research continues to grow and show that repeated head trauma leads to chronic traumatic encephalopathy which can lead to confusion, dementia, memory loss, and depression. It may also be linked to ALS, Parkinson's and Alzheimer's (Broadbent, Chrzanowski & Fagan, 2011). As technology advances, researchers are able to use helmet sensors to study impacts and learn how they affect the athlete's brain. Specifically, researchers are looking at the frequency and magnitude of head injuries in collegiate athletes. According to "Long-Term Cognitive and Neuropsychiatric Consequences of Repetitive Concussion and Head-Impact Exposure", "Crisco et al, in a large study of 3 collegiate teams, showed that impact exposure varied across teams, type of activity and position." Additionally, "Long-Term Cognitive and Neuropsychiatric Consequences of Repetitive Concussion and Head-Impact Exposure" looked at a study done by Wilcox et al involving collegiate ice hockey players. The magnitude of the impacts varied across sports and were different for various positions in each sport. Consequently, there is not a ton of data on recurrent concussions and the lasting impacts. This is simply due to the fact that it requires extended periods of time tracking an individual. However, in a study performed in 2012, it was found that a repeat concussion was less likely than the initial concussion, but recurrent

concussions are associated with more serious symptoms that tend to last longer and have more life-long impacts (McAllister & McCrea, 2017). Therefore, even though athletes aren't as likely to suffer multiple concussions, the effects of each subsequent one can be detrimental. Additional studies have been done on American professional football and soccer players. One study involved seventy-two former NFL players who underwent structural imaging. It was revealed that these athletes had a higher rate of cavum septum length (CSP) and greater length and greater ratio of CSP to septum length than the control group which consisted of non-contact athletes. This greater amount of CSP is connected to decreased memory performance and word pronunciation. Additionally, football athletes who had suffered from a concussion had cortical thinning of the anterior temporal lobe and orbitofrontal cortex. This is associated with lower cognitive functioning (Manley et al., 2017). Many defects can be found in the brain in retired athletes. Even though they may not be suffering from a cognitive impairment or disease at the time of discovery, it can get worse with age. The end result may be long-term care because the individual is not able to be left alone or perform certain daily tasks.

Neurodegenerative disorders also may have an increased probability following multiple concussions. Traumatic brain injury (TBI) is a risk factor for Alzheimer disease. Therefore, multiple TBIs and especially severe ones, are linked to putting an individual at risk for developing neurodegenerative disorders later in life. A study performed in 2005 by Guskiewicz et al looked at professional football players, their playing history and cognitive functioning. The first survey collected information on the player's age and the number of years spent playing professional football. The second survey asked questions about memory and cognitive functioning. It was found that players who sustained three or more concussions had a three times greater chance of having memory problems compared to someone who had never suffered a

concussion. Researchers also found that the average age of the onset of Alzheimer's disease was earlier in retired professional football players than the average adult male (McAllister & McCrea, 2017). Another popular disease is Chronic Traumatic Encephalopathy (CTE). It is associated with repeated trauma to the head and is linked to the development of dementia. This disease is characterized by abnormal forms of the protein tau found in the brain ("Chronic"). Symptoms include memory problems, personality changes, aggression and depression ("Chronic"). However, it is hard to diagnose and as of right now the only way to diagnose it one hundred percent accurately is during an autopsy. Additionally, there is no cure for CTE just like many other neurological diseases ("Chronic"). Repeated brain trauma is typically the cause of CTE and therefore could be the result of repeated concussions.

In addition to football, hockey and rugby, boxing is a sport with a high risk of head trauma. According to "What Boxing Tells Us About Repetitive Head Trauma and the Brain", "The initial description of what is now known as chronic traumatic encephalopathy was reported in boxers in 1928." (Bernick & Banks, 2013). More research has obviously been done over the years, but brain injuries due to sport has been around for many years. It is not shocking that boxers suffer from head injuries. They experience thousands of blows to the head over their careers. There is a study called *Professional Fighters Brain Health Study* that explores current professional fighters, retired professional fighters and a control group. The goal of the study is to evaluate the relationship between head trauma and changes in brain imaging and neurological functioning over time (Bernick & Banks, 2013). This type of study is crucial for this topic because it is extremely hard to draw conclusions from studies that only look at current athletes. It is essential to track athletes both through their career and after retirement. Then, conclusions can be drawn about whether the injuries sustained during their career have caused diseases later in

life. The more research and longitudinal studies that are completed, the more accurate data there will be. This will allow athletes to be properly informed and organizations to make sure that they work with athletes to have a care plan in place.

Osteoarthritis

Concussions are not the only sports injury that can have long-term effects. Osteoarthritis is a disease that many athletes develop later in life because of injuries they suffered while playing. Osteoarthritis is described as a degenerative disease that involves the loss of cartilage, inflammation, joint stiffness, pain and loss of range of motion (Madaleno et al., 2018). This disease affects roughly thirty million Americans (Godman, 2018). Sports can be very demanding physically and cause athletes to sustain joint injuries. Osteoarthritis is very common in knees following trauma. It can also affect hips, back, neck, shoulder and hands. Individuals who suffer from osteoarthritis may need physical therapy, medications, injections or even joint replacements (Godman, 2018). People may be unable to dress themselves, move around freely and perform other tasks. Essentially, they struggle with daily activities and may need assistance through home care or may even need to be placed in an assisted living or nursing home facility.

Research has shown that professional athletes do not experience a higher mortality rate than the general population (DeKosky et al., 2018). Even though their mortality rate is not any higher, they are seen by most to be at risk for developing chronic diseases and consequently, needing some form of long-term care.

Long-Term Care: Prevalence in Athletes

Alzheimer's and other neurodegenerative disorders are one of the main reasons people need long-term care, whether in home or at a facility. Therefore, athletes seem to be at a higher risk because of their higher chance of developing these diseases and disorders. Everyone

experiences aging and some risk for needing care as they get older. However, athletes endure injuries that have long-term impacts and therefore increase their risk. It is essential that they are aware of the higher risk and know the options for coverage after their career.

Financial Impact of Long-Term Care

Many people don't think about long-term care or know about their options for coverage. It may seem surprising that professional athletes who have a high salary could be in the position of not being able to afford their medical bills. However, long-term care is expensive and the lack of information and discussion regarding long-term care at earlier points in individuals and especially athletes' lives can be detrimental. This can lead to many unpaid medical bills and unfortunate financial situations for former professional athletes.

Severe injuries can cause professional athletes' careers to be over in a split second. Most people aren't prepared for their career to end abruptly. However, even athletes whose careers don't end with an injury may not be prepared for the medical bills that come after retirement. One example of this is Dave Pear who played for Tampa Bay and Oakland. He suffered a serious injury and was forced to retire. His body began to deteriorate, and his money was running out quickly. A writer from the Washington Post named Michael Leahy did an in-depth piece on Pear. He explained that Pear has confusion, long-term memory loss, short-term memory problems and other cognitive problems. All of these life altering issues stem directly from the injury Pear suffered to his head and neck in a game. However, his former team does not cover his bills and he is unable to work. His quality of life has decreased significantly, and he needs long-term care. However, he was not receiving it because it wasn't covered (Martin & Leahy, 2008). Medical bills add up quickly and can cause major financial stress.

The unfortunate fact is that Dave Pear is not alone. Another case is Reggie Williams. He has undergone twenty-four knee surgeries. As a result of injuries and surgeries, his right leg is now three inches shorter than his left. Furthermore, he has no insurance. His surgeries including knee replacements and a bone infection have cost him hundreds of thousands out of pocket. Also, he is unable to qualify for NFL disability benefits and lost the battle with his former team over a workers' compensation claim (Jenkins & Maese, 2013).

Long-Term Care Insurance in the NFL

Many former NFL players had similar experiences and have been working to get the NFL to create better pension plans including disability and long-term care. There is a large debate over who should cover these costs. The average player's NFL career is only roughly four years. Research reports that one in four former NFL players will need a joint replacement, they are four times as likely to suffer neurodegenerative diseases and five times as likely to suffer from arthritis than the average adult (Jenkins & Maese, 2013). Therefore, they are putting their health on the line and enduring medical bills with little support from their team or the NFL.

In 2011, the NFL realized the need for care and started a long-term care program. In order to be eligible to apply for the program, retired NFL players must be enrolled in the Bert Bell/Pete Rozelle NFL Player Retirement Plan and be between the ages of fifty and seventy-six. Spouses of retired players are also able to enroll if eligible. There is an open enrollment period each year when players can enroll. Players must undergo underwriting in order to be approved for coverage. The plan includes a maximum daily benefit of \$150 per day and a maximum benefit of \$219,000. There is also an elimination period of ninety days for facility care and zero days for in home care. Additionally, there is a monthly home health care benefit of \$4,500. There are additional benefits that can be added on to the plan. The first is the five percent compound

Benefit Increase Option, also known as inflation protection. The second is the Nonforfeiture Benefit. The NFL pays the premium for the included benefits and the players are responsible for the additional benefits if they choose to purchase them (“NFL”, 2020). Therefore, the NFL has made improvements for players in more recent years. However, this plan may not be enough coverage for some athletes. Facilities and different types of care have varying prices and athletes may need to purchase additional coverage on their own in order to afford the facilities and care of their choice.

Potential Lower Risk in Athletes

Clearly, professional athletes and their bodies endure a lot throughout their careers. While some argue that athletes may be at an increased risk for needing long-term care, others argue that sports actually decrease chronic diseases and mortality. Physical activity, of various kinds and levels, provides many benefits. It is known to lower the risk of cardiovascular disease, premature death and several chronic diseases (Russell et al). Therefore, there is a disagreement on whether sports and their injuries increase or decrease the risk of needing long-term care. However, it seems that more research is showing the detrimental effects that injuries can have on athletes. There is no definitive conclusion that can be made on whether athletes experience a significantly higher risk than the average American.

Regardless of whether an individual is an athlete or not, it is essential to pay attention to long-term care and proper coverage. It is expected that by 2050, the number of people using long-term care will double from what it was in 2000 (Friedland, 2015). This is mostly a result of the aging population. Long-term care can be an afterthought for a lot of people. However, it should not. Premiums will be lower at a younger age and when the individual is in better health and has a lower risk for needing long-term care. Additionally, it has been shown that

professional athletes are not exempt from needing long-term care. The injuries they sustain leave lasting impacts that will later qualify them for long-term care. Overall, long-term care insurance is an important thing to consider and people need to do their research to find the best company and policy for them. Professional athletes need to keep pushing for better long-term care insurance and support from their organizations. A life-altering event could happen at any moment. Each day people experience the slow and silent effects of aging. Both things put everyone at a slightly higher risk each day for needing long-term care.

Further Research

A lot of quality research has been done on concussions and other sports injuries. However, more research is still needed. More athletes need to be studied for longer periods of time in order to truly be able to draw a conclusion on whether or not concussions or other injuries put them at a higher risk later in life. A lot of concussions are studied in the moment and symptoms are monitored for the brief period after until the athlete is cleared. We need more information on their health and symptoms years after the injury. High contact sports could be a large reason why adults, young or old, need assistance in daily life or end up suffering from serious chronic diseases. With more research, sports organizations could take more precautions, have better rules and establish better programs for caring for their current and retired athletes and their families.

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