

# LIMBO

THE HEALTH CARE GAME

*Instruction Booklet*



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# *Background Notes For Game Leader*

The health care limbo game concept is based upon the following:

- The game is designed to serve as a springboard for a follow-up discussion. That is, the game itself does not have to answer every question it raises. It is designed as a “trigger activity” to make people think and participate in the discussion that follows.
- The game focuses on costs and long-term care as major problems within the existing health care system. Other problems exist, but these are two that most people can identify with.
- An element of “chance” is incorporated into the game; this reflects the role “chance” plays in real life. A number of events included in the “Fate” cards should spur a discussion on how people plan for or deal with these unexpected events.
- The concept of insurance coverage is used in the game to demonstrate how insurance coverage can affect one’s ability to get health care.
- Players are rewarded for any positive, consumer-oriented steps they take in the health care area.
- The game is designed to be “over” fairly quickly. We

want the game to be long enough to keep people involved, but short enough to allow time for a good follow-up discussion. The game normally runs about 15 minutes.

**A game board, cards, dice and instructions are enclosed.**

\* **Note:** Some of the game situations may closely parallel some of the game players' personal experiences. The leader should be compassionate and tactful when such situations arise. For example, if a player has a relative who has died as a result of a problem with access to care or if a player knows someone who has suffered from serious post-operative complications, the leader needs to make sure this is acknowledged respectfully and not talked about in a negative way.

\*\* *Special thanks for the concept of the Limbo game go to Linda Barrett, AARP Associate Area Representative, Kansas City, MO, with additional thanks to the volunteer leaders in AARP's Area 6 for their assistance in testing the game.*

# *Instructions for Using the Game*

1. Decide who will be the Game Leader. The Game Leader reviews the instructions out loud with the players, oversees the game and leads the discussion at the end of the game. (The Game Leader can be the same as the Banker.)
2. Decide who will be the Banker for the game. The Banker oversees the game, pays people their Income and helps them make their payments. The Banker also coordinates the Health Insurance Coverage cards.
3. A maximum of eight people can play Limbo. At the beginning of the game, each player selects, at random, a white Income card (either \$20,000, \$16,000 or \$12,000) and a Health Insurance Coverage card. Players place these two cards in front of them. The Banker keeps the remaining Income and Health Insurance Coverage cards.

**(Note:** The colored Income cards for \$10,000, \$8,000 or \$6,000 are *not* starting Income cards. They are used during the game if a player lands on a square that indicates Income has been cut in half. The Player's original Income card is then exchanged for a new, reduced Income card.)

Players' Health Insurance and Income may change

during the course of the game. For instance, you may lose your Health Insurance or part of your Income as a result of instructions on a card. Or, you may land on the Insurance Company square and decide to purchase or upgrade your Health Insurance. The Banker is in charge of keeping track of people's Income and Health Insurance. The Banker will exchange your Income or Health Insurance Coverage card with appropriate new cards whenever your status changes. As always, the players place the new cards in front of them.

4. Each player should select a game piece and begin at Home square.

5. The play money included is in \$20, \$10, \$5 or \$1 denominations. However, each denomination will represent \$20,000, \$10,000, \$5,000 and \$1,000.

6. Players collect their Income at the beginning of the game, and each time they land on a "Collect Your Income" square.

7. Your total Income to date at any point in the game is considered to be your Savings.

8. Players who have no Health Insurance must pay for all costs out of their own pocket — that is, out of their Savings.

9. Players who have Health Insurance can have their Health Insurance pay for part of their health care costs. (The portion of costs that Players' Health Insurance covers is determined by the Health Insurance Coverage

Card.)

10. Players roll the die to move about the board, picking up cards that correspond to the name of the square on which they land. For example, a player who lands on a “Cost” square would pick up a “Cost” card and follow the instructions on the card. Cards would be returned to the bottom of their respective piles.

11. When a player lands on a square (like Nursing Home) which requires the player to turn half of his/her Savings over to the bank, the player should round the amount up to the nearest thousand dollar. (For example, if the player has \$17,000, the bank gets \$9,000, not \$8,500. If a player has \$18,000, the bank gets \$9,000.)

12. When players land on the “Buy Insurance” square, the banker should tell them they have several options. First, if a player is Uninsured, one option is to buy some insurance for \$8,000 and become Underinsured, or buy more insurance for \$16,000 and become Insured. If a player is already Underinsured, he/she can pay the bank \$8,000 and become Insured.

Players can also opt not to buy insurance at all; players do not have to buy insurance just because they land on the “Buy Insurance” square. Remember: When players' insurance status changes, they need to replace their Health Insurance Coverage card with the appropriate new card.

13. When a player runs out of money, that player puts a playing piece in "Limbo." The game is then over for that player.

14. The last player remaining when everyone else has landed in Limbo is the winner and the game is over.

15. The Game Leader leads the post-game discussion using the enclosed questions as a guide.



# *Post-Game Discussion Questions*

- What did you think about the Fate cards?
  - *Did it make you think that the “unthinkable” might happen to you? How do you “plan” for things like that?*
- How was the game like real life?
- How was it not?
- What other costs do you have to consider and plan for in addition to health care costs?
  - *What about the Nursing Home square where you had to turn over half your savings?*
  - *What about people who live in rural areas and have nowhere to go for health care?*
  - *What about being unable to get care because you don’t have insurance or make enough money?*
  - *What about higher insurance premiums and benefit cutbacks?*
  - *How are these problems going to be solved?*
  - *To whom do you really pay money (i.e., not the Bank)?*

- What do you think happened to the people who ended up in Limbo?
- What would likely have happened to the remaining player?
- What might they have done to avoid it?
- What would you have done if it had happened to you?
- How many people do you think have no insurance at all in America?
- Who do you think these people are?
- How many do you think have inadequate insurance?
- What do you think inadequate insurance means?
- When do people find out their insurance is inadequate?
- Who do you think these people are?
- What are some problems even people who have insurance face?
- What do you think about people who can't get insurance coverage because of pre-existing health conditions?
- Does this seem fair to you?
  - *How might it happen to you — changing jobs,*

*changing insurance policies, etc.*

- Do you think these are problems that only older people face?
  - *What about people who are self-employed?*
  - *Work part-time?*
  - *Get their first job only to find that a health problem such as diabetes prevents them from obtaining health insurance?*
  - *Children whose parent(s) work, but whose insurance doesn't apply to dependents?*
  - *How is your work ethic (where health insurance was part of the deal) different from today's?*
- What kind of insurance do you have?
- Is it adequate?
- How would it have covered you if you had encountered some of the situations you saw in the game?
  - *Do you know anybody who experienced something like what happened in the game?*
  - *Someone whose insurance premiums have increased?*
  - *Someone who ended up in a Nursing Home?*

- *Someone who doesn't have insurance?*
- How do you think people in other countries handle situations like these?
  - *How are other countries' health care systems different from ours?*
  - *What are the advantages / disadvantages?*
- What might the solutions to these health care problems involve?
- What solutions have you heard of?
- How might you find out more about solutions?
- What publications might you order from AARP to become a better health care consumer?

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# Long-Term Care Card





# Cost Card







# Health Insurance Coverage Card

**LIMBO GAME**

**10**

**LIMBO**

**10**

**MONEY**

**\$**

**\$**

**\$**

**\$**



# Reduced Income Card





# Smart Consumer Card



# Fate Card



# Income Card



Insurance Company (see #1)	Rural Area Back Road	Rural Area Back Road	Collect Your Income	Cost	Fate	Cost	Smart Consumer	Collect Your Income	Cost	Hospital (see #2)
Fate	Pay \$1,000	Pay \$2,000	Pay \$3,000	Pay \$4,000	Pay \$5,000	Back Road	Cost	Cost	Cost	Cost
Collect Your Income	Cost Card	Smart Consumer Card	Rural Area Card	Long-Term Care Card	Fate Card	Back Road	Collect Your Income	Collect Your Income	Collect Your Income	Collect Your Income
Smart Consumer	Cost	Smart Consumer	Smart Consumer	Smart Consumer	Fate	Home Health Care	Post-Hospital Complications	Post-Hospital Complications	Post-Hospital Complications	Post-Hospital Complications
Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Home Health Care	Home Health Care	Home Health Care	Home Health Care	Home Health Care
Fate	Pay \$10,000 and go home. (Your health insurance doesn't cover this cost.)	Pay \$2,000	Pay \$3,000	Pay \$4,000	Pay \$5,000	Home Health Care	Home Health Care	Home Health Care	Home Health Care	Home Health Care
Collect Your Income	<b>LIMBO</b>	<b>LIMBO</b>	<b>LIMBO</b>	<b>LIMBO</b>	<b>LIMBO</b>	<b>LIMBO</b>	<b>LIMBO</b>	<b>LIMBO</b>	<b>LIMBO</b>	<b>LIMBO</b>
Collect Your Income	The health care game is over for you.	The health care game is over for you.	The health care game is over for you.	The health care game is over for you.	The health care game is over for you.	The health care game is over for you.	The health care game is over for you.	The health care game is over for you.	The health care game is over for you.	The health care game is over for you.
Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer
Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer	Smart Consumer
Home (start here)	Collect Your Income	Long-Term Care	Long-Term Care	Relapse Go back to Nursing Home	Rural Area	Fate	Collect Your Income	Long-Term Care	Long-Term Care	Nursing Home (see #3)
Home (start here)	Collect Your Income	Long-Term Care	Long-Term Care	Relapse Go back to Nursing Home	Rural Area	Fate	Collect Your Income	Long-Term Care	Long-Term Care	Nursing Home (see #3)

# LIMBO

The health care game is over for you.

## Home Health Care



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- 1. Insurance Company**  
To buy additional insurance protection talk to the banker. (Uninsured to underinsured - \$8,000, Uninsured to insured - \$18,000, Underinsured to insured - \$8,000)
- 2. Hospital**  
Pay \$8,000. (Your health insurance, if you have any, can help cover this cost.)
- 3. Nursing Home**  
Pay half your savings and skip your next turn. (Your health insurance doesn't cover these costs.)

