

Statement for the Record by



American Health Care Association

for the

House Committee on Veterans' Affairs

Subcommittee on Health Hearing

on

“The State of VA’s Long-Term Care Program Present and Future”

May 9, 2007

On behalf of the nearly 11,000 long term care facilities represented by the American Health Care Association (AHCA), we salute the Veterans’ Affairs Committee for not only recognizing the needs of America’s frail, elderly, and disabled veterans, but also for continually seeking to optimize the quality of their care in the face of substantial budgetary and demographic challenges.

In light of the increasing number of aging baby boomer veterans now seeking to access VA health care services, the increased care needs for older veterans already enrolled, and younger wounded veterans now in need of care, we recognize and are extremely sympathetic to the fact the VA’s resource base and capacity are stretched to the maximum limit, and then some.

Consequently, it may not have the resources to address the existing and projected needs for skilled nursing and rehabilitative care – especially in light of the type and nature of injuries being sustained in Iraq and Afghanistan. From this important standpoint, Mr. Chairman, we want to support the VA’s essential mission one hundred percent – not somehow impede or supplant it in a manner that prevents our returning heroes from receiving the best care our grateful nation has to offer. Our nation’s community nursing homes (CNHs) stand ready to help veterans and the VA through this crisis.

CNHs are a vital component of the VA long term care system. Whereas VA medical facilities tend to provide care to residents with high acuity levels, CNHs are an excellent choice for veterans who either have acuity levels that do not warrant placement in a VA facility, but are too high for home health care – or for veterans who would be too far from their families if placed in one of their state’s VA Medical Facilities or State Veterans Nursing Homes. In 2006, over 13% of all veterans receiving nursing home care were in CNHs. That percentage should increase, given the VA’s stated plan in the FY 2008 Budget Submission to focus its long term care efforts on the “best setting for the [veteran] . . . and providing that care closer to where the veteran lives.” Given that there is a skilled nursing facility in almost every county in the nation, AHCA remains ready to help the VA continue providing high quality, clinically appropriate long term care to our nation’s veterans through CNH placements.

By 2012, there are expected to be approximately 1.3 million veterans over 85 years of age, and it is imperative that we work together to insure that both the veteran and civilian populations receive the best possible care, and that one population should not receive care at the expense of another.

One key issue negatively impacting our ability to serve veterans and others in need of long term care is the ongoing staffing crisis, and we need to ensure that we do not compete against one another for the shrinking pool of qualified workers who serve as the backbone of our nation's long term care system. In that context, we should fundamentally reevaluate elements of the Veteran's Millennium Health Care and Benefits Act of 1999 – which established new standards for evaluating a state's need for constructing new facilities for veterans.

Specifically, the methodology for establishing the need for new veterans' beds does not take into account the number of available community nursing home (CNH) beds in each state – beds immediately available, and which may be far closer to home. CNHs provide the option of living closer to one's family while receiving health benefits from the VA. As we all know, proximity to loved ones is critical in maintaining quality of life for any nursing home resident.

For the record, Mr. Chairman, AHCA does not discourage in any way funding necessary improvements to veteran's homes. But we ask that prior to appropriating millions in construction costs for additional facilities, the VA should work to determine whether there are existing quality facilities in proximity to the proposed new homes that could otherwise provide high quality care.

In an era of limited resources, especially at the VA, we should as a matter of intelligent public policy work to provide care in homes that currently exist, rather than constructing new facilities that, again, compete for staff and weaken our nation's entire long term care infrastructure.

AHCA looks forward to working with you, Mr. Chairman, and the rest of the Committee, in examining this issue in greater detail going forward. Our members are proud to serve America's veterans in their time of need and we look forward to working with the Committee and the Department to continue doing so in the future.

Thank you again Mr. Chairman, and members of this Committee, for holding this important hearing. With our nation's soldiers and veterans in both the national and international spotlight, our concern for their care and safety today as well as tomorrow has never been more important to the soul and conscience of the American people. They deserve the best we have to offer.

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