

Public Hearing

“Programs and Assistance for our Aging Veteran Population”

Testimony

House Veterans Affairs & Emergency Preparedness

And

House Aging & Older Adult Services August 28th, 2018

Department of Military and Veterans Affairs

Major General (Ret) Eric G. Weller

The Deputy Adjutant General for Veterans Affairs

Good morning, Chairmen Barrar, Sainato, Hennessey and Samuelson and members of the House Veterans Affairs and Emergency Preparedness Committee and Aging and Older Adult Services Committee We welcome the opportunity to be here today to discuss how we are meeting the emerging needs of our aging veterans and their families.

Pennsylvania is home to the 4th largest veteran population in our nation, more than 820,000 veterans reside within the commonwealth. These veterans have served in conflicts and wars, including World War I, the Korean War, the Vietnam War, the Persian Gulf War and most recently the Global War on Terror. Every day our Armed Forces transitions service members into veterans, these include the members of the Pennsylvania Army and Air National Guard. Our Service Members, Veterans and their families represent approximately 3.5 million Pennsylvanians who serve or have served our nation and the commonwealth. Veterans are in every county and every community throughout the commonwealth.

Caring for our aging veterans and their families

We are advocating for an aging veteran population. Over half of our veteran population is at retirement age of 65 or older, which means that more veterans are going to need care as they continue to age. Our six Veteran Homes (Homes) provide excellent personal care, skilled nursing, and dementia care for all Pennsylvania veterans regardless of their ability to pay. We also admit up to 12 percent non-veterans, which is comprised of eligible spouses of veterans. Our priority is to continue to deliver cost effective, quality health care to our residents. To meet the diverse needs of our aging veteran population, we have reduced our personal care beds to accommodate residents who require more skilled and dementia care. As the need for aging

services increases, we continuously explore innovative and efficient ways to provide superior care to Pennsylvania veterans.

Benefits, Services and Programs for our aging Veterans

The federal government creates veterans, and we must hold the Veterans Administration accountable when it comes to providing earned federal benefits to our most vulnerable veterans.

While most veterans are solid and resilient some need greater assistance to meet life's challenges. Our outreach mission is to educate, inform and assist veterans in seeking the benefits, services and programs that they have earned. We continue to work with our Veteran Service Organizations, County Directors and community partners to assist veterans and refer them to programs and services no matter where they are located. As such, we are also exploring the possibility of regionalizing our Outreach efforts in order to get 'closer' to the community and at the same time be able to provide purposeful and easy to find information to pertinent organizations. An example would be identification of premier clinics that specifically provide 'outpatient' services to veterans. We would then in turn ensure that this information would be easily accessible.

Pennsylvania offers state veterans benefits that were created to supplement or enhance federal benefits; these programs are available to eligible Pennsylvania veterans. Pennsylvania veterans share the same challenges as other aging Pennsylvanians. As they grow older, they need assistance to accomplish daily tasks and eventually may need long-term residential care. Over the past several years, we have been modernizing our Homes to provide personal, skilled and

memory care and to align our footprint with the community living center (CLC) models that are approved and preferred by the Veterans Administration.

We are also exploring viable and more cost-effective alternatives to building additional capacity. Two of the more promising ideas are to offer an Adult Day Health Care Program and also to expand the number of veteran long-term care beds in rural areas. The Veterans Administration supports state-operated Adult Day Health Care (ADHC) programs and provides a reimbursement for these services. DMVA is currently taking steps to pilot an ADHC program at our Southeast Veterans Center by 2020. A portion of the Home will be modified to accept thirty ADHC participants. This will require an increase of staff and, based on current reimbursement estimates, we are projecting a positive cash flow. If successful and fiscally feasible, our plan is to expand the ADHC program to all six of our Homes; with Hollidaysburg Veterans Center next on the list. This alternative will extend care to veterans by providing access to services in the State Veterans' Homes before resident care is necessary. Additionally, we are considering partnering with County Residential Homes to expand our capacity in rural areas without requiring the Department to invest in additional infrastructure. This model will allow for the expansion of services in underserved geographical areas without a significant increase in staffing. The constraint is funding to ensure that the County Homes meet and pass both the commonwealth and federal standards before gaining the approval of the Veterans Administration.

In lieu of County Home partnerships we have also begun to explore an alternative in which we would adopt the Veterans Administration's Community Based Outpatient Center (CBOC) concept. This model uses the VA Medical Centers as a center of gravity and then places smaller community-based clinics in their service areas through which veterans can be provided with

services closer to their homes. This allows our veterans to leverage the care and capability of the larger medical center at a smaller community-based facility; increasing the level and quality of care provided while reducing cost and inconvenience to the veteran. In much the same way we have begun to explore how we can use our six Homes as the center of gravity for providing long-term residential care and are considering the viability of building smaller (30 to 50 bed) facilities in the service areas that they support. This approach may allow us to focus resources where they are needed most and significantly reduce the cost of building a larger facility.

Staffing standards in our six Homes are designed to meet commonwealth and federal regulations, while addressing the acuity of care needs for this unique population. Our goal is to provide high caliber, long-term skilled nursing, dementia, personal and domiciliary care, while at the same time delivering that level care as efficiently as possible. To do this, we have documented Manpower Standards as we strive to maintain full-occupancy and align our staff and bed capacity in each Home to remain agile and adaptable as it relates to construction projects and any regulatory/mandated changes that occur.

Applicants to our Homes are largely incapable of self-support and demonstrate a financial need for admission. Unlike the private sector, veterans are not denied admission to our homes on grounds of inability to pay maintenance/resident fees. Residents of our Homes are required to make monthly payments against a maintenance/resident fee liability in accordance with a resident's ability to pay. Approximately 2 percent of our resident population pays full cost of care. One factor that sets us apart from other long-term care facilities is our benevolence regarding how we determine "cost to care". The financial ability of our residents is determined

at the time they enter one of our facilities and it is re-evaluated periodically; their cost to care is then established with a view toward settling the estate after the veteran and his spouse pass as opposed to taking all assets up front, prior to providing the care and services they need. This ideal is in keeping with allowing our veterans to maintain a sense of pride and dignity as they age. Another item of note is a recent study conducted by that DMVA highlights that we are also cost effective in comparison with the private long-term care community.

Conclusion

In conclusion, Pennsylvania's veteran population is aging; meeting the unique needs this population is our focus. Our Homes are the product of a benevolent vision to care for our most vulnerable veterans; those unable to secure or afford the care we now associate with this veteran benefit. It is imperative that we invest in our veteran programs and particularly our Veterans Homes. We here at the department are committed to improving our Homes and expanding our capacity to provide for the needs of Pennsylvania's aging veterans. We must care for the vulnerable, while improving our outreach to all veterans and their families. We are committed to providing education, awareness, and access to veteran's benefits, programs, and services throughout the commonwealth. Thank you for giving us the opportunity to serve the commonwealth's veterans. I am honored to advocate for all of those who have served our commonwealth and nation. I am prepared to answer your questions.