

Public Hearing

“Living Independence for the Elderly (LIFE) Programs”

Testimony

Senate Veterans Affairs & Emergency Preparedness

And

Senate Appropriations Committee

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Department of Military and Veterans Affairs

Major General (Ret) Eric G. Weller

The Deputy Adjutant General for Veterans Affairs

Good morning, Chairmen Vulakovich, Costa, Browne, Hughes and members of the Senate Veterans Affairs and Emergency Preparedness Committee and Senate Appropriations Committee. Thank you for the opportunity to be here today to discuss veterans and specifically the healthcare options available for this gracefully aging population.

We Are Pennsylvania

It is important that we remember that the federal government creates veterans in service to our nation. Our responsibility to our veterans is to educate and assist them in accessing and receiving the federal benefits that they have earned. Our task is to assist Pennsylvania veterans in accessing and receiving the state benefits provided by our legislature and approved by our governor. Our commitment is to identify gaps in program access and services to ensure that our commonwealth heroes and their families, who sacrificed for our state and nation do not fall through the cracks to be left behind and forgotten. We do this through partnerships and programs that link veterans with needs to the program, and services that can meet those in need.

Pennsylvania is home to the 4th largest veteran population in our nation, with more than 820,000 veterans. These veterans have served in conflicts and wars, including World War II, the Korean War, the Vietnam War, the Persian Gulf War and most recently the Global War on Terror. Every day our Armed Forces transition service members into veterans, to include the members of the Pennsylvania National Guard. In total, our veterans, service members and their families represent approximately 3.5 million Pennsylvanians. Veterans are in every county and every community throughout the commonwealth.

Veteran Homes

Over half of our veteran population is at retirement age of 65 or older. As they continue to age they are going to require care options that meet their medical and personal needs. Our six Veteran Homes (Homes) provide skilled nursing, memory care and personal care. In addition, the homes provide pharmacy services; physical, occupational, and speech therapy; social services; therapeutic and recreational activities; transportation; barber and beauty services; religious and spiritual activities; and hospice care. To adapt to the changing needs of our veterans, we have started modernizing our Homes to align with the VA Community Living

Center (CLC) models and reducing the number of personal care beds to increase our skilled and memory care capacity.

With Veteran Affairs (VA) approval and partial federal funding support, these Homes were established for Pennsylvania’s indigent and disabled veterans. The intent of the PA General Assembly when creating these homes was one of benevolence. So, unlike the private sector, applicants are not denied admission because of the inability to pay the full cost of care.

Approximately 2% of our resident population pays full cost of care. We conducted a cost differential study comparing our Homes and private nursing home care. The following differences were identified: 1) when comparing all-inclusive data, our costs are lower than the private sector; 2) private care facilities operate for profit resulting in a lower level of care, while our facilities are a benevolent and provide higher levels of care; and 3) our Homes provide dignified care to our most vulnerable veterans.

Five Year plan

We have developed a five-year plan to continue to increase our capacity and care options. This plan includes the continuation of facility modernization, a pilot of an Adult Day Health Care (ADHC) program using the medical model, and staffing a veteran-centric regional behavior health unit. Major renovations and upgrades are currently underway to modernize 75 skilled care beds at the Pennsylvania Soldiers’ and Sailors’ Home. Construction will begin next year at Delaware Valley Veterans Home (DVVH) to reduce the number of personal care beds and increase the number of skilled and memory care beds. We will be increasing the staff to support these additional skilled beds, to meet the increased level of care. The Southeast Veterans Center (SEVC) will begin a renovation and construction project to add an ADHC pilot program with an anticipated completion date in 2020. The ADHC initiative is supported with federal per diem funds from the VA, which will provide an option for veterans to partake in the care and services provided in our Homes while residing at home. The goal is to expand the ADHC option in our other homes as part of other proposed renovations. One of the largest projects is the replacement of the existing main facility at the Hollidaysburg Veterans Home with a CLC and an ADHC option in 2023 or 2024. These projects are currently approved or in the review process. Two projects in the planning phase are the expansion one at DVVH to increase skilled care and an

ADHC and the other at SEVC to replace Coates Hall which is an institutional care facility with a CLC. We continue to leverage our partnership with the VA to modernize and improve the facilities. In doing so, we continue to expand care options and treatment capacity to the needs of our veterans.

The newest initiative is a regional outreach concept in order to appropriately network our federal, state, local, 501(c)(3) organizations, and veteran organization partners. This network will coordinate and refer veterans to federal and state programs that they are eligible for or to the appropriate programs or services available in their communities. The focus areas for this initiative will include regional identification and advertisement of services such as; behavioral health services, substance abuse treatment services, and suicide intervention services. Additionally, we will be able to focus the network partners in serving veterans who are seeking housing, job skill training, education, employment, transportation, and securing other family needs.

In addition to these specific programs, we will continue to build cohesion in our partnerships with the County Directors of Veterans Affairs, the Veteran Service Organizations, and the many organizations throughout Pennsylvania that provide resources and services to veterans. Working together we will: 1) expand federal and state benefit services for eligible veterans; 2) identify service gaps by assessing the veteran’s needs; and 3) referring veteran’s to organizations able to fill the gaps. Concurrently, we will identify service barriers and work together to take actions to remove them.

Federal Care Programs

There is great value in resourcing collaborative efforts to increase the number of veterans and eligible unmarried spouses that receive these federal benefits. There are several federal programs offered by the VA that provide care options, but they have stringent eligibility requirements, and these programs are not available in all geographic areas. For example: geriatrics and extended care is provided at CLCs or by contract; hospice care is provided to those with a life expectancy of six months or less at CLCs or by contract; respite care is provided at CLCs or through in-home care for for less than 31 days per calendar year; medical foster home care is provided

through private homes in which trained providers care for a few veterans; skilled home health care services, which are short-term health services, are offered for homebound veterans or veterans who live far from VA facilities; and Aid and Attendance benefits, which are monetary benefits, are provided to pay for assistance needed for functions of daily living services. The VA also operates a VA Family Caregivers Program, which provides support and assistance to caregivers of post 9/11 veterans and service members being medically discharged. Under this program eligible family members receive a stipend and other program benefits. We continue to assist veterans in learning about, applying for, and accessing these benefits through our outreach network.

We provide many of the same services that are available from the VA through reimbursement and offer State programs for veterans and their unmarried spouses who are not eligible for federal programs. Our State programs are the bridge between veterans who served and receive only partial benefits from the VA, veterans who do not need benefits, and civilians who have not served. Our objective is to ensure that all veterans age with dignity and honor.

Conclusion

Veterans are a small population in comparison to the whole, accounting for less the 1% of the total population. But these veterans have answered the call of duty regardless of when or where they have served. Our responsibility and commitment is to ensure that veterans receive the full measure of the benefits that they earned as a result of their willingness to give their full measure in service to the citizens of this commonwealth and nation. The best way to honor our veterans is to ensure that they receive the benefits that they earned, the opportunities that they deferred while in service, and the gratitude of this commonwealth and nation. Most veterans thrive, some cope, but our most vulnerable veterans are often left in the shadows, marginalized and confused by a system that requires them to identify their own needs, actively seek out assistance from an opaque bureaucracy and then prove that they are worthy to receive the assistance and services they need. Through this network, we will change this paradigm by finding these veterans and meeting their needs.