

NATIONAL ASSOCIATION OF STATE VETERANS HOMES

"Caring for America's Heroes"

Statement of

ED HARRIES, PRESIDENT NATIONAL ASSOCIATION OF STATE VETERANS HOMES (NASVH)

on

DRAFT LEGISLATION TO INCLUDE A REPRESENTATIVE OF NASVH ON THE GERIATRIC AND GERONTOLOGY ADVISORY COMMITTEE

Hearing of the

HOUSE VETERANS' AFFAIRS HEALTH SUBCOMMITTEE SEPTEMBER 11, 2024

Chairwoman Miller-Meeks and Ranking Member Brownley:

As President of the National Association of State Veterans Homes (NASVH), I appreciate the opportunity to offer our strong support for draft legislation to include a representative of NASVH on VA's Geriatrics and Gerontology Advisory Committee (GGAC). Over the past decade, NASVH has proposed a number of our highly qualified leaders for membership on the GGAC, however none have been chosen, so we are pleased you are considering legislation to accomplish this goal in order to strengthen the work of the advisory committee and improve the lives and outcomes of aging and ill veterans.

We do want to recognize that VA has recently committed to appointing a member of NASVH to the GGAC, and we are grateful for the support of Secretary McDonough and Under Secretary Elnahal. However, given the history of NASVH having nominated multiple State Home administrators and leaders over the past decade, we believe it essential to codify this critical position to ensure representation on the GGAC in the future, regardless of who leads the VA.

As you may know, NASVH is an all-volunteer organization dedicated to promoting and enhancing the quality of care and life for the veterans and families in our Homes through education, networking, and advocacy. There are 169 VA-recognized State Veterans Homes (SVHs) across the nation operating 162 skilled nursing care programs, 48 domiciliary care programs, and 3 adult day health care (ADHC) programs. All 169 SVHs are members of NASVH, the only organization that represents their collective interests, and our membership is expected to continue growing with 9 new Homes expected to seek VA recognition by the end of next year.

The State Veterans Homes program is a partnership between the federal government and State governments that dates back to the post-Civil War period. To help cover the cost of care for veterans who choose to reside in SVHs, VA provides per diem payments at different rates for skilled nursing care, domiciliary care, and ADHC. VA also provides State Home Construction

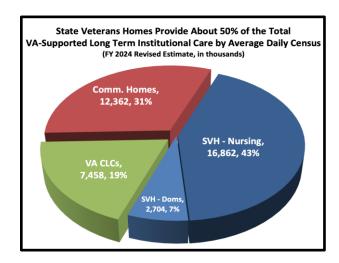
grants to cover up to 65 percent of the cost to build, renovate, and repair SVHs, with States required to provide at least 35 percent in matching funds.

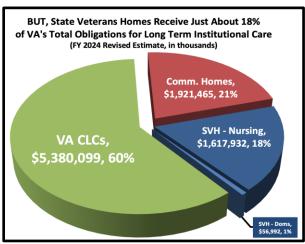
The GGAC was first authorized by Public Law 102-40 in 1991 to advise VA on all matters pertaining to geriatrics and gerontology, and was charged with three specific tasks:

- 1. Evaluate the operation and effectiveness of VA's Geriatric Research Education and Clinical Centers (GRECCs);
- 2. Assess the demand for long term care by veterans and VA's capability to provide high quality geriatric and extended care services; and
- 3. Assess the current and projected needs for veterans' long term care services and VA's activities and plans to meet such needs.

Leaders in NASVH and State Veterans Homes can offer unique experience and expertise to strengthen the GGAC's mission. The draft legislation would require that the NASVH representative have a professional license in nursing home administration in order to provide a different perspective from clinicians and researchers, particularly useful for considering how best to meet veterans long term care needs.

Further, a NASVH representative would add a critical voice commensurate with the leading role that State Veterans Homes play in meeting veterans long term care needs. Today, there are over 30,000 authorized State Home beds providing a mix of skilled nursing and domiciliary care. SVHs provide approximately half of all federally-supported institutional long-term care for our nation's veterans according to VA's most recent budget submission. However, State Veterans Homes will consume less than 20% of VA's total FY 2024 obligations for veterans' long term nursing home care. It's clear that SVHs offer significant value for VA in providing aging and disabled veterans high-quality long term care services.





With over 8 million living veterans aged 65 or older, almost 5 million who are 75 or older, there is an increasing need to strengthen and expand long term care options for veterans. Yet VA supports an average daily census (ADC) of just 32,000 veterans in nursing home settings, which

includes its own community living centers (CLCs), State Veterans Homes, and private community nursing homes. That level of VA support for facility-based care long-term care represents less than one-half of 1% of the approximately 8 million living veterans 65 or older.

VA has been placing greater focus and resources on home- and community-based services (HCBS) and NASVH strongly supports expanding these services to provide aging veterans a full spectrum of long-term care options. However, the amount of nursing home care offered by VA today is woefully inadequate compared to the overall number of eligible veterans. For these reasons, Congress and VA must continue to make smart investments to sustain and expand traditional bed-based care, even while expanding home- and community-based care.

NASVH and our member State Veterans Homes continue to seek new and innovative ways of delivering long term services to aging and ill veterans, including through a range of graduated care options for veterans who need support to age in place. SVHs understand aging veterans' needs and have expertise in connecting them with their VA benefits and services. With our clinical knowledge and extensive infrastructure, State Veterans Homes could serve as hubs in communities across the country, particularly in rural areas, to offer aging veterans a full spectrum of long-term support services, including home-based care.

NASVH has proposed that Congress and VA explore other ways for SVHs to develop new home-based programs, including ones similar to VA's Home-Based Primary Care, Homemaker Home Health Aide Care, Respite Care, Palliative Care and Skilled Home Health Care. Given the flexibility and financial benefits to VA from partnering with State Veterans Homes, there are myriad possibilities for better addressing the changing demographics, needs and preferences of veterans who want to age in their own homes. When they are no longer able to remain at home, SVHs could ease their transitions to facility-based skilled nursing care.

In order to maximize the use of State Veterans Homes' resources and capabilities. VA must fully commit itself to true partnership with States. Too often, SVHs have been an afterthought in VA's planning and budgeting processes; a seat on the GGAC could rectify that.

State Veterans Homes can and must play a greater role in meeting the needs of aging veterans and their caregivers in partnership with VA and other federal agencies. One way to strengthen that partnership is to ensure that NASVH and its members are represented when VA is discussing, evaluating and making plans to improve access to and quality of long-term care for our nation's aging and disabled veterans. For all of the above reasons, we urge you to support the draft legislation mandating a representative of NASVH on the GGAC.

NASVH looks forward to continuing to work with VA and Congress to ensure that veterans have greater access to a full spectrum of long-term care options, whether at home or in nursing homes. Adding the experience and expertise of a NASVH representative will not only benefit the GGAC, but it will also improve the lives of America's heroes.

Thank you for the opportunity to share our strong support for the draft legislation to mandate a NASVH representative on VA's Geriatric and Gerontology Advisory Committee.
