

VHA's Strategy to Promote Aging in Place for Veterans

Cheryl Schmitz, MS, RN, CNS-BC, NE-BC



Part of the National Alzheimer's and Dementia Resource Center webinar series sponsored
by the Administration for Community Living.



Honor Veterans preferences to age in place with equitable access to necessary home care services in an Age-Friendly Health System with well-trained staff and a full continuum of care with accessibility to modern institutional care if needed

VHA's Strategy to Promote Aging in Place for Veterans
Cheryl Schmitz, MS, RN, CNS-BC, NE-BC
Deputy Executive Director
Office of Geriatrics and Extended Care (GEC)

May 2023

National Alzheimer's and Dementia Resource Center Webinar

Agenda

1. The Current and Projected Veteran Populations
2. Aging in Place –the future of Geriatrics and Extended Care in Veterans Health Administration (VHA)
3. Overview of Home & Community Based and Purchased Programs
4. Veteran Directed Care
5. Veteran Directed Care vs Traditional Homemaker/Home Health Aide
6. General Eligibility
7. Resources to Guide Discussions

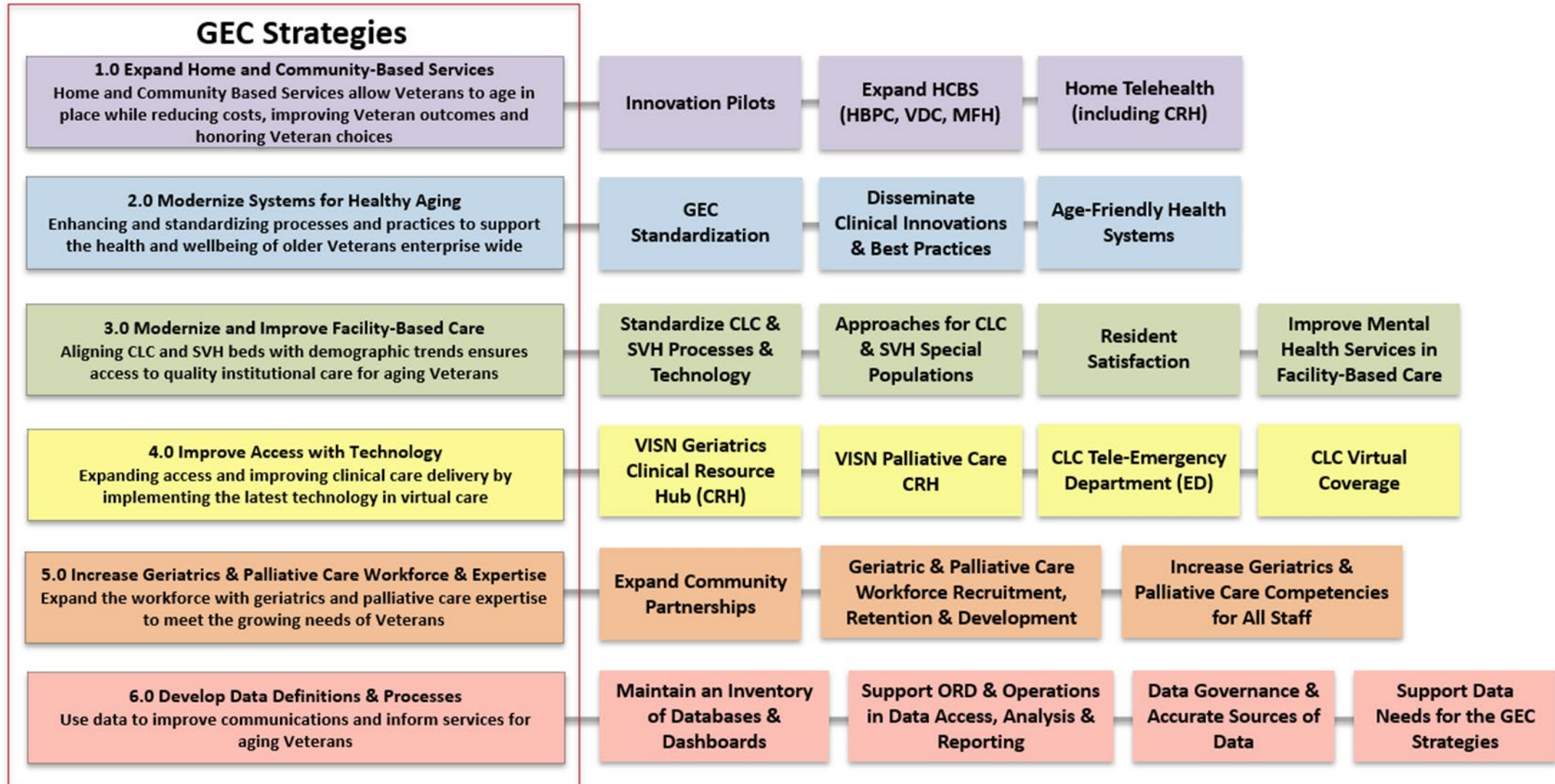
VHA Enrollee Projections

VHA Enrollee Projections (2020-2035)			
Enrollee Demographic	2020	2035	FY20-FY35 % Change
All Ages & All Genders	8,789,330	8,666,272	-1.4%
Ages 85+, All Genders	612,217	1,015,992	66.0%
Ages 85+, Women	11,750	30,425	158.9%
Source: VA Enrollee Health Care Projection Model (EHCPM/Model), Base Year 2020. Accessed via VSSC on 11MAY2022.			

Priority 1a Enrollee Projections			
Age-Bands	EOY_2019	EOY_2039	FY19-FY39 % Change
65-84	736,245	1,080,088	46.7%
85+	50,473	330,735	555.3%
Source: VA EHCPM BY2019 from Strategy Office			

- Although VHA enrollment numbers as a total will remain stable between FY20 and FY35 (~ - 1.4%), the sub-group of Veterans ages 85 and older will increase by 66% and specifically Women Veterans ages 85 and older will increase by 159%
- Of the Priority 1a (≥70% SC etc.) enrollees, the subgroup of Veterans who are ages 85 and older that are Priority 1a classified will increase by > 555% between FY19 and FY39
 - This is important because Department of Veterans Affairs (VA) is Congressionally mandated to pay for the nursing home care of Priority 1a Veterans, which is not fiscally sustainable

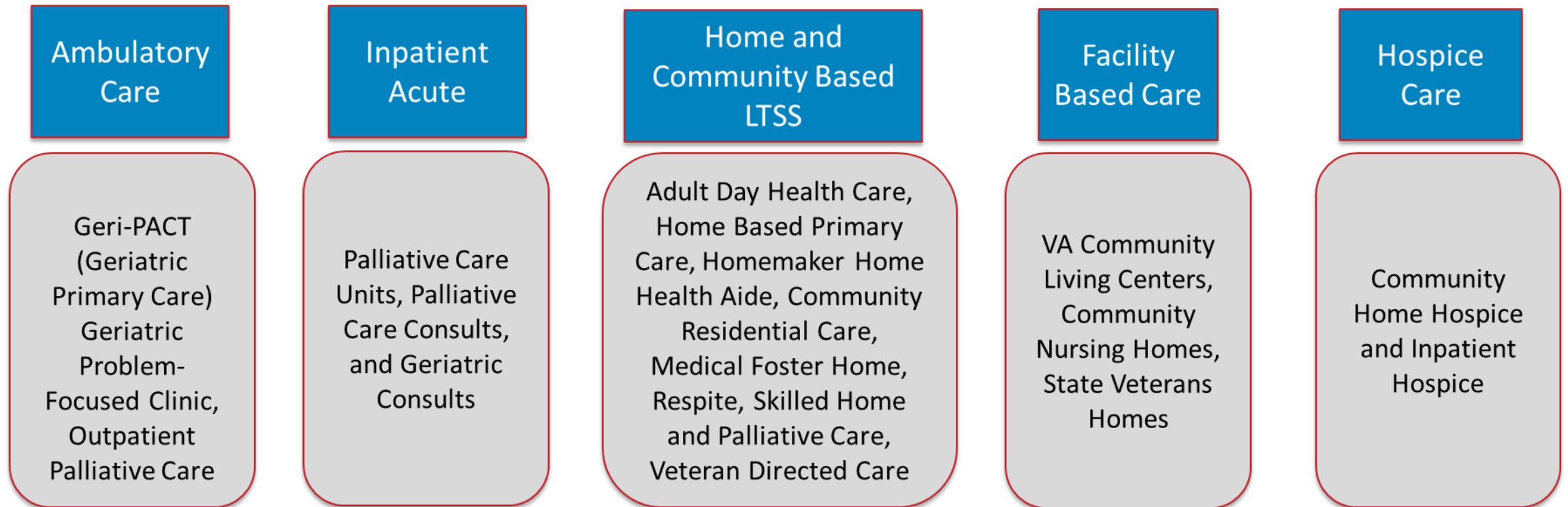
VHA GEC Strategic Plan and Tactics (FY20-FY26)



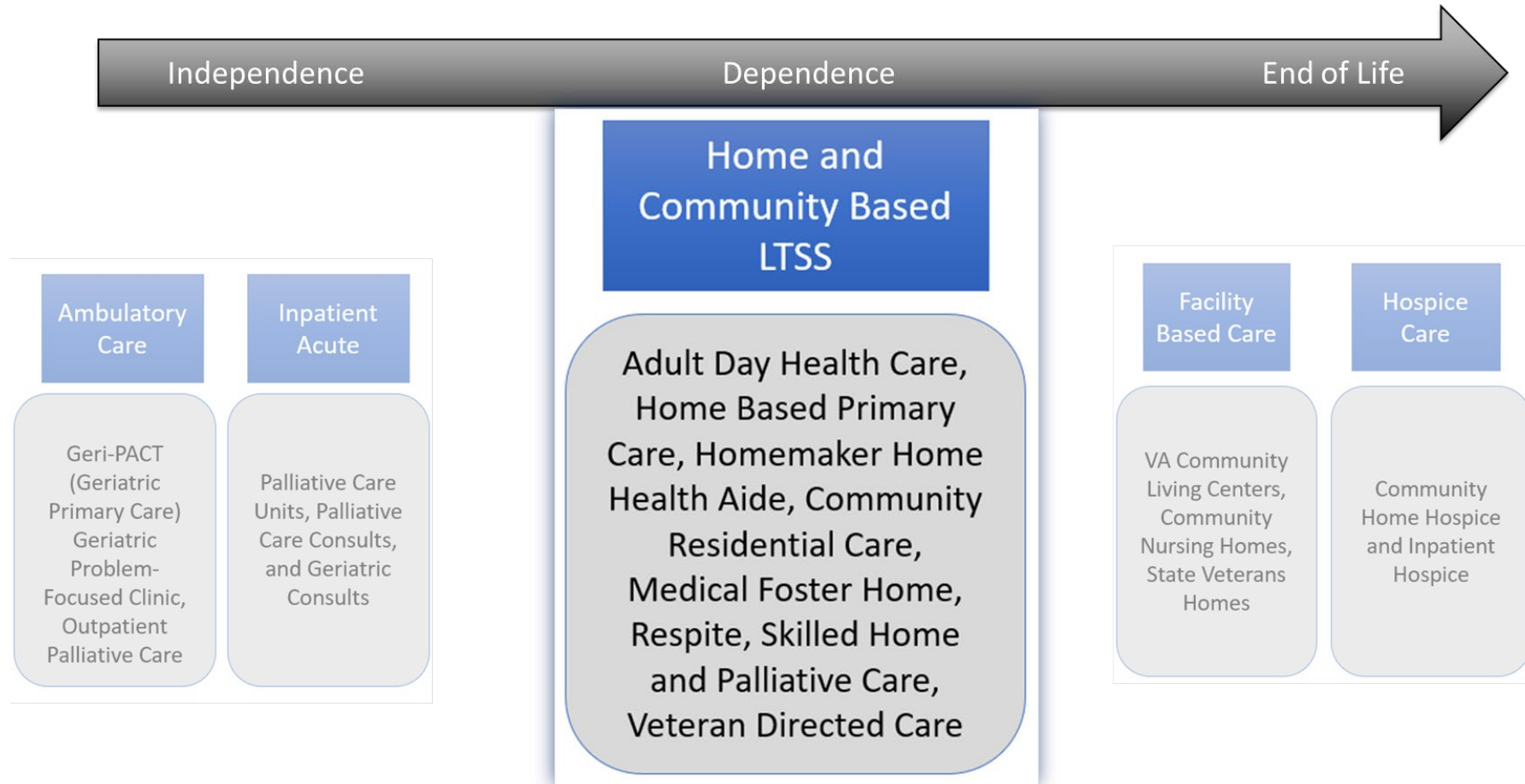
Aging in Place Imperatives

- **It is what Veterans and Caregivers prefer**
 - VA needs to continue to find ways to proactively assess for needed Home and Community Based Services and to ensure that the Veterans receive the needed services
- **Home and Community Based Services should be considered as preventative care**
 - The preventive care aspect is that Home and Community Based Services can help to prevent or delay unwanted and unnecessary nursing home admissions
- **Financial Impact to the Agency**
 - Home and Community Based Care is significantly less costly compared to nursing home care
 - Multiple CMS state pilots have shown net cost savings with expansion of preventative HCBS services and/or delay nursing home admissions
- **Increasing Stakeholder Focus**
 - OIG, GAO, SVAC, HVAC, SAC, and others

GEC – Continuum of Care for Veterans of ALL Ages



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The Basic Information

A.

- What are the available programs?

B.

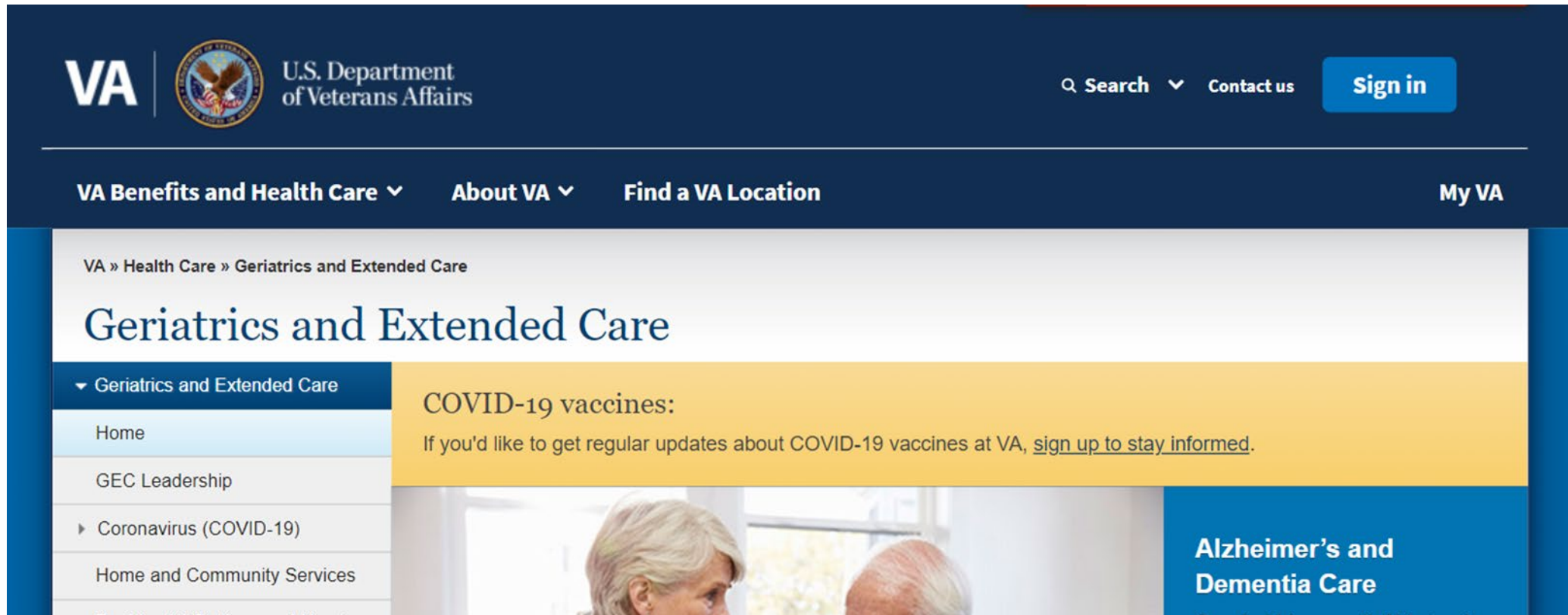
- Who is eligible?

C.

- Where can I find more information?



Readily Available Resources



[Geriatrics and Extended Care Home \(va.gov\)](https://va.gov)

Readily Available Resources

Geriatrics and Extended Care

▼ Geriatrics and Extended Care

Home

GEC Leadership

COVID-19

Home and Community Services

Residential Settings and Nursing Homes

Paying for Long Term Care

Health, Fitness, Rehabilitation

Making Decisions and Advance Care Planning

Mental Health, Memory Loss and Brain Health

For Caregivers

For Health Care Professionals

Other VA and non-VA Resources

Print Handouts

► More Health Care

COVID-19 vaccines:

If you'd like to get regular updates about COVID-19 vaccines at VA, [sign up to stay informed](#).



Alzheimer's and Dementia Care

Care for Veterans with Alzheimer's or dementia as well as caregiver support is provided throughout the full range of VA health care services.

[Learn more »](#)

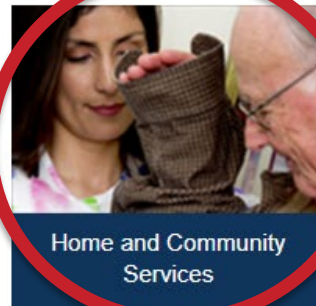
Geriatric Evaluation

Alzheimer's and Dementia

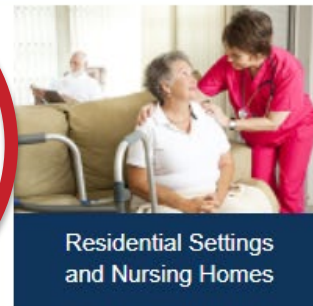
Long Term Care Services



[Subscribe](#) to our monthly bulletin for Veterans, families and caregivers.



Home and Community Services



Residential Settings and Nursing Homes



Making Decisions and Advance Care Planning



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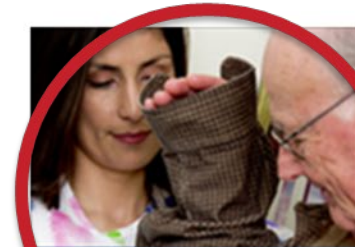
Home and Community Based Services



Adult Day Health Care



Home Based Primary Care



Homemaker & Home Health Aide Care



Hospice Care



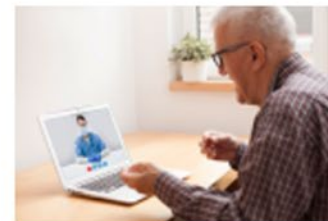
Palliative Care



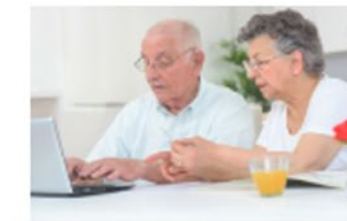
Respite Care



Skilled Home Health Care



Remote Monitoring Care



Veteran-Directed Care



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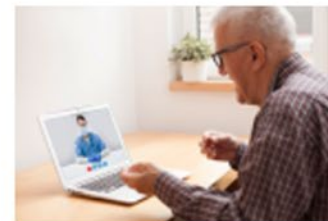
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Overview of Purchased Long-Term Services and Supports in the Home

- **Personal Care Services (PCS):** These programs help Veterans take care of themselves and their activities of daily living (bathing, dressing, toileting, etc.).
 - **Community Adult Day Health Care (ADHC):** Veterans go to these community facilities during the day for PCS in addition to health maintenance, nutrition, age-appropriate exercise, social activities, peer support, and recreation.
 - **Homemaker/Home Health Aide (H/HHA):** Veterans receive PCS from homemakers and home health aides who will help assist the Veteran with daily living needs.
 - **Veteran Directed Care (VDC):** With the help of trained counselors, Veterans (or a representative) hire their own workers, including family members and friends to best meet their PCS needs.
 - **Home Respite Care:** Veterans receive longer segments of H/HHA care to provide their caregivers a break to run errands or go out of town for a few days without worrying about leaving the Veteran alone at home.

Overview of Purchased Long-Term Services and Supports in the Home

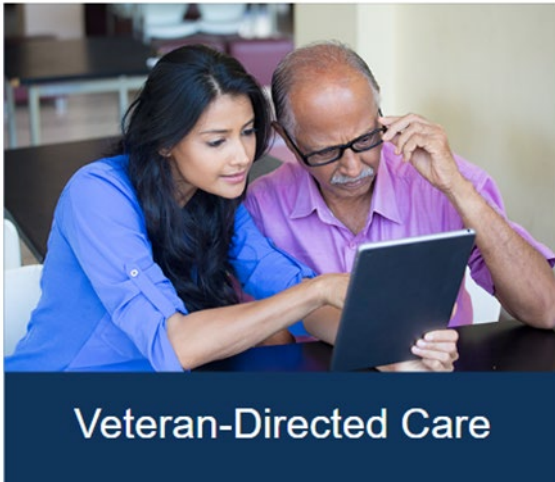
- **Skilled Home Health Care:** These are short- or long-term health care services, which include wound care, therapy services, medication administration, and other services performed by a licensed nurse or therapist in the home of the Veteran, when the Veterans needs cannot be met on an outpatient basis.
- **Hospice and Palliative Care:** These programs represent part of a continuum of comfort-oriented and supportive services provided by an interdisciplinary team in the home, community, outpatient, nursing home, or inpatient settings for persons with serious illness.

Clinical Eligibility for Personal Care Services

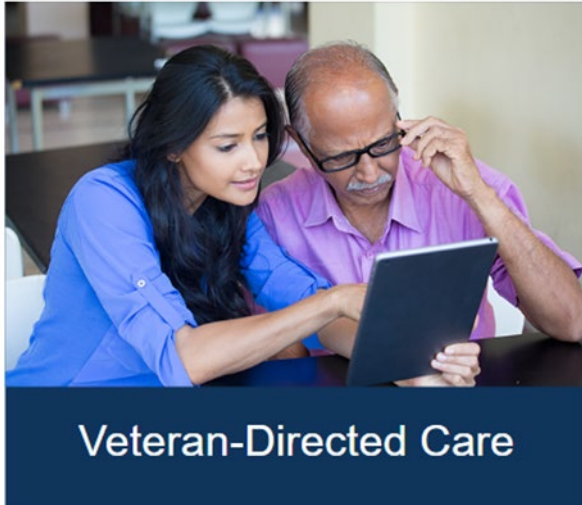
- Veteran, through an interdisciplinary assessment, has been determined to meet nursing home level of care
- Considerations:
 - Three or more activity of daily living dependencies
 - Significant cognitive impairment
 - Need for personal care services as adjunct care to community hospice services
 - Dependency in three or more IADLs
 - Recent discharge from a nursing facility or nursing home discharge plan which is contingent on receipt of HCBS
 - Seventy-five+ years old
 - High use of medical services in the past year
 - Clinical depression diagnosis
 - Lives alone in the community

Veteran Directed Care (VDC)

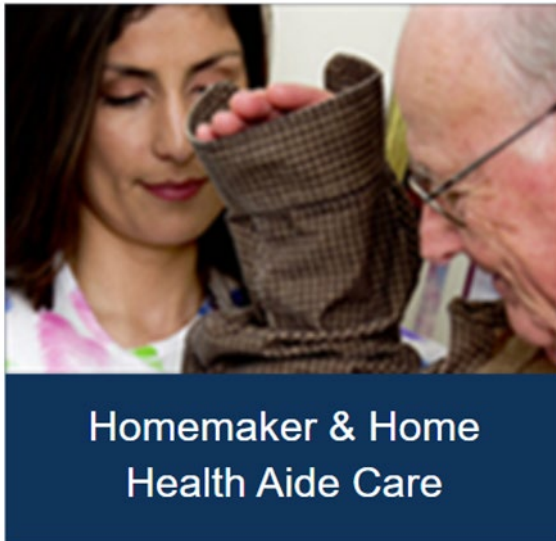
- The VDC program serves Veterans of any age who are at risk of admission to an institution.
 - Veterans hire workers, including family, friends, and neighbors, to provide personal care services in accordance with a Veteran-developed and VA-approved spending plan.
 - Veterans receive assistance to manage their employer responsibilities from person-centered counselors and financial management services (FMS) providers.
 - VAMCs purchase VDC services from VA-approved Aging and Disability Network Agencies (ADNAs) using Veterans Care Agreements.
 - VDC provider works with Veteran to develop spending plan following person-centered planning model that is then approved by VAMC.
 - Veteran opts out of Homemaker/Home Health Aide, Community Adult Day Health Care, and Home Respite programs when using VDC.



VDC vs Traditional Homemaker/Home Health Aide



Veterans in case-mix D receive on average 27 hours per week of personal care in VDC, but only 20 hours per week in H/HHA for equal cost



Case-Mix	Monthly Case Mix Rate	Hours of VD-HCBS Per Week	Hours of H/HHA Per Week
Case Mix L	\$1,293	10	10
Case Mix A	\$1,788	17	15
Case Mix B	\$2,035	21	17
Case Mix C	\$2,388	26	19
Case Mix D	\$2,468	27	20
Case Mix E	\$2,720	30	22
Case Mix F	\$2,804	32	23
Case Mix G	\$2,893	33	23
Case Mix H	\$3,263	38	26
Case Mix I	\$3,350	39	27
Case Mix J	\$3,570	42	29
Case Mix K	\$4,161	51	34



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What is Duplication of Services?

What it is: When two agencies or programs are providing and/or paying for the same care for the Veteran during the same time period.

What it is not: When two agencies or programs collaborate to provide and/or pay for care which does not overlap but addresses the majority or all of the Veterans care needs.

Considerations:

- Aid & Attendance
- Medicare and Medicaid
- Assisted Living Facilities and Medical Foster Homes
- Bowel & Bladder
- Hospice
- Program of Comprehensive Assistance for Family Caregivers (PCAFC)

General Eligibility

Geriatrics and Extended Care

- Geriatrics and Extended Care
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**Veterans
Crisis Line**
1-800-273-8255 **PRESS 1**

Homemaker and Home Health Aide Care



What is it?



Am I eligible?



What services?



How do I decide?

Am I eligible for Homemaker Home Health Aide Care?

All enrolled Veterans are eligible for **Homemaker Home Health Aide Care** IF they are eligible for community care and meet the clinical criteria for the service and it is available. Services may vary by location.

A copay for Homemaker and Home Health Aide services may be charged based on your VA service-connected disability status.

RETURN TO: Home and Community Based Services

 Print this topic



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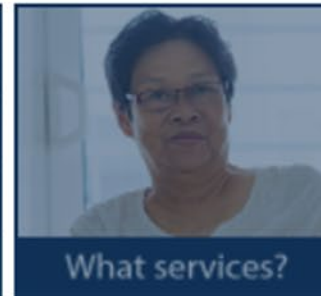
Homemaker and Home Health Aide Care



What is it?



Am I eligible?



What services?



How do I decide?

How do I decide if a Homemaker and Home Health Aide is right for me?

You can use a [Veteran Decision Aid for Care at Home or in the Community](#) to help you figure out what home care services or long term care services may best meet your needs now or in the future.

There's also a [Caregiver Self-Assessment](#). It can help your caregiver identify their own needs and decide how much support they can offer to you. Having this information from your caregiver, along with the involvement of your care team and social worker, will help you reach short-term and long-term care decisions.

Ask your social worker for these resources or download copies from the [Making Decisions](#) page at www.va.gov/Geriatrics.



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Decision Aids



PATIENT PRIORITIES CARE is care Focused on What Matters to You:



When you face many health conditions, there is rarely just one best option. Your clinicians want to help you choose care based on your life, health conditions

Veteran Decision Aid for Care at Home or in the Community

My Health Priorities

Identifying My Health Priorities

NAVIGATION MENU

Introduction

1. Identify What Matters Most to You

2. Set Your Health Goal

3. Review Your Health Symptoms and Problems

4. Review Your Health

Welcome to My Health Priorities!

Through this process we will help you identify what matters most to you- your **Health Priorities**.

Why are Your Health Priorities Important?

What matters most in life and health is different for everyone. Managing your health may be particularly difficult if you have multiple chronic conditions.

The more you and your health care team know about what matters most to you, the better you can work together to line up your health care decisions with your Health Priorities.

[Making Decisions: Current Care Planning - Geriatrics and Extended Care \(va.gov\)](#)

[MyHealthPriorities](#)



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Summary

- The VA Office of Geriatrics and Extended Care has many initiatives underway to support Veterans as they age
- Of note, VA is a leader in home and community-based services and provides Long Term Services and Supports (LTSS) that are not generally available through other healthcare sources (e.g., Medicare)



Thank You!

Contact Information: Cheryl.Schmitz2@va.gov, Daniel.Schoeps@va.gov



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Thank you!

Thank you for your attendance today.

Next NADRC Webinar–

- June 20, 2023, 3-4 p.m. ET, It's a Journey: Age Friendly and Dementia Capable Health Systems
 - Register here: [NADRC 6-20-23 Webinar Registration - Zoom](#)

- To be alerted when the next round of Alzheimer's Disease Programs Initiative funding is announced, sign up for Grants.gov notifications (<https://www.grants.gov/>)
 - Search term: Alzheimer's Disease Programs Initiative (ADPI)

Backup Slides

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► Geriatrics and Extended Care

► More Health Care

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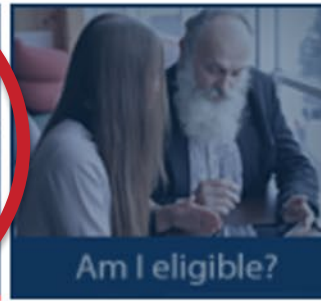
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 A-Z Health Topics

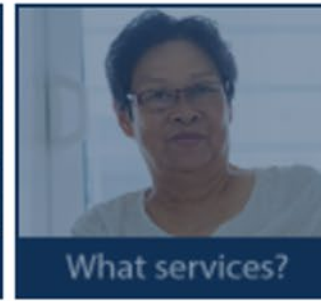
Homemaker and Home Health Aide Care



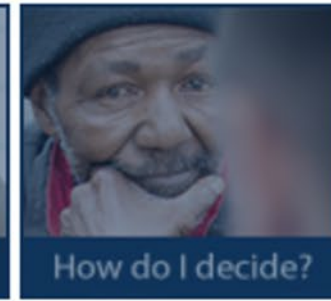
What is it?



Am I eligible?



What services?



How do I decide?

What is Homemaker Home Health Aide Care?

A Homemaker or Home Health Aide is a trained person who can come to a Veteran's home and help the Veteran take care of themselves and their daily activities. Homemakers and Home Health Aides are not nurses, but they are supervised by a registered nurse who will help assess the Veteran's daily living needs.

This program is for Veterans who need personal care services and help with activities of daily living. This program is also for Veterans who are isolated, or their caregiver is experiencing burden.

Personal Care Services Case Mix Tool

There are four components to determining a Case Mix Score

- Activities of Daily Living (ADL)
 - ADLs have a “not dependent” and “dependent” score
 - Varies by ADL question and response selection
 - Assigns a Veteran to one of three tiers
 - “Low” (0-3 ADLs)
 - “Medium” (4-6 ADLs)
 - “High” (7-8 ADLs)
- Special Nursing Needs
- Behavioral Characteristics
- Neuromuscular Diagnosis
 - Only used for Veterans in the “High” (7-8 ADLs) tier