



RESOLUTION 2011-1

ADVOCATING ENACTMENT OF LEGISLATION ALLOWING FOR MORE FLEXIBILITY IN CARING FOR VETERANS WITH SERVICE-CONNECTED DISABILITIES AT STATE VETERANS HOMES AND MORE FLEXIBILITY IN THE RECEIPT OF PAYMENT FOR SUCH SERVICES FROM PAYMENT SOURCES RELATED TO THE MEDICAID AND MEDICARE PROGRAMS

WHEREAS, State Veterans Homes were founded for soldiers and sailors following the American Civil War, and have ably served veterans and some of their immediate dependents and survivors for nearly 150 years; and

WHEREAS, there are more 140 State Veterans Homes in all 50 States that on a daily basis provide, skilled nursing, skilled rehabilitation, long-term care, dementia and Alzheimer's care, domiciliary care, respite care, end of life care, and Adult Day Health Care daily to approximately 28,500 veterans and dependents; and

WHEREAS, the federal Veterans Benefits, Health Care, and Information Technology Act of 2006, Public Law 109-461, requires the United States Department of Veterans Affairs to reimburse State Veterans Homes at a "higher per diem" rate for care provided to veterans with a 70% or higher service-connected disability or who require nursing home care for a service-connected disability; and

WHEREAS, although VA regulations state that they provide a "higher-per diem rate" for veterans with service-connected disabilities, the regulations actually result in significantly lower total amounts being paid to many State Veterans Homes providing nursing home care to veterans with service-connected disabilities; and

WHEREAS, this problem is particularly acute in the 30 States that have Medicare-certified and/or Medicaid-certified State Veterans Homes, and receive payments for the care of veterans with service-connected disabilities under such programs; and

WHEREAS, in fact, the program, in its current form, substantially underpays State Veterans Homes for "skilled nursing care," and pays State Veterans Homes only about 1/2 to 2/3 of what Medicare would pay State Veterans Homes for the same care of the same veterans, and only about 1/3 to 1/2 of what the VA pays itself for the same care of the same veterans with service-connected disabilities; and

WHEREAS, this has threatened the continued financial viability of many State Veterans Homes; and

WHEREAS, this has caused some States to refrain from admitting some veterans with service-connected disabilities to State Veterans Homes; and

WHEREAS, the new VA per diem program is highly problematic for States providing nursing home care to veterans with service-connected disabilities in Medicaid-certified and Medicare-certified State Veterans Homes; and

WHEREAS, The VA has tried for nearly two years to fix the program administratively, and it has been unable to do so; and

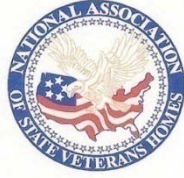
NOW, THEREFORE, BE IT RESOLVED, that we urge Congress and the President to enact legislation to allow States more flexibility in caring for veterans with service-connected disabilities at State Veterans Homes and more flexibility in the receipt of payment for such services from payment sources related to the Medicaid and Medicare programs.



√	Adopted
	With Change
	Rejected

STEVEN J. MATUNE
President
National Association of State Veterans Homes

Dated this 1st day of March , 2011



RESOLUTION 2011-2

SUPPORT FOR CONSOLIDATION OF DUPLICATED EXTERNAL INSPECTION SURVEYS FOR STATE VETERANS HOMES BY THE DEPARTMENT OF VETERANS AFFAIRS.

WHEREAS, the State Veterans Home program, with 140 participating facilities in 50 States and in the Commonwealth of Puerto Rico, has proven itself to be the most cost-effective resource available to the Department of Veterans Affairs, for high quality long-term health care services for those of the nation's veterans who need skilled nursing, domiciliary, adult day health care and other specialized long term care programs to meet their needs; and

WHEREAS, the Department of Veterans Affairs promotes and closely monitors the care and treatment of veterans in State Veterans Homes as an important means to attain its goal of developing, providing, maintaining and guaranteeing options for the highest quality of long term care for eligible veterans; and

WHEREAS, each State is accountable for ensuring veterans in its State Veterans Homes receive quality long term and other health care services, and for achieving high patient satisfaction and comfort in safe environmental conditions; and

WHEREAS, a State Veterans Home generally functions within a State's department or division of veterans' affairs, public health, or other accountable State agency, and operates under the governance and oversight of a board of trustees, a board of visitors, or other similar accountable public body; and

WHEREAS, State Veterans Homes hold themselves accountable for the quality of care they provide through myriad internal management controls, State and federal long term care regulations, and integration of model policies, practices and standards advocated by the National Association of State Veterans Homes and other standards bodies, for the continuous quality improvement of their programs of care for sick, elderly and disabled veterans; and

WHEREAS, State Veterans Homes are subject to both regular and periodic inspections and audits from State agencies, the federal Department of Health and Human Services, the Inspector General of the Department of Veterans Affairs, and the Civil Rights Division of the Department of Justice, among other inspectors, and are accountable to the general public through the press and news media;

WHEREAS, Surveys by State agencies and the federal Department of Health and Human Services already hold State Veterans Homes to the same and more conditions and standards of care as the Department of Veterans Affairs (VA), with the exception of eight VA unique and primarily administrative criteria; and

WHEREAS, The Department of Veterans Affairs contracts surveys of the State Veterans Homes nationally at a cost of more than \$5.5 million annually, the majority of which could be avoided; and

WHEREAS, In the Memorandum on VA Inspections of State Veterans Homes, dated June 6, 1996, The VA Under Secretary for Health instructed the Deputy Secretary to modify relevant sections of the Veterans Health Administration Administrative Manual to ensure that State Veterans Homes that are accredited/certified (without waivers) by either the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) or the Health Care Financing Administration (HCFA) are exempted from annual VA inspections unless there is good reason to believe that the State Veterans Home is not substantially in compliance with the current VA standards. Likewise, non-JCAHO or non-HCFA certified State Veterans Homes may be exempted if they are licensed by the State inspection standards and the State standards approximate VA standards; and

WHEREAS, in the Memorandum on Transparency and Open Government, issued on January 21, 2009, the President instructed the Director of the Office of Management and Budget to issue an Open Government Directive to direct executive departments and agencies to take specific actions to implement the principles of transparency, participation, and collaboration to improve the effectiveness of Government by encouraging partnerships and cooperation within the Federal Government, across levels of government, and between the Government and private institutions; and

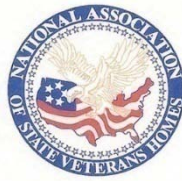
NOW, THEREFORE, BE IT RESOLVED, that the National Association of State Veterans Homes supports the consolidation of duplicated inspections and that the Department of Veterans Affairs and the Centers for Medicare and Medicaid Services (CMS), where applicable, combine their surveys into one inspection or defer to the CMS inspection results, except for those unique VA criteria, to assure that State Veterans Homes function within required standards and fulfill their roles as effective, safe and high quality sources of compassionate care for eligible sick and disabled veterans and their dependents and survivors.

√	Adopted
	With Change
	Rejected



STEVEN J. MATUNE
President
National Association of State Veterans Homes

Dated this 1st day of March, 2011



RESOLUTION 2011 - 3

SUPPORT FOR FULL CONGRESSIONAL FUNDING FOR STATE EXTENDED CARE FACILITIES CONSTRUCTION MATCHING GRANT PROGRAM

WHEREAS, State Veterans Homes were founded for veterans after the American Civil War and have ably served disabled veterans for nearly 150 years; and

WHEREAS, every State operates at least one State Veterans Home, and more State Veterans Homes and beds and other programs within them are planned or projected annually to meet a growing demand for long term care programs and facilities for American's elderly, sick and disabled veterans; and

WHEREAS, The State Veterans Home program has proven itself to be the most cost-effective source of high quality long-term health care services for the nation's veterans who need skilled nursing, domiciliary, adult day health care and other specialized programs to meet their needs; and

WHEREAS, the Department of Veterans Affairs (VA) promotes the care and treatment of veterans in State Veterans Homes as an important means to attain its goal of developing, providing and maintaining the highest quality of care for eligible veterans; and

WHEREAS, Subchapter III of Chapter 81, Title 38, United States Code, authorizes the State Extended Care Facilities Grant Program, funded by VA through Congressional appropriations, to assist the States through grants for construction of new State Veterans Homes and for significant renovations of existing facilities, at a cost not to exceed 65% of the total cost of any such project proposed by a State and approved by the Secretary of Veterans Affairs; and

WHEREAS, the VA funded \$256M for Priority One construction projects with a combination of last year's appropriation, carry-over funds, and Stimulus money; and

WHEREAS, there are \$296M in Priority One projects and \$863M total in grant applications awaiting funding; and

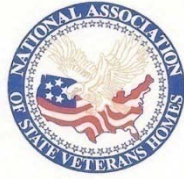
WHEREAS, the President's Administration request for an \$85 million State Home Construction Grant Program appropriation for next year will not keep up with the States' pace of grant applications for construction of new State Veterans Homes and significant renovation and modernization projects at existing homes.

NOW, THEREFORE, BE IT RESOLVED, that the National Association of State Veterans Homes (NASVH) supports full annual funding, at minimum an amount of \$85 million, for the State Extended Care Facilities Grant Program, in order for the Department of Veterans Affairs and the several States to further reduce the structural backlog of worthy projects pending funding during Fiscal 2012.

√	Adopted
	With Change
	Rejected

A handwritten signature in black ink, appearing to read "Steven J. Matune".

STEVEN J. MATUNE
President
National Association of State Veterans Homes
Dated this 1st day of March, 2011



RESOLUTION 2011-4

SUPPORT FOR DEPARTMENT OF VETERANS AFFAIRS TO PAY ITS FAIR SHARE OF COST TO PROVIDE CARE FOR VETERANS IN STATE VETERANS HOMES

WHEREAS, State Veterans Homes were founded for soldiers and sailors following the American Civil War, and have ably served veterans for nearly 150 years; and

WHEREAS, under Title 38, United States Code, the Department of Veterans Affairs (VA) is authorized to make aid payments to States maintaining State Veterans Homes; and

WHEREAS, there are more than 140 State Veterans Homes in all 50 States, which as member institutions of the National Association of State Veterans Homes (NASVH), on a daily basis provide hospital, skilled nursing, rehabilitation, long-term care, dementia and Alzheimer's care, domiciliary care, respite care, end of life care, and adult day health care, to approximately 28,500 veterans and their dependents; and

WHEREAS, Title 38, United State Code, authorizes VA to make per diem payments to the States for Veterans residing in State Veterans Homes, and the State Veterans Home program is recognized as the lowest-cost among all nursing care alternatives used by VA; and

WHEREAS, Title 38, United States Code, authorizes VA to pay a per diem payment up to 50 percent of the national average cost of care in State Veterans Homes; and

WHEREAS, the VA has traditionally set a per diem payment that is about 30 percent of the national average cost of care in the State Veterans Homes; and

WHEREAS, recognizing the growing long-term health care needs of older veterans, the State Veterans Home program will increasingly serve a vital purpose and will continue to provide the lowest cost alternative for veterans needing long-term care in the future.

NOW, THEREFORE, BE IT RESOLVED, that NASVH supports an increase in the VA per diem payment but is no more than 50 percent of the national average cost of providing care in a State Veterans Home, as authorized by law.

√	Adopted
	With Change
	Rejected

A handwritten signature in black ink, appearing to read "Steven J. Matune".

STEVEN J. MATUNE
President
National Association of State Veterans Homes
Dated this 1ST day of March, 2011