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Executive Summary

Montana Veterans Long Term Care Needs Study

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State of Montana
Helena, Montana

A copy of this study is also available in Adobe Portable Document Format (PDF) online at the division's website at:
http://www.dphhs.mt.gov/sltc/aboutsltc/reports/VetsStudy.shtml

II Executive Summary

The 59th Legislature directed the Department of Public Health and Human Services to conduct an analysis of Veterans Long Term Health Care Needs. The Legislature requested that the study include an analysis of the demographics of the Montana veterans' population, including the number and age of veterans in each county and an analysis of the services currently available to meet veterans long term care needs and the need for additional long term care services. The long term care assessment for veterans must also include the evaluation of the need for nursing home, domiciliary and specialized services such as dementia/Alzheimer care, as well as, various types of community and in-home care options that are available and may be needed. Additionally the existing State veterans' home services and configuration of those services should be analyzed.

The following report is a summary of the analysis undertaken by the Department to identify current and anticipated veterans long-term care needs in Montana. The report is broken into the following areas: Demographic and Geographic information; State Veterans Homes; Montana State Veterans' Homes Compare; The VA State Home Program; Federal Veterans Assistance Programs; Current Legislation/Federal Initiatives for Veterans Long Term Care; Challenges facing State Veterans Homes; Other Long Term Care Service Options; and Veterans Survey Letter/Tool/Results.

Demographic and Geographic Highlights:

Montana's population 65 years of age or older was 13.4% in 2000. Montana is projected to age at a significantly greater rate than other states in the nation, and by 2025, Montana is projected to have the third highest proportion (24.5%) of people age 65 and over with the fastest growing age group being those 85 years of age and older. By 2025, 3.1% of Montana's population is projected to be 85 and older, the 4th highest percentage in the nation. The 65 and over population will increase from 125,000 in 2002 to about 270,000 by 2030, which will mean that one in every four Montanans will be 65 or older. There are currently about 160 people in Montana who are 100 years of age or older. Montana like other states will have to prepare for an increase in the number of people needing long-term care services.

The 2000 census indicates that 108,476 Veterans make their home in Montana, and 37,631 veterans were over 65 years of age. While a little more than 13% of Montanans are age 65 and older, over 1/3 of the states' veterans population is in that age group. Many World War II veterans are entering their eighties, the peak age for nursing home utilization, and will be followed by veterans who served in Korea and Vietnam. Among the 50 States and the District of Columbia, Alaska had the highest percentage of veterans at 17.1 percent. Veterans accounted for about 16.2 percent of the adult population in

Montana, followed by Nevada (16.1 percent), Wyoming (16 percent), and Maine (15.9) percent.[1]

The veteran population is representative of the increase in the overall aging population. The region representing Missoula County, Lake County, Mineral County, and Ravalli County is projected to have the largest aging Veteran population 65 years and older over the next two decades reaching 22.44% by 2015.

Montana State Veterans Home Highlights

Montana currently provides skilled nursing, intermediate nursing, and other ancillary services to Montana's elderly veterans in two State Veterans facilities. They are the Montana Veterans Home (MVH), a 105-bed facility located in Columbia Falls and the Eastern Montana Veterans Home (EMVH) an 80-bed facility located in Glendive.

Eighty-eight percent (88%) of the residents of these facilities resided in Montana prior to admission while twelve percent (12%) resided in states other than Montana. The admissions of residents originated from twenty-four (24) counties; with the first and second largest veterans home population originating from the county in which the State home is located. Flathead County admissions represent thirty-nine percent (39%) of the total MVH population, and Dawson County represents eight percent (8%) of the total EMVH admissions.

The MVH and EMVH, have occupancy rates of 93 % and 70% respectively. These facilities have been highly dependent on local area admissions. Admissions from other areas of the state and contiguous states have not helped to achieve full occupancy at either facility in recent years. However, the Special Care Units serving residents with dementia and Alzheimer's at both facilities have historically experienced full occupancy and waiting lists.

When comparing the types of beds available for veterans in Montana regionally and nationally, Montana has 81% of its beds designated for skilled/intermediate care as compared to 51% in the region, and 73% nationwide. Special Care beds in Montana represent 13% of the available beds, while regionally and nationally the percentage of such designated beds is 5%. Even with 13% of its available beds designated for people with dementia, primarily individuals with Alzheimer's disease, the units at both Montana facilities have been full, and expansions have been undertaken to better serve veterans with these care needs. Domiciliary beds in Montana represent 6% of the available beds, compared to 41% regionally, and 19% nationwide designated for domiciliary use.

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[1] Helping You Make Informed Decisions; U.S. Department of Commerce; Economics and Statistics Administration; U.S. CENSUS BUREAU; Issued May 2003; Veterans: 2000 Census; 2000 Brief; By Christy Richardson and Judith Waldrop

Contiguous State Comparisons:

Montana's number of facilities and beds available are comparative with the surrounding states. Idaho has 3 facilities with 304 beds, followed by Montana with 2 facilities with 197 beds. South Dakota has 162 beds, followed by North Dakota with 149 beds, and then Wyoming with 116 beds, with each of these three states having only 1 state veteran facility.

Montana ranks 15th nationwide in number of beds available per veteran age 65 and older. On average there are 191 veterans 65 years and older (37,631) per available state veterans' home bed in Montana (197). Of the regional states, Montana ranked below North Dakota, Idaho, Wyoming, and South Dakota in this bed analysis. North Dakota was 9th with 147 veterans 65 years and older per available bed in that state. Idaho was 10th with 150 veterans 65 years and older per available bed. Wyoming was 11th with 155 veterans 65 years and older per available bed. And South Dakota was 13th with 183 veterans 65 years and older per available bed. Nationally, there was 368 veterans 65 years and older per available bed at State Veterans Homes.

State Veterans Home Program:

Montana currently has 197 state veterans' home beds. Based on the Veterans Administration (VA) methodology for determining the number of nursing home beds and domiciliary beds needed by veterans in each state, Montana is eligible to add just one (1) more bed under the VA methodology. This methodology also determines eligibility to receive funding from the VA state home construction program. Through the state home construction program, the VA can participate in up to 65 percent of the cost of acquisition and construction of new domiciliary or nursing home buildings, provided VA standards and regulations are met. The acquisition and renovation costs may not exceed the cost of construction of an equivalent new facility. Construction grants can be requested for qualifying projects that are at least $400,000.

Even though Montana would not qualify for construction grant assistance using this methodology, they could be considered under an exceptions process if there is adequate documentation that travel distances will exceed two hours between a veteran population center and an SVH. This exception to the maximum bed limit for a greater than a 2-hour travel time (normal land travel time) from the two current State Veterans Homes in Columbia Falls and Glendive to a number of new locations in Montana can be documented.

Due to a backlog of pending projects in the construction pipeline that will soon exceed $400 million, and at the current pace, a new project submitted by Montana today could wait five years or more for VA funding consideration. States have committed funds that VA cannot match now because VA is seriously under-funded at a time when the long term care needs of elderly, frail and sick veterans have never been greater.

Federal VA Program:

The VA Montana Healthcare System operates a major medical center at Fort Harrison, five miles west of Helena, providing a full range of health care services for veterans, a federal nursing home at Miles City, and ten outpatient clinics dedicated to primary care services. In 2005, the VA spent more than $286 million in Montana serving about 102,000 veterans living in the state. VA Montana had 2,588 inpatient admissions, while outpatient visits totaled 250,151. In 2005, 13,828 veterans age 65 and older received outpatient medical care from the VA in Montana.

VA Montana also provides support with per diem payments at the two veteran's homes operated by the state of Montana, which helps to offset some of the cost of care for veterans seeking admission to these facilities. Additionally Montana veterans who are eligible may also be placed in private nursing homes around the state under the auspices of VA on a temporary or permanent contract basis.

The VA currently meets its obligation to provide long-term care services to veterans through a combination of federal appropriation to the VA and state veterans' home per diem payments. The VA does not provide levels of long term care that can be provided in State Veterans Homes, or provide reimbursement for "assisted living." The VA is however currently undertaking an assisted living pilot program, authorized by the Millennium Act.

Veterans Legislation:

There are currently several pieces of legislation focused at state veteran's home programs.

The "Veterans Choice of Representation and Benefits Enhancements Act of 2006 is targeted at efforts to eliminate two inequities in current law that serve as disincentives for severely disabled service-connected veterans to enter State Veterans Homes and create an innovative new program to help fill in gaps in State Home coverage. If passed this legislation will authorize the VA to provide veterans who are 50% or more service-connected disabled with prescription medications while residing in State Homes. Currently these veterans are authorized to receive such medications free of charge from VA if they reside in any setting other than a State Home. The second provision authorizes VA to pay State Homes the same rates for the care of a 70% or higher service-connected veteran residing in a State Home as they are currently authorized to pay via contract care to private community nursing homes. The legislation also creates a new program to fill gaps in State Home coverage by allowing VA to treat certain existing health care facilities, or certain beds within a facility, as State Home beds for purposes of receiving per diem payments. This provision is designed to provide States, particularly geographically large or rural States like Montana, with additional flexibility to develop small State Home bed units in collaboration with existing health care providers rather than construct new freestanding State Homes. This new program would be authorized for three years and be capped at 100 beds nationally.

State Veterans Home Challenges:

Montana faces many challenges in the operations of its State Veterans' Homes, including, but not limited to difficulties in finding sufficient numbers of direct care staff, such as, nurses and certified nurse aides to meet veterans care needs. In recent years, MVH has experienced staff recruitment and retention issues related to the economic environment of the Flathead Valley and competition for limited health care resources. In addition to the challenge of providing competitive wages, the increasing resident acuity has caused the cost of providing nursing home care to increase rapidly. In recent years reimbursement increases have not kept pace with rapidly rising costs of operations. Veteran's today are older and sicker, with Dementia in the aging veteran population placing more demands on facilities to deal with those residents. The cost and delivery of care to veterans at the two Montana State Veterans Homes are expected to increase in the years to come and continue to challenge the financial operation of these facilities.

Another challenge facing the State of Montana is the future of its current two facilities, which are operated under two different operational models. The Glendive Medical Center (GMC) has operated the Eastern Montana Veterans Home since it opened in 1995 under a contract arrangement. EMVH is the only DPHHS owned facility that is operated under a contract with the private sector. The Montana Veterans Home is operated and staffed by the State of Montana. Discussions related to the advantages and the disadvantages of contracting or directly operating come up periodically and may need to be reconsidered in the future if costs continue to increase.

Other Long Term Care Options:

Long-term care services in Montana may include the medical, social, housekeeping, or rehabilitation services a person needs over months or years in order to improve or maintain function or health. Such services are provided in nursing homes, in resident homes, or in community-based settings such as assisted-living facilities and retirement homes. In Montana services and programs as alternatives to nursing home care are available. Both medical and non-medical care may be received at home or in residential settings. Veterans may be eligible for these services or programs, but without any assistance from the VA in the form of state per diem or consideration for veteran preference.

Veterans Survey:

As part of this study, Montana conducted a non-scientific statewide survey to determine the individual needs, preferences and opinions of Montana veterans. The survey also collected demographic data about Montana veterans. Surveys were mailed to selected individuals and groups in Montana requesting their assistance in distributing the survey over a course of a few weeks to as many Montana veterans as possible. The survey tool was distributed to, Veterans Interim Committee Members, Fort Harrison, Veterans Service Offices, Veterans Service organizations, Military Affairs, and family members

and veterans at MVH & EMVH. Approximately 1700 copies of the survey were mailed out and 450 surveys were returned, representing a response rate of 26.47%.

Some of the survey highlights are:

86% of the respondents were Veterans and 14% of the respondents were the spouses of a Veteran.
86% of the respondents were male and 14% were female.
31% of the respondents were age 75 to 84, while 24% were 65 to 74 years of age, and 45% of the respondents were younger than 65.
36% of the respondents currently live in Flathead County followed by 13% in Cascade County.
32 % of the respondents have a service – connected disability, while 47 % of the respondents have a disability that is not service connected.
28% of the respondents receive daily help with cooking or meal preparation, 25% with medications, 17% with bathing, and 16% with dressing or grooming. With 21% being provided by the spouse.
88% of the respondents indicate that they need long-term care services, which are not currently available to them where they live, such as in-home care (22%), adult day-care (15%), Mental Health Services (11%), Assisted Living (11%), Retirement Living (11%), and Nursing Facility Care (9%).
51% of the respondents indicate that they would expect to need access to long-term care services in more than 5 years, 36% in the next 1 to 5 years.

When asked if they were unable to care for themselves at home, where would veterans most likely go to access long term are services, 29% responded the State Veterans Home in either Columbia Falls or Glendive. 15% indicated Assisted Living/Personal Care Facility and 12% indicated a nursing facility in their community. 47% of the respondents indicated that if they had to leave their community to access long-term care services, they would relocate to either the Flathead Valley or Missoula area. 12% indicated Helena as the community of choice for relocation. 44% of the respondents would relocate to other communities because of family and friends, 34% to be close to their current community.

When survey respondents were asked if another state veterans nursing facility were to be constructed, where it should be built to address the greatest number of veterans who are in need of this service, the respondents named their 1st choice as Kalispell (23%), followed by Helena (16%), Great Falls (15%), Missoula (13%), and Billings (11%). The survey presents that the overall choice (1st, 2nd, and 3rd) of veterans for a location of a state veteran's home was Missoula (18%), Helena (16%), Kalispell (15%), Great Falls (13%), and Billings (11%). All except Kalispell are outside of the current 2-hour radius of the two existing facilities.

If additional funding were to available, respondents indicated that the best use of state funds would be to provide funding to care for veterans in their own homes and communities at (36%) or develop assisted living/retirement living housing options for veterans at (18%).

Summary:

The veteran population in Montana is increasing, especially those over 65 years of age. The projected increase alone in the over age 85 category could increase the demand on available beds at the two existing state veterans homes in future years. Both the admission history and the survey show the preferred choice of veterans is a location close to home, family, and friends. As with all long term care services there is a focus on developing community options that maintain individuals in their homes for as long as possible and avoid more costly institutional settings or service options.

Numerous challenges exist for the two State Veterans Homes that currently operate in the state. Higher cost of delivering services to more medically complex residents and the difficulty with recruitment and retention of qualified direct care staff are ongoing challenges. To maintain commitment, continuity and quality of care for Montana veterans the State will need to provide sufficient levels of appropriations that are adequate to maintain the ongoing operation and upkeep of the existing two state veterans' facilities prior to looking at expansion of other institutional based service options.

Long-term care is available to meet the needs of Montana veterans through several options such as the VA Healthcare system, a federal Veterans Home and the two State Veterans Homes. The availability of numerous nursing facilities with available beds throughout Montana provide access options to veterans and are located in many of the communities where future veteran population growth is projected. Veterans in Montana have choices of long-term care services that include medical, social, housekeeping, or rehabilitation services to improve or maintain function or health. Besides services provided by nursing facilities, services are available in community-based settings such as assisted-living facilities, retirement homes, and in-home care options are being developed or expanded in communities across the state. The cost of care subsidized by the VA per diem does not seem to greatly influence those veterans who choose to stay closer to home, family, and friends to receive long term care services.