ISSUE BRIEF: REBALANCING LONG-TERM SUPPORTS AND SERVICES

The Situation

- VA long-term supports and services (LTSS) encompass a broad range of assistance to veterans, regardless of age, who have lost the ability to function independently due to injury or illness thus preventing them from being active participants in their community.

- Availability and access to appropriate VA furnished LTSS continues to be challenged due to the diversity, increasing number, and medical complexity of the veteran population who will need these services.

The Challenge

- Projections over the next decade indicate there will be about one million veterans 85 and older who will likely require LTSS. In addition, the number of veterans enrolled in the VA health care system with limitations in one or more activities of daily self-care who are also likely to require LTSS will remain more than 1.2 million.

- For over a decade, VA has committed to provide patient-centered LTSS in the least restrictive setting compatible with the veteran’s preference—reserving nursing home care for those who can no longer be safely cared for at home. VA’s Choose Home initiative reflects this commitment ensuring veterans can choose care at home over institutional care. However, the number of veterans served and the amount of resources expended does not yet support a balanced LTSS program within VA.

- Changing VA’s existing LTSS from its historic institutional model must involve a thoughtful and deliberate shift in spending from institutional based care to home and community-based services (HCBS). VA has made tremendous strides increasing access to HCBS; however, the incentives that grew this program are not being applied to sustain the rebalancing of VA’s LTSS system.

- Research shows effective rebalancing of LTSS systems is achieved when services are targeted to the population most in need. While there are many validated needs assessment instruments available to target and tailor those services, there is no national standard used consistently throughout VA’s LTSS system. Thus, access to VA HCBS is determined more by locally available resources rather than clinical need, which hampers the effectiveness of planning, programs, initiatives and services.

- Effective rebalancing also requires an easily accessible and wide array of HCBS. It has been nearly a decade since the Government Accountability Office (GAO) has reported on the availability of HCBS services in the VA health care system, and anecdotal reports from the field today indicate wide variability of HCBS offered by VA medical centers.
The Solution

- VA should make a sustained commitment to request and allocate sufficient resources for successful LTSS rebalancing, and to adopt appropriate incentives to motivate the rebalancing of VA LTSS.

- VA must adopt an evidence-based needs assessment instrument to determine the sufficient level of HCBS services needed for veterans and their caregivers to remain active participants in their communities.

- Congress should conduct rigorous oversight on VA LTSS in meeting the need of veterans by reducing service gaps in VA HCBS, offering newer models of care, and transforming policies and infrastructure that govern VA LTSS.

- Congress should request GAO to conduct a follow-up report on the availability of and veterans' access to VA HCBS and on VA’s justification for its LTSS budget requests.