

Good Morning Senator Vulakovich, Senator Wiley, Representative Hennessey, Representative Samuelson and Members of the Senate Aging and Youth and House Aging and Older Adult Services Committees.

Thank you for this opportunity to speak with you briefly about “aging in Pennsylvania” – a subject we’re hearing a lot about these days as being a “problem” but try as we might, we are still not hearing much about a solution.

We’re living longer, and unfortunately we just don’t know what to do about it. As our state’s elected officials, many people look to you to solve the problem. Isn’t that what we did decades ago when we established Medicare in 1965, and even earlier in the 1930s when Henry Ford established a retirement benefit for his auto workers? Each of these programs was built on the premise that people needed health care and support, but only for a short period of time, with the general assumption that people would not live that long – perhaps not much beyond their 65th birthday.

But here we are in 2014, and the fastest growing segment of our state’s population is over the age of 85. In fact, half the children born today will live into their 100s! So what are we doing to prepare?

As we in this room are confronted with taking care of our own aging parents, relatives and friends, we already know that our health care system isn’t ready for this “silver tsunami.” It’s important to recognize that while we are here today to discuss aging issues and how we can prove the delivery of care; we will fail if we do not look at the entire health care delivery system, which encompasses long-term care.

For years, we have spoken about long-term care in the political arena, and too often people think this is just nursing homes. However, today, finally, the term long-term care reflects ALL options for providing care and services to seniors and adults with disabilities, including in-home care, personal care homes and assisted living, and adult day services. And while many things have changed in regard to how we care for our seniors and adults with disabilities, just as many things have remained the same, most notably the way we spend our dollars on this type of care:

- 1) Pennsylvania still spends the bulk of its Medicaid dollars on nursing homes rather than funding services that enable people to remain at home, which is the cheaper and most preferred option. Our state is 46th out of all the states in the percentage of funds we allocate to home and community services.

- 2) We still consider receiving services in the home as an exception to the rule. The citizens of Pennsylvania are entitled to receive nursing home care but NOT in-home care. That’s why we have the Aging WAIVER program and other home and community-based services WAIVERS, because we are “waiving” the Medicaid rules that say if you are determined to be “nursing facility clinically eligible,” or NFCE, then you are able to go into a facility, and instead choosing to remain at home. It is hard to believe that in 2014 we still consider in-home care an exception.

3) Spend down. We all have heard this term in regard to nursing homes. One can enter a nursing home, usually within days, no matter what their income and immediately begin spending down their income by sharing in the cost. However if I want to remain at home, and am just \$1 over the allowable monthly income, I am immediately INELIGIBLE to receive Medicaid-funded in-home care. Our state's rules make it easier to be eligible for Medicaid-funded nursing home care, which costs the state \$60,000 a year, than home care, which costs just \$22,000 a year.

These are just a few of the rules that must be changed if Pennsylvania is going to become a state where people can live, work hard, retire and be assured that they are cared for. Yet, while there are many challenges before us, I am optimistic about our future and how we provide care and support to seniors and adults with disabilities.

After being in the business for decades, I have never seen so much attention paid to long-term care issues. Just published last week, the Joint State Government Commission's study on long-term care includes nearly 40 recommendations developed from a series of public hearings across the state. At the end of this year, you will have another report and a series of recommendations from the Long-Term Care Commission, which is hard at work reviewing the current system and earlier this year, the Alzheimer's Commission release its report on how to address and improve the services provided to individuals with dementia and Alzheimer's disease.

Let's be honest. There have been other reports...and good reports! I know, because I have sat on those commissions. The Senior Services and Study Commission, the Barriers report and many others...we simply CANNOT AFFORD to allow one more report to just sit on a shelf. Our seniors deserve better! Yes, we have wonderful options for people as they age, and as members of these important committees, you have done some outstanding work: most notably passing the Pennsylvania Caregiver Bill, licensing in-home care to protect our seniors and discussing revisions to the Older Adult Protective Services Act.

However, there are still parts of our system that aren't working and must be fixed. This is an overwhelming issue so, in closing, I will offer three recommendations that would have a dramatic impact on improving the way Pennsylvania cares for seniors:

1. We must do something to elevate the role of our direct care workers – the aides and attendants who are the backbone, the eyes and ears, of senior care. Today, most people do not die from acute illnesses but from chronic conditions. Their needs are mostly personal care – help with bathing, meal preparation and medication assistance. They wish to remain at home and can, if they have some help. Personal care aides can be their lifeline. And while personal care aides are this country's fastest growing profession, according to U.S. Labor Statistics, there is a tremendous shortage. Low pay, no benefits and plain old hard work means this profession is not an easy one, but it is one that can make a tremendous difference for our seniors.

2. Family Caregivers – Support them! Until you are one, you have no idea the impact it has on all aspects of your life. Families who do this should be supported and incentivized, rather than forced to abide by rules that make it easier for them to just give up. If we believe in families, let's support them by helping them stay together.
3. And as I mentioned earlier, we need to change the Medicaid rules. All options for long-term services and supports, whether in-home care or a nursing home, should have the same eligibility rules.

We must INVEST in our seniors and our adults with disabilities by investing in the long-term services and supports that they rely on every day to remain independent. Just as we invested in our highways and bridges, we must not shy away from recognizing that the caliber of these services REFLECT who we are as a state – our values and beliefs.