



# VA Caregiver Support Program: Correcting Course for Veteran Caregivers

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Statement of

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For the Record

United States House of Representatives  
Committee on Veterans' Affairs

With Respect To

“VA Caregiver Support Program: Correcting Course for Veteran Caregivers”

WASHINGTON, D.C.

Chairman Roe, Ranking Member Walz and members of the committee, on behalf of the women and men of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, thank you for the opportunity to provide our remarks on how to improve and expand the Department of Veterans Affairs (VA) Program of Comprehensive Support for Family Caregivers.

Whether providing assistance to a veteran who served in Korea or Afghanistan, Caregivers help lower costs of care and increase the health and quality of life for veterans who were seriously injured in the line of duty. Family caregivers who choose to provide in-home care to severely disabled veterans truly epitomize the concept of selfless service. They choose to put their lives and careers on hold, often accepting great emotional and financial

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burdens. They do this recognizing their loved ones benefit greatly by receiving care in their homes, as opposed to institutional settings.

The VFW strongly believes the contributions of family caregivers cannot be overstated, and our Nation owes them the support they need and deserve. That is why the VFW strongly supported the Caregivers and Veterans Omnibus Health Services Act of 2010, which provided a monthly stipend, respite care, mental and medical health care, and the necessary training and certifications required for caregivers of severely disabled Post-9/11 veterans. We did so, however, with the understanding that eligibility would be later expanded to include veterans of all eras. Severely wounded veterans of all conflicts have made incredible sacrifices, and all family members who care for them are equally deserving of our recognition and support. The fact that caregivers of previous era veterans are excluded from the full complement of program benefits implies that their service and sacrifices are not as significant, and we believe this is wrong.

One of the requirements of the Caregivers and Veterans Omnibus Health Services Act of 2010 was for VA to submit a report to Congress examining the feasibility of expanding eligibility for comprehensive caregiver benefits to those who care for severely injured veterans of previous eras. That report, issued in September 2013 and stated that expansion would be operationally feasible, so long as Congress gives VA the necessary funding to administer the programs and hire the required additional staff. Subsequently, the Secretary of Veterans Affairs and the members of this committee have publically supported expansion of this important program. It is past time for Congress to follow through and expand this important benefits.

### **Eligibility and Current Recipients**

Current eligibility criteria requirements for acceptance into the caregiver program are rigorous. This is shown in the fact that there are currently only 22,000 participants in the program, which is less than three percent of the 1.06 million Global War on Terror veterans who have received a service-connected disability rating from VA –as of September 30, 2016. Additionally, 86 percent veterans who are enrolled in the caregiver program have a service-connected disability rating of 70 percent or higher. To be eligible, the veteran must have incurred or aggravated a serious injury while serving in the military on or after Sept. 11, 2001. Due to the serious injury the veteran must also now require assistance with the management of their personal care and functions involved in daily life. This assistance must be needed for a minimum of six continuous months based on a clinical decision, and then receive ongoing care from a Patient Aligned Care Team or another VA health care team which is in the best interest of the veteran. The veteran must also agree to receive ongoing care at home by the designated family caregiver, and those services provided by the caregiver may not be provided by any other individual or entity.

During the evaluation process VA also conducts a home visit to help the agency make a

sound decision regarding eligibility that is not solely based on service-connected disability ratings or statements made by the veterans and/or their caregivers. During the assessment for eligibility process VA may request additional evaluations from behavioral health, occupational therapy, physical therapy and other medical specialty offices to assist in completing the assessment. If approved for the program, a designated caregiver must be an immediate family member or somebody who lives with the veteran full time and is at least 18 years of age. These individuals must also undergo training and be able to demonstrate the ability to assist their veterans.

For those who are approved for the program, VA then requires their medical centers to monitor all participants. This involves quarterly check-ups for monitoring, which are done through various platforms such as phone calls, clinic, telehealth and/or home visits.

The VFW agrees that the requirements for VA's caregiver program must be tough to assure only veterans who need the program are able to partake, though we do have some concerns. Aside from the VFW's strong support of expanding the caregiver program to veterans who served before Sept. 11, 2001, the VFW also supports expanding the eligibility criteria of "seriously injured" to "seriously ill or injured". According to the Code of Federal Regulations, VA defines a serious injury for participation in the caregiver program as, "any injury, including traumatic brain injury, psychological trauma, or other mental disorder, incurred or aggravated in the line of duty in the active military, naval, or air service on or after September 11, 2001, that renders the veteran or servicemember in need of personal care services."

This definition does not successfully define the inclusion of those who need the assistance of a caregiver due to debilitating illnesses which render a veteran unable to perform activities of daily living without the assistance of a caregiver, such as Parkinson's Disease and Amyotrophic Lateral Sclerosis (ALS). While VA has never considered non-mental health illnesses when determining eligibility for the caregiver program, the Department of Defense's Special Compensation for Assistance with Activities of Daily Living (SCAADL) program does. The SCAADL program does not distinguish between illness and injury for eligibility determination. Veterans who have recently transitioned from military service who were enrolled in the SCAADL program because of a serious illness are rightfully outraged when they are rejected from the VA program simply because they suffer from an illness instead of an injury. Including illness in VA's eligibility would allow for more equity between the two programs which are needed by the same population.

## **Quality of Life**

It is not secret the majority of people requiring assistance for daily living prefer being at home, and our members are not afraid of letting the VFW know. There is a comfort in being surrounded by one's familiar setting and personal belongings and there is a sense of happiness having the opportunity to remain in proximity to loved ones. This is why those

who have fought for our Nation rightfully deserve every opportunity to remain comfortably at home with their loved ones before being forced into an assisted living situation most do not want.

## **Cost**

Aside from how important it is to improve the quality of our heroes' lives, it is also more cost effective. According to the Congressional Budget Office, the average annual cost per patient for the caregiver program is \$18,300. This is the average cost when adding together stipend payments and Civilian Health and Medical Program of VA coverage. For veterans not using the caregiver program but in need of assisted living, VA may offer them VA Community Living Centers, Community Nursing Homes or State Veteran Nursing Homes.

As of 2016, the cost of the latter three options is exponential. The State Veteran Nursing Homes average at \$56,042.52 per patient per year, Community Nursing Homes average at \$101,132.20 per patient per year and VA Community Living Centers average at \$379,853.71 per patient per year. This means the average veteran caregiver saves VA and our government anywhere from nearly \$38,000 per year to \$362,000 per year – all while maintaining a comfortable and higher-quality lifestyle for severely injured veterans. The VFW believes investing money in VA's caregiver program is not only the correct thing to do, but it is the financially responsible thing to do.

## **Revocations and Tier Reductions**

Members of the VFW and VA's Caregiver Support Line hear on a nearly daily basis from veterans and their caregivers about their frustrations with the revocation of their eligibility and tier reductions. The VFW is thankful VA has worked on improving these issues, but there is still work that must be done.

The VFW understands there will be veterans who are able to graduate from the caregiver program – and not needing the program anymore should be viewed as a positive. The problem lies with the handling and communication of a veteran improving enough to not need the assistance of the program. Program stipends were never intended to be a permanent benefit for all caregivers in the program, yet VA must work to assure caregivers of veterans who have grown to be dependent on the caregiver stipend are able to obtain meaningful employment that prevents financial hardship. Through its Unmet Needs financial grant, the VFW has helped countless caregivers make ends meet because they were abruptly discontinued from the caregiver program and were unprepared to obtain employment that would replace the lost financial stipend.

That is why the VFW believes VA must provide services to better assist caregivers in transitioning from being on the program, to a different tier or completely off the program. While VA is currently providing a period of time after notification before the caregiver loses

their monetary stipend, VA needs to educate these individuals about opportunities for vocational training, employment possibilities and health care options.

The VFW commends Representative James Langevin for his efforts to improve and expand the caregiver program through H.R. 1472, the Military and Veteran Caregiver Services Improvement Act of 2017, which would expand the caregivers program to wounded veterans of all eras. The VFW frequently hears member feedback regarding eligibility for this important program. Their message is clear: veterans of all eras deserve caregiver benefits. As an intergenerational veterans' service organization that traces its roots to the Spanish American War, this is not surprising.

Our members are combat veterans from World War II, the Korean War, the Vietnam War, the Gulf War, the wars in Afghanistan and Iraq, and various other conflicts. They rightly see no justifiable reason to exclude otherwise deserving veterans from program eligibility simply based on the era in which they served. Accordingly, we strongly urge you to swiftly consider and pass a bill to end this inequity.

#### **Information Required by Rule XI2(g)(4) of the House of Representatives**

Pursuant to Rule XI2(g)(4) of the House of Representatives, the VFW has not received any federal grants in Fiscal Year 2018, nor has it received any federal grants in the two previous Fiscal Years.

The VFW has not received payments or contracts from any foreign governments in the current year or preceding two calendar years.