

Care at Home: Who We Are

We provide care in people's homes ranging from home care to private duty nursing (PDN). Our clients include seniors, medically–fragile children, and veterans. Home care (the fastest growing segment of health care in America) includes any support services that assist with activities of daily living, such as bathing, dressing, meal preparation, eating, and light housekeeping, as well as assistance with medication reminders, transportation,

26,000+home care agencies in U.S.

and companionship for clients of all ages. We also provide PDN, as described below. Home care and PDN should not be confused with home health, a Medicare benefit requiring medically necessary, doctor-prescribed care solely for older adults. Most importantly, our aides often serve as a crucial set of "eyes and ears" for family members and physicians.

Our Seniors

- America is growing older. In less than 10 years, there will be more people over the age of 65 than under the age of 18.
- This aging population strongly desires to remain in their homes as they receive the care they've come to rely on.
- Unfortunately, the number of professional caregivers is declining, despite the increased need.
- This predicament raises new challenges that our healthcare system must address.

Our Veterans

- A September 2021 VA report to Congress on long-term care projections indicated veterans over age 85 were the fastest growing veteran population.
- Over the next 20 years, the number of veterans in that age group eligible for nursing home care will increase from 61,000 to 387,000, a 535% jump.
- The VA has acknowledged the need to rebalance long-term services and support and shift resources from nursing home care to home and communitybased services.

Our Medically Fragile Children

- Private duty nursing (PDN) is continuous skilled nursing care provided in the home for medically complex children and adults under Medicaid, many of whom require assistive technology such as ventilators and tracheostomies to sustain life.
- These individuals require skilled nursing services from between 4 –24 hours per day to safely manage their condition while in their homes.
- While PDN is often provided through Medicaid, PDN is not the same as Medicare home health.

Not only is home the setting of choice for many people – it is also the most economical option.

- Older adults (average 80 years and older) with functional limitations who received home care saved \$500 per member per month compared to those NOT receiving home care.
- A study published in the Annals of Internal Medicine found that more than \$4 billion of Medicare costs are due to a lack of ongoing assistance with activities of daily living.
- These costs are also apparent in the Medicaid PDN population, where lack of access costs thousands of dollars a day in unnecessary hospital costs per patient.



Home care paid for by:

- Individuals and families
- Private or long-term care insurance
- Medicaid
- Veterans Affairs benefits
- Medicare Advantage
 Supplemental Benefits

Legislation to Improve Access to Home Care

We ask that you co-sponsor and support the following bills to help meet America's home care needs:

Financing Care for American Families:

Credit for Caring Act (S.3702, H.R.7165), sponsored by Sen. Bennet (D-CO) and Rep. Carey (R-OH-15):

• Allows an eligible caregiver a tax credit of up to \$5,000 for 30% of the cost of long-term care expenses that exceed \$2,000 in a taxable year.

Homecare for Seniors Act (H.R.1795), sponsored by Reps. Adrian Smith (R–NE–3) and Katie Porter (D–CA–47):

 Allows tax-exempt distributions from health savings accounts to be used for qualified home care services such as assistance with eating, bathing, and dressing.

Taking Care of Our Veterans:

Veterans' HEALTH Act (S.1315, H.R.3520), sponsored by Sen. Moran (R-KS) and Rep. Miller-Meeks (R-IA-1):

• Allows providers up to one year (rather than 180 days) to submit claims to the VA for services furnished.

Elizabeth Dole Home Care Act (S.141), sponsored by Sen. Moran (R–KS):

- Expands, accelerates, and supplements the U.S. Dept. of Veterans Affairs' ability to meet the rapidly growing needs of veterans, their families, and caregivers.
- The U.S. House's version (H.R.542) allows the VA to spend the same amount on noninstitutional care as institutional care for veterans who receive nursing level care in their homes.
- H.R.542, sponsored by Rep. Brownley (D-CA-26), was passed on Dec. 5, 2023 by a vote of 414-5!

Streamlining Quality Care for Medically Fragile Children:

Continuous Skilled Nursing Quality Improvement Act, under bipartisan consideration and being drafted by Sen. Vance (R-OH):

- Redefines private duty nursing (PDN) services under the code of regulations as "Continuous Skilled Nursing" (CSN) to ensure all entities are referring to the same population when referencing the service.
- Creates appropriate and consistent national standards for PDN.
 - Currently, CMS and state Medicaid agencies use Medicare's outdated Conditions of Participation (COPs). COPs are geared toward intermittent nursing visits for older adults, not the PDN/CSN population.
 - This bill would remove COP requirements for these services and establish a CMS-sponsored stakeholder coalition to create national standards of care more appropriate for the PDN/CSN population.

