

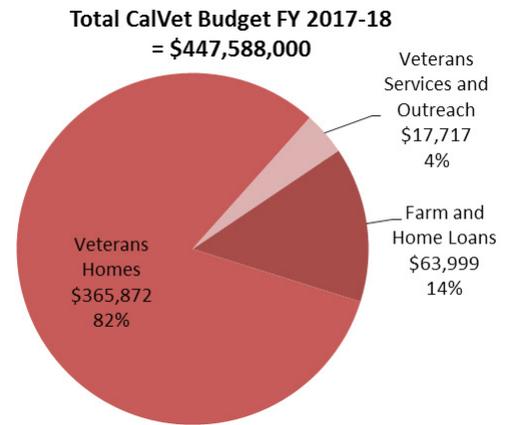
# REPORT FACT SHEET

## A NEW APPROACH TO CALIFORNIA'S VETERANS HOMES

### Who benefits?

Fewer than 1 percent of California's 1.7 million veterans benefit from the 2,610-bed veterans homes program run by the California Department of Veterans Affairs (CalVet). Yet, the lion's share of state resources for veterans – more than 80 percent of CalVet's budget – support the management, maintenance and operation of the state's eight veterans homes. The remaining 20 percent of funds goes to veterans services and outreach programs and the state's farm and home loans program.

The Commission recommends CalVet conduct an assessment to consider the needs of California's overall veteran population.



### What kind of care is offered?

California's system of eight veterans homes offer an array of services to residents capable of living independently and to those needing intensive round-the-clock skilled nursing care. Though the levels of care offered among California's veterans homes varies by home, as a statewide system they provide:

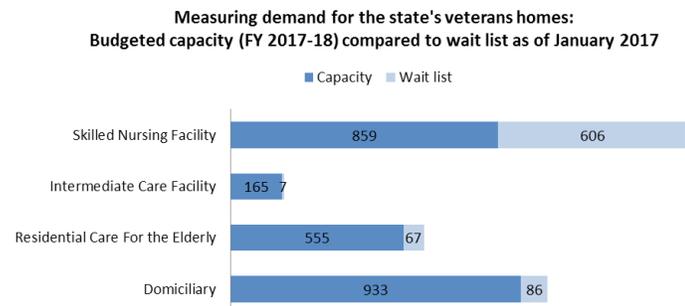
- Domiciliary care: room and board with limited direct supervision for self-sufficient residents. Residents can transfer to higher levels of care as needed, and as space is available.
- Residential Care Facility for the Elderly or assisted living: room and board for residents who are primarily independent, but require minimal non-clinical assistance and supervision with some basic activities of daily living.
- Intermediate Care Facility: minimally staffed 24-hour nursing care for individuals who are disabled, elderly, or nonacutely ill. Residents often require licensed nursing assistance with medications and treatments and unlicensed nursing assistance with several activities of daily living.
- Skilled Nursing Facility: intensely staffed 24-hour nursing care for chronically ill, terminally ill, or those with severe dementia. Skilled nursing residents have greater access to rehabilitation therapies, nursing care, pharmacy management, structured activities and clinical dietary services.

California Veterans Homes Census and Level of Care Summary, Fiscal Year 2017-18					
Facility	Physical Capacity	Budgeted Census by Level of Care			
		Skilled	Intermediate	RCFE	Domiciliary
Yountville	1,184	231	105	48	637
Barstow	400	40	60	—	120
Chula Vista	400	180	—	33	92
Ventura	60	—	—	60	—
Lancaster	60	—	—	60	—
West LA	396	228	—	84	84
Fresno	300	120	—	180	—
Redding	150	60	—	90	—
<b>Totals</b>	<b>2,950</b>	<b>859</b>	<b>165</b>	<b>555</b>	<b>933</b>

## How are spaces prioritized?

Currently, admission to the homes is generally offered on a first come, first served basis at each home and level of care, though priority admission is granted for certain veterans such as former prisoners of war or medal of honor recipients, as well as homeless veterans.

The Commission recommends prioritizing beds for those who most need the care, as well as intelligently revising residential-only services in the homes to focus on skilled nursing care.



## Do the homes offer the right kind of care?

Nearly 60 percent of beds within the homes are earmarked for veterans who are self-sufficient or who can function with little assistance in the homes' domiciliary or assisted living programs. But there is strong demand for a spot in one of the state's skilled nursing beds – as of January 2017 more than 600 individuals were waiting for a space in one of the state's 859 skilled nursing beds.

## What care do veterans want?

Research from the AARP suggests that the majority of adults age 65 and older prefer to age at home and in their communities, rather than in institutional settings like skilled nursing facilities. But the remote location of many of the state's eight veterans homes makes it difficult for many families to remain in close distance to their loved ones.

## What services should the state offer?

The Commission recommends state leaders gradually eliminate domiciliary care to focus on skilled nursing and consider whether CalVet should further modify the veterans homes program by closing or repurposing facilities, or investing in more cost-effective alternatives to its homes, such as home and community-based programs for aged and disabled veterans. In making these or other changes to the program, CalVet should ensure it keeps its promises to current home residents

## The costs are high.



In Fiscal Year 2017-18, CalVet received \$306.7 million from the general fund for the state's eight veterans homes. This amounts to approximately \$117,000 a year per bed, regardless of the level of care.

## Who pays?

CalVet expects to collect an estimated \$121.5 million in revenue from the U.S. Department of Veterans Affairs, federal, state and private health insurance plans and fees charged to resident members to offset General Fund contributions in FY 2017-18.

Still, California taxpayers will pay approximately \$185.2 million to operate the homes. Some states operate veterans homes with little or no General Fund support.



The Commission recommends changes in state law requiring that residents tap all available resources to help pay for their care, including enrollment in state and federal benefit programs and maintaining health insurance coverage throughout their stay in the homes.