Update on VA Benefits and Community Resources for Older Adults

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Learning Objectives

• Name appropriate geriatric and palliative care resources, both inside and outside the VA
• Distinguish Veterans who qualify for Aid and Attendance and other benefits
• Identify community resources for older adults
Case: High Risk Elderly Veteran

77 yo man living alone in rural Colorado
- Medical history: bladder cancer with bone mets & worsening pain, PTSD, anxiety, pulmonary embolism on anticoagulation, hypertension, and short-term memory loss

- Cancer care & treatment by non-VA community care providers
- Medications per day: 9
- Vietnam era Veteran
- Not service connected (NSC)
- Care partners: Dtr/MDPOA in CT & 6 friends close by, check in. Retired RN, will help w/ pillbox fills
Current status

- Function reduced d/t cancer pain, fatigue, weakness. Denies falls

- Nutrition reduced w/ weight loss, lack of appetite, uncontrolled constipation
  - No recent weight on file but appears thin, working w/ nutrition for supplements

- Cognition is poor in setting of short-term memory loss
  - Difficulty communicating on phone, often does not return calls, voicemail full

- Symptoms: abdomen pain, constipation, nausea, cancer pain to back, loss of appetite, fatigue

- Does not drive outside of small area near home, relies on friends and neighbors for transport, errands
What’s available at home?

Home health services
- VA Home Health Benefit
- VA Respite Benefit
- VA Skilled Care
- Blending with Medicare (skilled care) or Medicaid (long-term services & supports)

VA programs for frail Veterans
- VA Home Based Primary Care
- VA Medical Foster Home
- Veteran Directed Care (VDC)

VA telehealth
Home Health Services

Long-term services and support at home, including:

- CNA, Homemaker, Respite care by CNA

- Skilled RN/PT/OT/SLP

- Skilled Palliative Care, where available through community agencies (typically a monthly visit from a palliative care nurse)

Payer source can be VA, Medicare or Medicaid depending on Veteran’s eligibility and preference.
Veteran Case: iADL’s & ADL’s

• Looking back on our tele-palliative care Veteran
  – Denies trouble w/ med management, obtaining food/drink & managing relationships
  – He facilitates transport from rural home to PUE multiple times weekly for medical visits. He drives short distance to USPS to DAV van
  – Pays his own bills, no double payments or forgetting. Autopay, no scams.
  – He cooks/cleans for self
  – When offered additional support “I don't what they would do”
**iADL’s & ADL’s**

- **Key Point** – An OT evaluation, including by VVC if available, can assess level of function, safety at home, and help meet equipment and supply needs

- **ADL’s**
  - Feeding: getting food to mouth, tube feed
  - Bowel & bladder: getting to toilet, clean up self/clothes/bathe after accidents, use of incontinence products
  - Personal hygiene: bathing/showering, oral care, grooming, nail care
  - Dressing: make appropriate clothing decisions, physically dress/undress
  - Transferring/Mobility: sit to stand position, get in/out of bed. Ability to walk independently or propel self
Question: How do you discuss and decide what level of care a Veteran needs?

- Understand level of function = level of eligibility
- If trouble w/ ADL’s, could be time to discuss higher level of care in NH
- VA resources – What’s available in your region?
  - HBPC w/ support at home
  - Program of All-Inclusive Care of the Elderly
  - Community Nursing Home (CNH) program
  - Medical Foster Home (MFH)
  - Veteran Directed Care (VDC)
  - Adult Day Health Care (ADHC), Vet’s Club
- Community “civilian” resources
  - Medicaid Home & Community Based Services (HCBS)
Home Based Primary Care

Goals of HBPC

• Patient-centered care, such as:
  – Understand, document & honor patient preferences
  – Being at home w/ available support
  – Preventing hospitalization/ED visits

• Transdisciplinary team

• Primary Care and care coordination

• Palliative Care

• Case Management
Medical Foster Home program

• Lives with a caregiver, who provides care
• In conjunction with Home Based Primary Care
• Veteran pays caregiver
• Veteran can also receive VA Home Health services (CNA, RN, etc.)
• https://www.va.gov/geriatrics/guide/longtermcare/medical_foster_homes.asp
Nursing Homes

- Community Nursing Homes (CNH)
  - Available for highly Service Connected
    - 70-100%
    - 60%SC + Unemployability
    - SC is the reason for NH placement
      - End-of-Life, no SC requirement; may be NSC
      - Respite, no SC requirement; may be NSC
- Community Living Centers
- State Veterans Homes
Veteran Directed Care

- Advantages – “Employs” a close contact to provide caregiving activities
- Eligibility: Veterans in need of nursing home care and interested in “self-directed care”
- Heavily weighed on ADL dependence/OT eval
- Coordinated thru Aging Network Agencies, similar to Medicaid HCBS
- Process is overseen by a VA social worker
- [Veteran-Directed Care - Geriatrics and Extended Care (va.gov)]
- Does my VA have VDC? [Veterans (acl.gov)]
Program for All-inclusive Care of the Elderly (PACE)

- Medicaid program for community-based long-term services and support + day center + integrated medical/dental care
- For Veterans who are 70-100% Service Connected -> VA pays (in Colorado)
- For Veterans <70% SC -> Available through Medicaid
- Limited by regional availability of PACE programs
- National PACE Association | (npaonline.org)
VA GEC Website

Home and Community Based Services - Geriatrics and Extended Care (va.gov)
Question: How do you identify if a caregiver is involved? How do you ask how the caregiver is doing?

• To the veteran:
  – Who else should the VA know is involved in your health care?
  – What are things you get help with at home? Who is your helper?

• To the caregiver:
  – Check in with them by asking:
    • How are you doing/feeling?
    • What areas of the veteran's care could the VA help support?
    • What do you do to take time for yourself?
    • Who is your back up helper?
Caregiver Support

• VA Respite benefit
  – In-home: 6 hours by CNA per visit
  – Community nursing home or CLC
  – Can use a combination of in-home or CNH, 30 days maximum per calendar year
Caregiver Support

• VA’s Caregiver Support Program
  – [VA Caregiver Support Program Home](#)

• Community-based resources
  – Area Agency on Aging for rural, “think civilian”
  – Alzheimer’s Association or disease specific support groups (ALS, Parkinson’s)
Community-based Resources for Older Adults

- Veteran Service Officers
- Veteran Community Partnerships
- County-specific Area Agency on Aging
- Aunt Bertha - The Social Care Network
- Respite Relief For Military & Veteran Caregivers - Hidden Heroes
- Call 211 for Essential Community Services | United Way 211
- Alzheimer's Association | Alzheimer's Disease & Dementia Help
- Friendship Line (Institute on Aging) – 800-971-0016
Question: Would telehealth address our Veteran’s needs?

• Older adults w/ cognitive or functional limitations may have trouble coming into VA appts
  – Do they have a smart phone, tablet or computer at home? Or a support person available to attend w/ them?
  – Would reminders/check-ins be helpful?
  – How is vet getting to appts, is in-person care required for every visit?
Digital Divide Consult

- Vets who benefit from video telehealth services but don’t have internet access or a video-capable device are eligible.
- VA lends them an internet-connected tablet to reach the VA care team.
- Bridging the Digital Divide | Telehealth VA

15% of Veteran households do not have an internet connection.

Federal Communications Commission, 2019
Home Telehealth (HT)

- Daily monitoring of VS for med titration & timely adjustments to plan of care; providers take proactive steps to intervene before an acute event occurs.
- Improve communication, collaboration & coordination of care among IDT members (e.g., PACT, specialist providers, COM PharmD, MH team).
- Goal: empower vet to engage in their own health care to self-support their chronic condition after HT disenrollment. Most graduate in 6-12 mos.

DISEASE MANAGEMENT PROGRAMS

- Heart Failure
- Hypertension
- Schizophrenia
- Substance Abuse
- Diabetes (A1c >9%)
- Respiratory Infectious Disease*
- Depression
- Bipolar Disorder
- Anxiety
- PTSD
Annie Text Care Program

Dementia Behaviors & Stress Management protocol

VA’s text messaging service that promotes self-care for Veterans enrolled in VA health care and their caregivers

Dementia Caregiver specific program:
• Phone that can receive text messages to enroll
• Provides help with dementia behaviors and stress
• Sends text messages 7 times per week for 1 year
• Messages are educational, motivational, tips to help with behaviors, and activities to manage stress

• Contact Caregiver Support Coordinator to enroll
• Using the Annie App To Expand Veteran Care - YouTube
Question: How do you assess whether a Veteran has palliative care needs?

- Does veteran have a serious or life-limiting illness?
  OR
- Does the veteran have symptoms or complex care coordination needs that are limiting quality of life?
  OR
- Does the veteran have a limited life-expectancy?
Veteran case: Goals of Care

From Chart Review
- No life-sustaining treatment note on file
- Full code
- Previous advanced directive names son who is now estranged from Veteran and requesting to complete new document

What matters?
- Remain independent
- Remain at home alone w/ support of friends & family
- Continue disease directed therapies for bladder cancer
Symptom needs

• Abdomen pain
• Cancer pain in back
• Constipation
• Nausea
• Loss of appetite
• Fatigue
Outpatient Palliative Care Clinic

- Physician/NP and SW
- Goals of care and understanding of illness
- Symptom management
- Benefits discussions
- Advance Directive documentation and Life-Sustaining Treatment Initiative
- System navigation
- Continuity across care transitions
Question: How do I determine if a Veteran is appropriate for Hospice Care?

- Estimate prognosis
- Explore goals of care specific to avoid hospitalization
- Describe hospice
How does the VA Hospice Benefit work?

• Provided via community hospice agency
  – Hospice-Veteran Partnerships:
    Hospice-Veteran Partnerships - We Honor Veterans

• Hospice at CNH

• Community Living Centers

• General Inpatient Status (contracts with community hospice agencies)
Home Hospice

• Provided by a Community Agency
• Same criteria as Medicare (i.e., life expectancy less than 6 months)
• Medicare pay or VA pay
Inpatient Hospice for Routine Level of Care at Community Nursing Homes

- No SC requirement
- Meets Medicare criteria for hospice
- VA pays room & board
- VA or Medicare pay for hospice services
- May discharge from hospice and CNH if “graduates”
- Not for custodial nursing home care
Community Living Center (CLC) Hospice

- Hospice Medical Director & Interdisciplinary Team (no outside agency)
- PTSD training for VA staff
- Complex Goals of Care
- Concurrent care
- Homelessness
- Community of peers
Concurrent Hospice Care Services

- Homemaker
- Chemotherapy
- Radiation
- Hemodialysis
VA Benefits

What’s available? Who qualifies?
Enrollment in the VA

- DD214
  - Determines eligibility for VA care
- Categories
- Catastrophic Disability
- Service Connection
Aid and Attendance

Aid & Attendance – Provides financial assistance in addition to monthly pension:

• Eligible for a VA pension
  – wartime veterans with low income
  – 90 days of active military service, ≥1 day wartime
  – 65 or older
  – Totally and permanently disabled, in a nursing home, or receive SSDI or SSI
• Apply at VA Regional Office, need report from attending physician
• Require “aid and attendance” of another person or are housebound

• Requirements for Aid & Attendance:
  – Require assistance to perform ADLs (Bathing, feeding dressing, toileting, adjustment of prosthetic devices)
  – Bedfast
  – In a nursing home due to mental or physical incapacity
  – Blind both eyes even with correction
  – Aid And Attendance Benefits And Housebound Allowance | VA.gov | Veterans Affairs
VA Burial Resources

- **VA Burial Benefits And Memorial Items | Veterans Affairs**
  - Determine eligibility
  - Pre-need burial eligibility determination
  - Veterans burial allowance
  - Memorial items
  - Benefits for spouse and dependents (VA DIC)
Thanks!

Please email with any feedback or questions!

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