



For Immediate Release

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***ENZI CALLS FOR NEW EFFORTS TO COORDINATE, STREAMLINE
SYSTEMS OF LONG-TERM CARE***

Washington, D.C. – U.S. Senator Mike Enzi (R-Wyo.), Ranking Member of the Senate Health, Education, Labor and Pensions (HELP) Committee, today said that older Americans and individuals with disabilities have insufficient options when accessing long-term care and community services, and called on Congress to build on creative solutions to address this growing problem.

“Today’s long-term care, community services, and support system is fragmented and unavailable to most Americans,” Enzi said. “We need a coordinated response that involves all levels of government, the private sector and most importantly our citizens to provide a streamlined system of care, services, and supports.”

At today’s HELP Committee hearing titled “Community Services and Supports: Planning Across the Generations,” Enzi said that while most Americans do not have the resources necessary to pay out of pocket for long-term care in a institution like a nursing home, there are other, less costly community options available to assist individuals who need help and support.

“Less costly, community based services and supports are being actively pursued and funded, thanks to provisions of the Older Americans Act that we passed last year,” Enzi said. “The programs place an emphasis on empowering persons with disabilities, older people, their families, and other consumers to make informed decisions about long-term care options, and to access these services easily.”

Enzi said that one successful method for empowerment is to provide streamlined access to health and long-term care through Aging and Disability Resource Centers programs (ADRCs). ADRCs were made permanent under the Older Americans Act reauthorization bill that Congress passed last year when Enzi was Chairman of the HELP Committee.

Enzi said that a key provision to a broad health care reform bill that he plans to introduce shortly will build on ADRC programs to help seniors stay in their homes and communities as they age.

“ADRCs provide individuals with disabilities, seniors, and their families with information on how they may remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers,” Enzi said. “My legislation will build on this goal to empower people to live with dignity in their own homes rather than in an institution.”

“As the baby boomer generation ages, we must continue to think outside of the box as we have done with the ADRCs,” Enzi said. “We must ensure that seniors and individuals with disabilities, particularly those in rural areas, have access to community-based long-term care and services. These one-stop shops should serve as examples for the future of long-term care.”

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Committee on Health, Education, Labor & Pensions

“Community Services and Supports: Planning Across the Generations”

STATEMENT FOR THE RECORD

SENATOR MICHAEL B. ENZI

July 10, 2007

Good morning. I would like to first of all thank Chairman Kennedy for his leadership on this important issue and for holding this hearing. I would also like to thank our witnesses for taking time out of your schedules to be with us. I particularly want to thank Shawn Griffin, Executive Director of Community Entry Services in Riverton, Wyoming and Dr. Deborah Fleming, Clinical Professor of Medical Education and Public Health at the UW College of Health Sciences in Laramie, for traveling here from my home state. It’s a pleasure to welcome all of you to our hearing.

Today’s hearing will follow-up on what we discussed during a hearing that we held in April of 2005 regarding the need for and processes related to advance directives, living wills, health care, and treatment for those who cannot advocate for themselves. The problems and issues we defined and identified at that hearing still exist and must be addressed. Today we will be discussing long-term care, community services and supports for millions of people who are aging or who have disabilities. Most of these individuals will be able to participate in society if they have some additional assistance so they are able to maintain and perform the daily living skills so many of us take for granted.

Many Americans do not have the resources necessary to pay out of pocket for long-term care in an institution. According to the Congressional Budget Office fewer than 7

percent of seniors have annual incomes equal to or greater than the annual cost of a nursing home stay. But there are other, less costly options available to assist individuals that do not need institutional care but do need some extra help and support. These less costly, community based services and supports are being actively pursued and funded through provisions of the reauthorized Older Americans Act that we passed last year. Through programs funded by the Administration on Aging, emphasis is placed on empowering persons with disabilities, older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

One of the methods for empowerment is to provide streamlined access to health and long-term care through Aging and Disability Resource Center programs (ADRCs). A grantee administering an ADRC in my state will describe this initiative in her testimony. ADRCs provide individuals with disabilities and seniors and their families with information on how they may remain in their own homes with a high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers. In short, the goal is to empower people to live with dignity in their own homes rather than in an institution.

The availability of transportation, housing and a personal care workforce is another topic that will be discussed today by a provider of services to persons with disabilities and aging population of Wyoming.

I hope this hearing will make all of us realize that we need to think creatively and figure out ways in which all Americans will be able to access the community services and supports they need at a price that will fit into their individual budgets. We should not require people to become poor to access public programs for the help they need to remain as independent as possible.

As we all know, Medicare and Medicaid are the largest funders of long-term care. I am mindful that current entitlement programs like Social Security, Medicare and Medicaid face challenges to their solvency that need to be addressed on a bipartisan basis. The 2007 Annual Report by the Social Security and Medicare Boards of Trustees warn that Medicare's Hospital Insurance is already expected to pay out more in hospital benefits this year than it received in taxes and other dedicated revenues.

Moreover, Medicare Supplementary Medical Insurance and the new prescription drug benefit will continue to require general revenue financing and charges on beneficiaries that will grow faster than the economy and beneficiary incomes over time. This will place more and more pressure on the Federal budget. The challenge of providing long-term care for baby boomers and beyond should be apart of any solution we propose involving the solvency of those programs which are the primary payers for long-term care.

Finally, and on a brighter note, I want to reiterate that two of our witnesses will tell us about the success of programs in Wyoming to create a one-stop shopping resource center

and enhance support services for the aging and disabled citizens of Wyoming as well as other communities throughout the country.

Again, I want to thank the witnesses for their participation in today's hearing. I look forward to their testimony.

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