

# 1996 SESSION

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## HOUSE JOINT RESOLUTION NO. 219

*Directing the Joint Commission on Health Care to explore the options available to consumers when choosing long-term care in Virginia.*

Agreed to by the House of Delegates, February 8, 1996

Agreed to by the Senate, February 29, 1996

WHEREAS, almost 13 percent of Virginians are aged 65 or older; and

WHEREAS, Medicaid in Virginia invested approximately \$535 million in long-term care services, not including supplies, in Fiscal Year 1995, and its investment will increase significantly over the next 20 years; and

WHEREAS, elderly citizens desire and deserve aging in the least restrictive level of care available to meet their needs; and

WHEREAS, within budgetary constraints, it is appropriate that some nursing home services be reallocated to alternative care programs under Medicaid and other programs; and

WHEREAS, in keeping with the preferences of most older and disabled Virginians, a long-term care system should allow for individual choice for both publicly and privately funded long-term care services and allow providers of care additional flexibility to meet the health care needs of residents in cost-effective and creative ways; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Commission on Health Care be directed to explore the options available to consumers when choosing long-term care in Virginia. The Commission shall examine, but not be limited to, the following:

1. The possibility of a federal waiver allowing adult care residences to provide home health services to residents who qualify for Medicare and Medicaid when federal and state standards are met and the services are determined to be more cost effective;

2. The possibility of allowing individuals who qualify for Medicare to qualify for 100 days of care in an adult care residence after leaving a hospital;

3. The possibility of establishing a voucher system for publicly financed long-term care clients to encourage client responsibility for service choice based on the client's assessed level of care needs; and

4. The establishment of a reimbursement system for publicly funded clients of long-term care tied to the assessed levels of care needed by the client.

The Commission shall provide for the participation of the Departments for the Aging, Medical Assistance Services, and Social Services, representatives from various interest groups, including urban and rural area agencies on aging, nursing homes, homes for adults and health maintenance organizations and members of the General Assembly in the study.

All agencies of the Commonwealth shall provide assistance to the Commission, upon request.

The Commission shall complete its work in time to submit its findings and recommendations to the Governor and the 1997 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents.

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