



VA LONG-TERM CARE

Veterans' Access to Noninstitutional Care Is Limited by Service Gaps and Facility Restrictions

Highlights of [GAO-03-815T](#), a testimony before the Subcommittee on Health, Committee on Veterans' Affairs, House of Representatives

Why GAO Did This Study

With the aging of the veteran population, the Department of Veterans Affairs (VA) is likely to see a significant increase in long-term care need. VA uses noninstitutional long-term care services, such as home health care and adult day health care, and institutional care to meet this need. GAO identified limits in veterans' access to six noninstitutional long-term care services and factors that contribute to these limitations in its report *VA Long-Term Care: Service Gaps and Facility Restrictions Limit Veterans' Access to Noninstitutional Care* ([GAO-03-487](#), May 9, 2003). The report is based, in part, on a survey of all 139 VA facilities. Today's testimony discusses conclusions and highlights recommendations GAO made in the report to improve access to VA noninstitutional long-term care services.

What GAO Recommends

In its report GAO recommended that VA:

- ensure that facilities follow VA's eligibility standards when determining veteran eligibility for noninstitutional long-term care services, and
- refine current performance measures to help ensure that all VA facilities provide veterans with access to required noninstitutional services.

VA concurred with the recommendations.

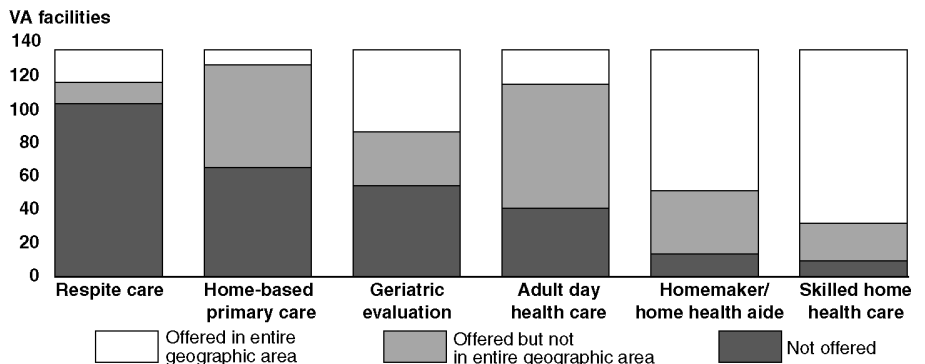
www.gao.gov/cgi-bin/getrpt?GAO-03-815T.

To view the full product, including the scope and methodology, click on the link above. For more information, contact Cynthia A. Bascetta at (202) 512-7101.

What GAO Found

Veterans' access to the six noninstitutional services GAO reviewed is limited by service gaps and facility restrictions. Of VA's 139 facilities, 126 do not offer all six of these services—adult day health care, geriatric evaluation, respite care, home-based primary care, homemaker/home health aide, and skilled home health care. Veterans have the least access to respite care, which is not offered at 106 facilities. By contrast, skilled home health care is not offered at 7 facilities. Veterans' access is more limited than these numbers suggest, however, because even when facilities offer these services they often do so in only part of the geographic area they serve. In fact, for four of the six services the majority of facilities either do not offer the service or do not provide access to all veterans living in their geographic service area. Veterans' access may be further limited by restrictions that individual facilities set for use of services they offer. For example, at least 9 facilities limit veterans' eligibility to receive noninstitutional services based on their level of disability related to military service, which conflicts with VA's eligibility standards. Many facilities restrict the number of veterans who receive services resulting in veterans at 57 of VA's 139 facilities being placed on waiting lists for noninstitutional services.

Noninstitutional Long-Term Care Services Not Available to All Veterans, Based on Geographic Areas, at VA's 139 Facilities as of Fall 2002



Source: GAO.

VA's lack of emphasis on increasing access to noninstitutional long-term care services has contributed to service gaps and individual facility restrictions that limit access to care. Faced with competing priorities and little guidance from headquarters, field officials have chosen to use available resources to address other priorities. While VA has implemented a performance measure for fiscal year 2003 that encourages networks to increase veterans' use of five of the six noninstitutional services, it does not require networks to ensure that all facilities provide veterans access to noninstitutional services.