



For Immediate Release
September 25, 2007

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**Hearing Statement of Senator Max Baucus (D-Mont.)
Regarding Expanding Options for Long Term Care**

In July of 1776, the bell of Philadelphia's Independence Hall rang to summon Americans to the birth of an independent nation. On that bell were cast the words from Leviticus: "Proclaim Liberty throughout all the land unto all the inhabitants thereof."

Americans value freedom. Americans value independence.

The people from my home state of Montana have an independent spirit. They take pride in taking care of themselves.

But not all Americans have the freedom to live independently. People with disabilities and the elderly — especially those who are also poor — face barriers to living independently. They face barriers to living where they choose. They face barriers to traveling across town.

Medicaid provides the bulk of services to low-income elderly and people with disabilities. But Medicaid payment limitations can restrict where people live or receive health care.

For example, Medicaid pays for personal care assistance only when it is provided in an institutional setting, like a nursing home. When people with disabilities need these services, and cannot afford to pay for them, Medicaid pushes them into an institution.

Many low-income people with disabilities pay for Medicaid services with their independence. They lose the right to decide when they use the phone. They lose the right to decide what food they eat, or when they eat it. And they lose the right to decide what time to wake up, or to go to bed.

Mark Bowman faced that choice. Mark was born with muscular dystrophy. He was eventually put on a respirator. He needed assistance with his respirator. But he did not need the intensive care that a nursing home provides. Mark wanted to continue living on his own. But he was unable to arrange or afford in-home care.

To receive the care that he needed to stay alive, Mark entered a nursing home, at the age of 25. But Mark was determined to find another way. Five years later, he moved to Montana. There, a state Medicaid waiver allows him to receive these services in his own apartment. Today, he lives independently, attends college, and has more control over his own life.

Long-term care can enable many individuals with disabilities to work or return to work. The Finance Committee heard about these issues at a field hearing this past June.

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Jim Brown testified at that hearing. Jim broke his neck on a trip to Hungary. He testified that if he received more help with personal care, he could return to work. Like Mark, Jim did not need a high level of care. He just needed help with some of his daily care. He was not asking for a handout. He just wanted to be a productive member of the community.

Limitations on independent living also affect the elderly. A recent study showed that nearly three-quarters of people over age 50 prefer to receive care in their homes. More people today are choosing to “age in place.”

The share of people over 75 years old in nursing homes fell from nine and a half percent in 1985 to six and a half percent in 2004. This shift reflects the growth of less-restrictive types of care, from assisted living to adult day care. These alternatives are usually less expensive than nursing homes. And these alternatives often provide better quality of life.

Assisted living and adult day care often require more from family caregivers. It has been estimated that unpaid caregivers provide \$350 billion worth of services a year. That’s nearly as much as the nation spends on all of Medicare.

As the baby boom generation ages, providing long-term care to the elderly will be a growing challenge. States are increasingly concerned about the costs. States view community-based services as a way to control those costs. States that have enabled people to move out of nursing homes and back into the community generally save money.

The need for long-term care does not discriminate. Any one of us, or a loved one, could need long-term care at any time.

Today, we focus on an important component of long-term care — home- and community-based services. We will hear from Senator Harkin, author of the Community Choice Act. Then we will hear from individuals with experience accessing, providing, and evaluating home- and community-based services.

I want to acknowledge that Senator Grassley took strides to expand state flexibility in offering home- and community-based services through the Deficit Reduction Act of 2005. He did so at time when the Finance Committee was charged with finding savings in the Medicaid program. So I commend him for taking those steps when he did.

And so, let us look for ways to summon Americans to the birth of a more independent nation. Let us strive to give new life to the words from Leviticus cast on the Liberty Bell. And let us work to extend liberty and independence throughout the land, to all Americans.

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