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**SCHAKOWSKY ADDRESSES HUNDREDS
OF SENIOR CITIZENS DURING
FIRST ANNUAL CONFERENCE OF
THE ALLIANCE FOR RETIRED AMERICANS**

WASHINGTON, D.C. - U.S. Representative Jan Schakowsky (D-IL) and other prominent Democratic leaders today addressed the first annual conference of the Alliance for Retired Americans, an organization that represents 2.7 million union retirees and other older and retired Americans.

Schakowsky promised hundreds of seniors that she would continue to fight by their side against Republican schemes to privatize Social Security and Medicare and for a comprehensive, affordable, and voluntary prescription drug benefit under Medicare. Schakowsky also spoke about the immediate need to increase senior housing, to expand Medicare to include long-term care services, to improve quality in nursing homes, and to protect seniors in assisted living.

Below is the full text of Schakowsky's speech.

I want to thank George Kourpias, Ed Coyle, Dianna Porter and the Alliance for inviting me today. And a very special thanks to Hal Gullett. Hal is such a leader in Illinois. He is an unbelievable resource to all of us in Illinois.

I can't think of a better time for you to be here and a better time for you to meet with your representatives and senators. Key decisions could be made this fall, particularly around prescription drug coverage. The good news is that everyone is finally paying attention to the problem of high drug costs. The bad news is that, without your pressure in D.C. this week and at home in the coming months, the final bill could undermine the very foundation of Medicare. And the very bad news is that, without you, senior citizens around the country may not even realize it, until it is too late.

As I'm sure you heard this morning from John Dingell and Bob Matsui, one of the big problems we have is that the Republican rhetoric on Medicare and Social Security doesn't meet the reality of the Republican policies.

If you didn't know better, you could listen to the rhetoric and believe that the House-passed Republican bill provides a comprehensive, affordable Medicare drug benefit that forces drug companies to lower their prices. You know better - you know that the reality is far different. Instead of expanding Medicare, the Republican bill turns the drug benefit over to private insurance companies, who decide what drugs are covered and at what price. You know that the ads thanking Republican candidates are actually financed by the drug companies. You know better - but we need to make sure

that everyone knows better - that the Republicans are not allowed to get away with saying that they are protecting Medicare when they're actually trying to privatize it.

The same thing is true for Social Security, as I'm sure that Bob Matsui told you. The Republican pollsters have made it clear to Republican candidates that Social Security privatization is not a winning message. So, they haven't changed their policy but they have changed their rhetoric. Even Republicans like Clay Shaw - author of a privatization bill - are claiming allegiance to Social Security. Again, you know better, that the Republicans are counting on the fact that they can fool voters and, once the elections are over, they'll return to their pro-privatization policies. And, once again, it's time for us to be truth tellers.

Unlike Medicare and Social Security, the Republican rhetoric on long-term care pretty much reflects the reality of their policies. Whether it is increasing senior housing, expanding Medicare to include long-term care services, improving quality in nursing homes or protecting seniors in assisted living, the answer is no.

6,000 Americans turn 65 every day. That number will rise to 10,000 a day by the end of the decade. Many of those senior citizens are healthy and active, but many will need support. As the numbers of senior citizens increase, we should be putting together a comprehensive initiative to deal with their housing and long-term care needs. We should be developing creative ways to keep people in their homes and communities as long as possible through senior housing assistance, support services and home care.

We need to address the needs of family caregivers. 60% of senior citizens who need help with activities of daily living rely exclusively on unpaid caregivers. We need to provide them with financial assistance and respite care.

We must also recognize that many senior citizens will spend some time in a nursing home. There are 1.6 million Americans residing in 17,000 nursing homes around the country. 1 in 4 people over age 25 will experience at least one stay. Today, the average nursing home costs \$50,000 a year. Only 16% of senior citizens could pay for one year in a nursing home without using less than half of their financial assets. For more than half of elderly couples and 60% of elderly singles, a one-year nursing home stay would leave them with no remaining assets.

Medicaid pays for 40% of long-term care and 60% of institutional care - but Medicaid is under severe strain because of state fiscal crises. Many of us in Congress want to increase federal Medicaid payments to help out - at least on a temporary basis -- but the Bush Administration says no. They believe states should respond by cutting benefits, cutting eligibility and cutting payments.

Affordability, though, is far from the only problem. Many nursing homes provide quality care but, more and more, residents and their families cannot be guaranteed that entering a nursing home will not become their worst nightmare. Instead of a caring atmosphere,

they may find an atmosphere of physical threats and terror.

According to the U.S. General Accounting Office, each year more than 25% of nursing homes are found to have violations that cause actual harm to residents or place them at risk of death or serious injury. These numbers mirror studies released by the Democratic Government Reform staff on the situation nationally and in cities like Los Angeles and Chicago.

This past spring, a Health and Human Services Department study (released only because of pressure from advocates) concluded that 9 in 10 nursing homes fail to meet minimum staffing standards necessary to protect residents' health. These are not just statistics. They are living people - our parents, our grandparents, our friends and our family members.

One constituent sent me pictures of her mother and described "the suffering that is going on daily. It's just a very small part of what my mother endured during the end of her life on this earth...horrible, painful pressure sores literally from her head to her feet..her body looked like a skeleton with skin on it."

Another constituent wrote that she has "a relative in a nursing home.and I visit her each day because I literally fear for her life." One woman spent three days with a broken hip before getting medical care because her daughter insisted she see a doctor.

Belinda Clay, from Florida, presented me with a "scrapbook" of her mother's situation and other nursing home residents in Pensacola. "In August 1993, mother was placed in Pensacola Health Care Nursing Home Facility, and I decided to enroll at the University of West Florida. Shortly after classes began, I was forced to choose between being at the nursing home each day to prevent mother from being a victim of gross neglect and abuse or my career. Of course, I chose my mother. As a result of my choice, my family and I have been forced to live on one income.During the past eight years, we have never gone on a family vacation..."

The real tragedy is that nursing home residents and their families do not have to go through this torture. Dianna Porter has detailed the problems and the solutions for nursing home quality. If you haven't read, "Nursing Home Care: When We Will Get it Right?," I hope you will.

As you will see, one of the most important solutions to nursing home quality is staffing - both providing more staff and improving the training of staff. Study after study has shown that there is a direct link between minimum staffing ratios and high quality care. And it just make sense - the more residents in a nursing home, the more staff are needed. And, since many of those in nursing homes have serious health problems, more well-trained staff are needed. Nursing homes that meet minimum staffing ratios have 60% fewer health and safety violations than those that do not.

That's why I introduced H.R. 3331, the Quality Care for Nursing Home Patients Act of

2001, and am working with many of my colleagues and the Alliance on safe staffing standards. H.R. 3331 would set minimum staffing ratios and make sure that reimbursement levels are adequate to meet those standards. Given the need and the overwhelming evidence, one might have thought that the "compassionate conservatives" in the Bush White House would support it.

Instead, the Administration says that "it is not currently feasible" to set nursing home standards and, instead, it will rely on "market demand" to push for higher quality. Why is it not feasible?

First, the Bush Administration argues that there just aren't enough nurses and certified nurse aides to meet demand. They argue that about 1 in 5 nursing home positions are vacant, which may not be surprising when you think about it.

Working in a nursing home is dangerous. They have the highest rates of workplace injuries - 13 per 100 compared to 3 per 100 in the construction industry.

Working in a nursing home is hard - nurses and nurses aides are expected to deal with seriously ill patients without adequate staff. Nurses and CNAs frequently complain that they cannot tend to resident's medical needs, let alone give them personalized attention.

Working in a nursing home usually doesn't come with benefits.

Working in a nursing home usually doesn't pay well. The average CNA makes about \$19,100 a year. So, why not work at in a retail store?

The reality is that we could attract health care workers if we paid them - which leads to the Bush Administration's real complaint - quality standards cost too much. The HHS study says that meeting minimum quality standards would cost \$7 billion a year, an 8% increase in nursing home costs. And, although the Administration found \$2 trillion for tax cuts and even \$254 million in retroactive tax payments for Enron, it will not find the money to keep senior citizens from being injured or killed by paying adequate salaries to nursing home workers. Tax breaks for millionaires is simply a higher priority for them than keeping nursing home residents from bed sores, broken bones, deadly injuries, and neglect.

We cannot let them get away with pushing senior citizens to the back of the line, once again, while the wealthy get ushered to the front.

Senior citizens shouldn't have to wait any longer for a comprehensive benefit that doesn't leave them with thousands of dollars a year in drug bills. But they also shouldn't have to wait for the Bush Administration to agree to the recommendations of its own study - implementing safe staffing ratios that will prevent injuries and save lives.

The outcome of the debates on the future of Medicare and Social Security are critical. We must fight to protect their universal, social insurance nature and avoid privatization. But there is a second debate that is just as important - whether we will spend what is needed to keep senior citizens safe and healthy.

We must win both debates in order to be successful - to add comprehensive, affordable and quality long-term care services to Medicare, with a wide variety of home, community-based, and nursing home care available to every and any senior who needs it.