Mr. David J. Rosen  
Legislative Budget and Finance Officer  
Office of Legislative Services  
State House Annex  
PO Box 068  
Trenton, NJ 08625-0068

Dear Mr. Rosen:

Enclosed please find written responses to questions raised by Assembly Budget Committee members, Chair Louis Greenwald and Vice Chair Gary Schaer during the Department of Military and Veterans’ Affairs budget presentation on April 28, 2011.

If I may be able to assist the Committee with any further concerns, please do not hesitate to contact my office at (609) 530-6953. Again, I thank you for the opportunity to participate in the FY2012 Budget Hearings, and I look forward to future correspondence.

Sincerely,

GLENN K. RIETH  
Major General, NJARNG  
The Adjutant General

Enclosures
Assembly Budget Committee Follow up Question – Assemblyman Greenwald

- With regard to budget language that provides for the Department of Military and Veterans’ Affairs to receive forty percent of the excess receipts from prior years’ revenues from the U.S. Department of Veterans Affairs per diems and resident contributions by means of a recurring supplemental appropriation, please describe the proposed FY 2012 budget language change and explain its purpose.

The referenced language as it currently appears in the FY 2011 Appropriations Handbook (page B-153) reads,

Forty percent of the receipts in excess of the amount anticipated derived from resident contributions and federal reimbursements at the end of the preceding fiscal year are appropriated for veterans’ program initiatives, subject to the approval of the Director of the Division of Budget and Accounting of an itemized plan for the expenditure of these amounts, as shall be submitted by the Adjutant General.

The proposed change in the Governor’s FY 2012 recommended budget (page D-277) reads,

Forty percent of the receipts in excess of the amount anticipated derived from resident contributions and the U.S. Department of Veterans Affairs at the end of the preceding fiscal year are appropriated for veterans’ program initiatives, subject to the approval of the Director of the Division of Budget and Accounting of an itemized plan for the expenditure of these amounts, as shall be submitted by the Adjutant General.

The noted change was recommended to clarify the excess receipts language and does not adversely impact the operations of the homes.
Assembly Budget Committee follow up Question – Assemblyman Schaer

- According to the federal Department of Health and Human Services, Center for Medicare/Medicaid Services federal assessment of nursing home performance, the Menlo Park and Vineland Veteran memorial homes were found to have various health inspection deficiencies between December 2009 and February 2011. Inspectors determined that the Menlo Park Veteran’ Memorial Home needed improvement in the areas of quality of care, resident rights, nutrition and diet, and environmental factors. For the Vineland Veterans’ Memorial Home, the health inspectors noted that improvements were needed in the areas of quality of care and environmental factors. Please describe how the deficiencies in the report were corrected and how the Department is continuing to monitor the nursing homes to maintain its high ratings. The report is attached for your reference.

While it is true that the Menlo Park and Vineland Veterans Memorial Homes (VMHs) received a Two-Star rating on the last published Centers for Medicare and Medicaid (CMS) Report, the Report must be addressed in detail.

The CMS Five-Star Rating System is basically a “look back” rating. It reviews and rates surveys (inspections) from the three previous years. This is a rolling system, so that each year a new report is published, the last oldest reporting year drops off. This 2010 report is actually reporting on the years 2007, 2008, and 2009.

Vineland’s deficiencies in those years were: 2007 (13 deficiencies), 2008 (9 deficiencies), and 2009 (6 deficiencies). The Vineland team has gotten progressively better; in fact, Vineland had only 5 deficiencies in their 2010 and 2011 surveys. In the next report, the 2007 survey will be removed and Vineland’s overall rating should improve. While Menlo Park’s deficiencies have been a bit more inconsistent, they too have had deficiency levels under the national average in two of the three years, between 2007 and 2009.

All deficiencies noted in a survey or complaint must be addressed to CMS through the New Jersey Department of Health and Senior Services (NJDHSS) in a detailed Plan of Correction. This plan must be accepted by the NJDHSS in order for a Veterans Memorial Home to maintain its license. Every Plan of Correction from the Menlo Park and Vineland VMHs have been approved.

This report indicates Vineland has received 7 deficiencies in 2009 and 2010. The average for the United States is 8. The deficiencies themselves were all rated as a 2; that is minimal harm or potential for harm. A closer reading of those deficiencies finds one for mail delivery and one for writing facility policies. While these are important, they do not directly impact on the health of the residents.

The Menlo Park VMH received 9 deficiencies in 2009 and 2010, with the national average being 8. Two of the deficiencies were for the identical area. Like Vineland, the deficiencies themselves were all rated 2; minimal harm, except one which was rated 3. This was later reduced to a 2; the identical infraction mentioned above.
In other areas of the same report, the Vineland VMH received Five-Stars in staffing, and while the home received Three-Stars in Quality Measures, some of the subcategories were outstanding. For example, 98% of the Vineland residents received both a flu and pneumonia vaccination, well above state and local averages. Similarly, the bed sore rate for Vineland was at 1%; again well below the state and national averages.

Menlo Park also received a Five-Star Rating for staffing and a Four-Star Rating in its Quality Measurements during the report period.

During this 2007-2009 time period, the Vineland VMH hired a new “slate” of nursing administrators, including a new Director of Nursing Services, a new Nurse Educator, and a new Quality Improvement Nurse. This strong nursing leadership team has significantly improved the nursing “culture,” instituted “best practices,” and fostered growth in areas of clinical practice and nursing expertise.

Similarly, during this period, the Menlo Park VMH also hired a new Director of Nursing Services, a new Assistant Director of Nursing Services, and a new Nurse Educator. This team has also been instrumental in fostering “best practices” and enhancing nursing expertise.

CMS is planning to “freeze” the quality measure data and the Five-Star quality ratings that are currently on the site for a period of six months while it collects data from a new measurement system called MDS 3.0. Therefore, an updated Star Ratings for Menlo Park and Vineland will not be released until October 2011.

Finally, it must be noted that the Vineland VMH is very aggressive in maintaining a high quality of care for their residents that go far above the norm. Two examples of this are: (1) the Vineland VMH is in the planning stage of getting a theater built in house for the residents, and (2) The home is now an active participant in the Second Wind Dreams Program, and has been featured three times on Channel 6 (WPIX) News in the last six months.

The Menlo Park VMH too has an aggressive resident social activity plan which this year saw an extensive Black History Month Program that included visits from the Tuskegee Airmen and the Duke Ellington Legacy Band. Menlo Park is beginning its involvement with the Second Wind Dreams Program.

I am confident that our Veteran Memorial Homes offer the very highest quality care for all our residents. The Department extends an invitation to all our legislators to visit any of our facilities to speak to the residents and staff and see firsthand the level of care that is provided to our veterans.