Senator Mel Martinez (R-FL) Aging Committee Hearing Wednesday, March 4, 2009

Thank you Chairman Kohl, and thank you for calling today's hearing. Focusing on what we here at the federal level can do to enhance and improve long-term care is a timely subject. The issue of sustainable quality long-term care in America is an important issue to most states. For states like Florida, it is vital.

Looking at the demographics, you will see the percentage of Floridians over the age of 65 is nearly <u>40 percent higher</u> than the national average. The number of Floridians age 85 and older – those most likely to need more acute long-term care services – is nearly <u>two times</u> the national average. With the annual growth of Florida's low-income elderly population at <u>eight times</u> the national average, more focus has to be put on long term care issues and ensuring that the elderly and disabled will be able to age with dignity and peace of mind.

I believe Florida is a microcosm of what America will look like in the coming decades. So I look forward to working with President Obama and my colleagues in the Senate to address these issues in a bipartisan way. While reform is desperately needed, we also need to change the way "reform" has been talked about in the past. The discussions of Medicaid reform both here in Washington and in state capitals tends to involve only four options: cut eligibility, cut reimbursement rates, cut benefits, or ask Congress for more assistance.

Rather than remaining focused on these limited choices, I think we should begin our discussion with a focus on what is best for patients. We must look for ways to improve the consistency and coordination of care to best assist this vulnerable population.

Ultimately, our goal should be to improve the health of low-income Americans and ensure that those in need of services have access.

An improved Medicaid long term care program will be able to serve more people with better results. We should be giving state officials a range of options to pursue that will improve the delivery of care, including support for innovations which prevent people in need of long-term care from spending all their savings and then having no other option but to go onto Medicaid to access care.

I know that my state of Florida has been working on these issues and remains focused on finding new ideas to guarantee success. Florida has chosen to invest in initiatives focused on ensuring our elderly and disabled will be able to age with dignity.

We must work to transform the health care infrastructure so it is focused on the quality of life, and on a person's needs rather than those of state or federal accountants. We ought to build on the innovation occurring in some states and ensure patients are in control of how and where they receive services.

Florida, like many states, has experimented with consumer driven and nursing home diversion models of care delivery with positive results – and has saved money while flattening the growth curve for nursing home bed days. Florida was one of the original "Cash and Counseling" demonstration states and now has more than **one thousand** consumers managing home-based services to meet their long term care needs. By focusing on what is best for each patient and providing flexibility, we can create a model that works for our aging population and states across the nation.

Thank you and I look forward to hearing the testimony of everyone before this committee.

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I would like to thank Secretary Holly Benson for being here today. Secretary Benson has served as Florida Governor Charlie Crist's Agency for Health Care Secretary since February 2008. She is also the former Secretary of the Florida Department of Business and Professional Regulation. Before serving in the Governor's cabinet, she practiced municipal bond law in her hometown of Naples. She received her undergraduate degree from Dartmouth University and her law degree from the University of Florida.