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Human Resources Division

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The Honorable Edward Roybal
Chairman, Subcommittee on Health
and Long-Term Care
Select Committee on Aging
House of Representatives

The Honorable Ron Wyden
House of Representatives

During GAO's testimony at the Subcommittee hearing on the use of medications in board and care homes for the elderly, on March 13, 1992, you requested additional information.¹ You asked us to determine how many individuals within the Department of Health and Human Services (HHS) are involved in issues related to board and care homes for the elderly. To provide this information, we interviewed HHS officials and reviewed selected data developed in preparation for GAO's recent testimony. We did this work during a 2-week period in March, 1992.

Background

The Office of the Assistant Secretary for Planning and Evaluation (ASPE) leads HHS involvement in issues related to board and care homes for the elderly. However, at least eight other units within HHS have direct or indirect involvement with these issues. Enclosure I lists those units and their responsibilities.

Task forces within HHS also address topics that indirectly affect board and care home issues. An example of

¹Board and Care Homes: Medication Mishandling Places Elderly at Risk (GAO/T-HRD-92-16, March 13, 1992.)

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such a task force is the Secretary's Task Force on Elder Abuse. That task force included representatives from seven units. Its report addressed abuse and neglect of the elderly in many settings, including board and care homes.²

Few Staff Address Issues

HHS devotes few staff to board and care issues. An official in ASPE confirmed that no positions in HHS are dedicated full-time to board and care issues. We identified four staff members in HHS who worked directly on board and care issues within the last year. One is overseeing a study on the effects of regulation on the quality of care provided in homes while another oversaw a study on the use of census data to identify unlicensed homes. The third is drafting implementing regulations for the community care provisions of the 1990 Omnibus Budget Reconciliation Act and the fourth administers State compliance with the Keys Amendment.³ Our findings are consistent with those reported by the HHS Office of the Inspector General in its March 1990 report on board and care.⁴ That report characterized HHS' role in these issues as limited.

The amount of time these staff spend on board and care issues may be small. For example, the staff person who administers the Keys Amendment told us that her board and care-related responsibilities are ongoing but may consume less than 15 percent of her time.

Staff in other units have some indirect involvement with issues related to board and care homes for the elderly. For example, the Administration on Aging, the National Institute of Mental Health, and the Administration on Developmental Disabilities each provide grants to states to operate an Ombudsman or a protection and advocacy program for their respective client groups, some of whom may reside in board

²Department of Health and Human Services, Report from The Secretary's Task Force on Elder Abuse (internal report, Feb. 1992.)

³In 1976, the Congress enacted the Keys Amendment to the Social Security Act, which required states to certify, to HHS, that all facilities in which a significant number of Supplemental Security Income (SSI) recipients resided or were likely to reside met appropriate standards.

⁴Richard P. Kusserow, Board and Care (U.S. Department of Health and Human Services, Office of Inspector General. OEI-02-89-01860, March 1990.)

and care homes. We cannot estimate the staff time spent on these indirect activities, based on our limited work.

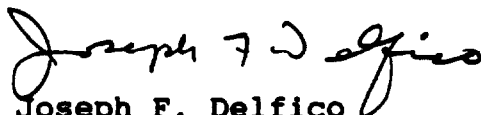
Responsibility Is Fragmented
and Units Operate Independently

Although at least nine units have direct or indirect involvement with board and care issues, there has been little coordination between the units. To address this problem, HHS is establishing a task force to include representatives from ASPE, the Social Security Administration, the Health Care Financing Administration, the National Institute of Mental Health, the Administration on Developmental Disabilities, the National Institute on Aging, and the Office of the Assistant Secretary for Health. However, an official with ASPE--the unit that chairs the task force--told us that representatives from these units have not yet been named and ASPE could not provide a timetable for implementing the task force.

The HHS Office of Inspector General recommended the formation of such a task force in its March 1990 report after finding that there was limited contact between units regarding board and care issues. It reported that each unit functions independently and has little awareness of relevant activities occurring elsewhere in the Department.

If you have any questions concerning his information, please call me at (202) 512-7215.

Sincerely yours,



Joseph F. Delfico
Director, Income Security Issues

Enclosure

**HHS Units Involved in Issues Related to
Board and Care Homes for the Elderly**

Unit	Area of Responsibility
Office of the Assistant Secretary for Planning and Evaluations (ASPE)	<ul style="list-style-type: none"> - Oversees ongoing study on the effects of regulation on quality of care. - Oversaw study on the use of census data to identify unlicensed homes. - Scheduled to chair board and care task force.
Administration for Children and Families (ACF)	<ul style="list-style-type: none"> - Administers the Keys Amendment. - Provides information on a model act for regulating board and care homes.
Health Care Financing Administration (HCFA)	<ul style="list-style-type: none"> - Writing regulations to implement the 1990 Omnibus Budget Reconciliation Act. - Issues Medicaid program waivers if states certify compliance with Keys Amendment. - Scheduled to be member of board and care task force.
Social Security Administration (SSA)	<ul style="list-style-type: none"> - Receives states' reports on Keys violations. - Provides states with information on unlicensed homes, when requested. - Administers the representative payee system for SSI recipients. - Scheduled to be member of board and care task force.
Administration on Aging (AoA)	<ul style="list-style-type: none"> - Oversees grants for Ombudsman Program.
National Institute of Mental Health (NIMH)	<ul style="list-style-type: none"> - Oversees advocacy and protection programs. - Scheduled to be member of board and care task force.
Administration on Developmental Disabilities (ADD)	<ul style="list-style-type: none"> - Oversees advocacy and protection programs. - Scheduled to be member of board and care task force.

ENCLOSURE I

**Office of the
Assistant Secretary
for Health (OASH)**

**National Institute on
Aging (NIA)**

- ENCLOSURE I**
- Cosponsored study on the use of census data to identify unlicensed homes.
 - Scheduled to be member of board and care task force.

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