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**Rep. Chris Shays Praised by National Frontline Caregiver Coalition for Fighting Medicare Cuts**

*Connecticut Congressman Co-Authors Bipartisan Letter to House Leadership Urging Protection of Quality Nursing Home Care, Key Caregiver Jobs*

**Joplin, MO (April 9, 2008)** – A senior leader of the Coalition to Protect Senior Care, a national front line caregiver coalition, today praised U.S. Rep. Chris Shays (R-CT) for helping lead an effort in Congress to protect quality nursing home care, and said a bipartisan letter he co-authored has been instrumental in helping caregivers argue their case on Capitol Hill against possible cuts to Medicare-financed nursing home care.

“On behalf of the nation’s most vulnerable seniors and our front line caregivers who proudly serve them, we extend our gratitude to Congressman Shays for taking a key leadership role urging the U.S. House leadership to reject cuts to the Medicare-financed nursing home funding that plays a critical role in the provision of high quality care,” stated Lisa Cantrell, a co-founder of the National Association of Health Care Assistants (NAHCA), and a national spokesperson for the Coalition to Protect Senior Care. “We encourage other representatives to lend their name and support to such a critical issue.”

“Congressman Shays’ bipartisan sign-on articulates very clearly how many of his own Minnesota constituents are severely threatened as the budget process continues to unfold in Washington, she continued. “We thank him for his leadership on this vital health policy matter.”

An excerpt from the letter by Rep. Shays and U.S. Rep. Tim Walz (D-MN), being circulated on Capitol Hill, is as follows:

*“In recent months, the Administration sent to Congress proposals to enact deep cuts in Medicare spending for skilled nursing care. One proposal would eliminate Medicare’s annual inflation adjustment for SNFs, cutting nearly \$1 billion in 2009 alone. In addition, the Administration is proposing regulations that would cut another \$4.7 billion in Medicare funding for skilled nursing home care by 2013. Combined, these proposals would cut Medicare skilled nursing care by nearly \$19 per patient per day next year.*

*“We are deeply concerned about the impact that cuts of this magnitude would have on America’s most vulnerable seniors and the workers who care for them. At a time when Congress is working to stimulate economic activity and jobs growth, these Medicare cuts would jeopardize direct care jobs – 86% of which are held by women whose salaries are modest and whose families depend on receiving annual cost of living increases. We feel strongly that that these dedicated direct care workers are a key reason we have seen meaningful quality improvement in skilled nursing care in recent years.*

*“Nursing homes already operate on razor thin margins, the lowest of any health care provider group. Without stable Medicare payments, many SNFs will lack the resources they need to continue to invest in the building facilities and health information technology necessary to providing the highest quality of care.”*

Cantrell noted that in providing around the clock care and services to patients, nursing homes rely upon the annual Medicare cost of living update -- now possibly targeted for elimination -- to meet rising costs. 70 percent of these costs are related to staffing. This crucial Medicare update, which the Coalition is lobbying to protect, allows for annual cost of living increases for staff, increases a facility’s ability to enhance staffing, and provides the vital resources needed to improve and refurbish facilities with modern equipment and technology.

The Coalition to Protect Senior Care consists of the American Association for Long Term Care Nursing (AALTCN); the American College of Health Care Administrators (ACHCA); the American Association of Nurse Assessment Coordinators (AANAC); the National Rural Health Association (NRHA); the American Association of Nurse Executives (AANEX); the American Occupational Therapy Association (AOTA); the American Physical Therapy Association (APTA); the American Society of Health Care Administration Executives (ASHCAE); ASHCAE state affiliate members representing Arizona, Arkansas, Colorado, Idaho, Iowa, Kansas, Maine, New Hampshire, New Mexico, New York, North Dakota, Oregon, Texas and Utah; the American Health Care Association (AHCA); the American Health Quality Association (AHQA); the National Association for the Support of Long Term Care (NASL); the National Association of Health Care Assistants (NAHCA); the Alliance for Quality Nursing Home Care; the Coalition of Women in Long Term Care (COWL); and the Senior Clinician Group. For more information, visit [www.coalitiontoprotectseniorcare.org](http://www.coalitiontoprotectseniorcare.org).

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