December 18, 2009

Dear Senators:

The American Bar Association commends Senator Kohl for introducing an amendment (S.AMDT.3069) to the Senate health care reform bill H.R. 3590 to add the provisions of the “Elder Abuse Victims Act of 2009” (S. 1821) to the health care reform bill. This provision fills in a vital missing component of the Elder Justice Act provisions currently in the Senate’s health reform bill and supported by the ABA.

The “Elder Justice Act” provisions currently in the Senate bill will create a needed infrastructure and provide essential resources necessary to develop and implement a nationally coordinated strategy in collaboration with the states to combat the nationwide problem of elder abuse. It establishes a multi-pronged, coordinated strategy to address elder abuse, neglect, and exploitation at the federal, state, and local levels. But without the Elder Abuse Victims Act provisions, it lacks an effective armament of Department of Justice initiatives at the state and local level, including research, victim advocacy grants, and training and support for prosecutors,
Like child abuse and domestic violence, elder abuse is a major public health issue that is rightfully addressed within the context of health reform. It is estimated that one in nine older persons in America are abused, neglected or exploited in their homes and in long-term care facilities. Research clearly demonstrates that elder abuse hastens death. There can be no doubt that physical abuse and neglect lead to health care expenditures, particularly for emergency care. A recent study indicated that older persons lose $2.6 billion to financial exploitation annually. Devastating financial losses may leave elders with insufficient funds to pay caregivers or obtain preventative care, possibly leading to increased health care costs for long-term care or acute care. However, despite the extent and expense of elder abuse, only $154 million is devoted to this problem compared to more than $7 billion dedicated to child abuse and domestic violence.

Strengthening the response of the criminal and civil justice systems to elder abuse can lessen health care expenditures by sending a message that elder abuse will not be condoned or ignored and promoting prevention, enhancing earlier detection, and holding perpetrators accountable and requiring restitution. Through complementary initiatives at the Department of Justice and the Department of Health and Human Services to support services for victims, research, victim advocacy grants, and training and support for prosecutors, courts, and front line responders who handle elder abuse cases, the EAVA and the Elder Justice Act will establish a long-overdue and much needed, multi-pronged, coordinated strategy to address elder abuse, neglect, and exploitation at the federal, state, and local levels.

We urge the Senate to adopt Senator Kohl’s amendment and pass a final health reform bill with the Elder Justice Act and Elder Abuse Victims Act fully incorporated. The serious problems faced daily by elder abuse victims and their concomitant health care costs cannot be prevented or stopped unless the justice system is given the resources it needs to effectively address those problems.

Thank you for your consideration of this letter. If you would like to discuss the ABA’s views on this issue in greater detail, please feel free to contact me at (202) 662-1765 or Lillian Gaskin, Senior Legislative Counsel, at (202) 662-1768.

Sincerely,

Thomas M. Susman
Director