Highlights

• Increases across aging and disability programs
• Recognizes continued impact of COVID – and the critical impact of the aging and disability networks and our programs throughout the pandemic
• Invests in cross-network collaboration
• Reflects ACL’s increasing responsibilities and leadership role across HHS/government on aging and disability issues
ACL Budget Priorities

Four “buckets:”
- Establishing a “new normal”
- Fostering innovation and collaboration
- Protecting rights and preventing abuse
- Establishing adequate infrastructure

Cross-cutting priorities:
- Direct services
- Expanding HCBS
- Supporting caregivers
- Advancing equity
ACL Budget Request

$3.014B
Increase of $752 million

Includes requests for:
• Budget Authority: $2.986B
• Prevention & Public Health Funds: $27.7M
• Public Health Services Evaluation funds: $27.5M
Establishing a “New Normal” +$630m

Begins to address increased needs created by:

• Population growth
• Long-term effects of COVID-19
• Years of relatively flat funding
OAA Nutrition and Home and Community-Based Supportive Services (+$429.5m)

- $320.5 – Senior Nutrition Programs
  - $246.7m – Congregate Nutrition
  - $133.9m – Home-Delivered Nutrition
  - -$60.1m – Nutrition Services Incentive Program
- $107.4m – HCBSS
- $1.5m – Preventive Health Services
Establishing a “New Normal” (cont.)

Native American Services (+$40m)

• +$35m – Native American Nutrition and Supportive Services

• +$5m – Native American Caregiver Support Services
Establishing a “New Normal” (cont.)

Caregiver Support Services (+$70.7m)

• +$61m – Family Caregiver Support Services

• +$2.6m – Alzheimer’s Disease Program

• +$7.1m – Lifespan Respite Care
Innovation and Collaboration (+$31.7m)

• Increased funding for services is not enough
• Sustainability requires:
  – Innovation
  – Coordination of efforts across programs
  – Partnerships between networks
Innovation and Collaboration (cont.)

• +$6.5m – Aging Network Support Activities

• +$3.1m – State Health Insurance Assistance Program (SHIP)

• +$4.1m – ADRCs
Protecting Rights & Preventing Abuse (+$77.8m)

• Recognizes that equity and cannot be achieved in the face of abuse

• Includes first-ever base funding for APS formula grants

• Continues investment in expanding LTCO outreach to assisted living facilities
Protecting Rights & Preventing Abuse (cont.)

• +$59m – Elder Justice/APS Formula Grants/Opioids

• +$18m – National Long-Term Care Ombudsman Program

• +$0.3m – Prevention of Elder Abuse and Neglect

• +$0.5m – Elder Rights Support Activities
Requests for Authorities

• Make Tribes eligible for Elder Justice APS funding

• Allow innovation grants in Home and Community Based Supportive Services (like Nutrition)

• Program evaluation:
  – Increase allowance for evaluation of aging services programs from .5% to 1%
The Budget Process

• President submits budget to Congress (3/28/22)
• The House and Senate pass budget resolutions that establish totals for discretionary spending
• House and Senate pass appropriations bills
• President signs final appropriations bill

The President’s budget is the first step!
US Aging | Aging Policy Briefing & Capitol Hill Day
WASHINGTON, DC
March 29–30, 2022
Tweet from the #USAnagingAPB!
@theUSAnaging
AFFORDABLE SENIOR HOUSING

Linda Couch, LeadingAge, lcouch@leadingage.org
2.241 million older adult households with “Worst Case Housing Needs”

Up 68% since 2009
### Number of Sheltered Homeless People

<table>
<thead>
<tr>
<th>Age</th>
<th>2007</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>51–61</td>
<td>216,000</td>
<td>249,000</td>
</tr>
<tr>
<td>62+</td>
<td>46,000</td>
<td>76,500</td>
</tr>
</tbody>
</table>

### Share of Sheltered Homeless Population 62+

<table>
<thead>
<tr>
<th>Age</th>
<th>2007</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>62+</td>
<td>16.5%</td>
<td>23%</td>
</tr>
</tbody>
</table>
REASONS FOR HOUSING SHORTAGE

- More older adults – no surprise!
- More poorer older adults
- Fewer subsidized and unsubsidized affordable homes
- Higher and higher rents
More older adults

more of them renters

more of them likely to be non-white
<table>
<thead>
<tr>
<th>HUD Programs</th>
<th>Other Federal Programs:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PHAs:</strong> public housing &amp; vouchers</td>
<td>Low Income Housing</td>
</tr>
<tr>
<td><em>Private Owners:</em> Section 202</td>
<td>Tax Credits</td>
</tr>
<tr>
<td>Elderly, Project-based</td>
<td>USDA Rural Housing</td>
</tr>
<tr>
<td>Section 8, Section 811</td>
<td>Service Section 515</td>
</tr>
</tbody>
</table>

https://resources.hud.gov/
FEDERAL HOUSING PROGRAMS

- No entitlement
- Waiting lists
- Eligibility
- Tenant rents
- Some programs, most likely in the Section 202 program, connect residents to services and supports
- Partnerships
- COVID-19
Did You Know?

Only 1 in 3 Eligible Seniors Receive Housing Assistance
ON THE HILL

- Weave the importance of affordable, accessible senior housing into your stories.
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Tweet from the #USAGingAPB!
@theUSAging
Medicare Updates

Policy Potpourri Panel
USAGing – Aging Policy Briefing
March 30, 2022

David Lipschutz, Center for Medicare Advocacy
The Center for Medicare Advocacy is a national, non-profit law organization founded in 1986 that works to advance access to comprehensive Medicare and quality health care. Based in Washington, DC and CT, with additional attorneys in CA, MA, NJ.

- Staffed by attorneys, advocates, communication and technical experts
- Education, legal analysis, writing, assistance, and advocacy
- Systemic change – Policy and Litigation
  - Based on our experience with the problems of real people
- Medicare coverage and appeals expertise
- Medicare/Medicaid Third Party Liability Projects
OUTLINE

I. Good News
   • BENES Act – effective 2023
   • Biden Admin Nursing Home Reform Proposals

II. Direct Contracting Demos
   • What are they?
   • Accountable Care Organizations (ACOs)

III. Medicare Advantage
   • Growing Imbalance with Traditional Medicare
   • MA and Medicare’s finances
I. GOOD NEWS
PART A & B ENROLLMENT CHANGES EFFECTIVE IN 2023

- Consolidated Appropriations Act (H.R. 133), signed into law December 2020 – included:
- BENES Act Provisions
  - For Part A and B enrollments during General Enrollment Period (GEP) or in the later months of their Initial Enrollment Period (IEP), coverage will begin the month after enrollment
  - Expand Medicare’s authority to grant Part A and B Special Enrollment Periods for “exceptional circumstances”
NURSING HOME REFORM

“Protecting Seniors and People with Disabilities by Improving Safety and Quality of Care in the Nation’s Nursing Homes” – proposals include:

- a one-year study regarding nursing home staffing, followed by proposed rules to implement study’s recommendations for staffing ratios;
- calls for additional funding for inspections;
- better oversight of poorest performing facility;
- expanded financial penalties and other sanctions;
- increased accountability of chains;
- increased transparency of ownership information, finances of owners, examining role of private equity; and
- creating pathways for good-paying jobs with free and fair choice to form a union.
II. DIRECT CONTRACTING DEMONSTRATIONS & ACOs
DIRECT CONTRACTING

- ACA created Accountable Care Organizations (ACOs)
- Medicare demonstration programs administered by Centers for Medicare & Medicaid Innovation (CMMI)
  - Direct Contracting (DC) demos
    - Geographic (Geo) model canceled
    - Global and Professional (GloPro) through 2022, changing to REACH ACOs starting in 2023
III. MEDICARE ADVANTAGE
Policymakers have generally supported policies that further this imbalance, including re:

- Payment
  - Significant Overpayments to MA plans – MedPAC – “excess Medicare spending of almost $15 billion in 2022 alone”
- Coverage of Items/Services
  - Supplemental benefits, including those addressing SDOH
  - BBB would have helped
- Ease of Enrollment
  - Compare, e.g., to Medigaps
  - MA steering (but improvement over past year)
MA & MEDICARE FINANCES

- Medicare Part A Trust Fund – projected insolvency in 2026
  - MedPAC: “under current policies, as MA enrollment continues to grow, doing so will further worsen Medicare’s fiscal sustainability”
- What will happen if/when Congress and/or Administration try to address these imbalances?
For further information, to receive the Center’s free weekly electronic newsletter, *CMA Alert*, update emails and webinar announcements, contact:

Communications@MedicareAdvocacy.org
Or visit
MedicareAdvocacy.org

Follow us on Facebook and Twitter!
Elder Justice Act renewal: So close but still so far away

USAGing Policy Conference

Bob Blancato, National Coordinator of Elder Justice Coalition
March 30, 2022
bob@elderjusticecoalition.com
• Thank you, Amy and Monica for the introduction and invitation
• A sincere thanks to all of you: staffs and volunteers for the outstanding work you have done all through the pandemic. Its heroic, selfless, and inspiring.
• I appreciate you including elder justice on your agenda and deeply appreciate USAging’S active and constructive role on our Elder Justice Coalition
• We are in one of the most exciting and exasperating periods in history of elder justice
• In 2020, according to the FTC and the Senate Special Committee on Aging, older adults lost at least $602 million to fraud, scams and financial exploitation schemes
• The top five scams reported to the Senate Aging fraud hotline in 2020 were government impersonation scams, sweepstakes scams, illegal robocalls/unsolicited phone calls, computer scams and grandparent scams
• According to the FBI Internet Crime Complaint Center people over age 60 made up the majority of US cybercrime victims in 2019 (105,000) and accounted for the most losses ($967 million) – an average of nearly $10,000 per victim
Excitement part began back in December 2020 in the third of four emergency covid relief bills. Congress provided $100 million in funding for the EJA (with 95+% going to APS)

Motivated in part by a rash of pandemic scams victimizing older adults

Followed by the American Rescue Plan in March 2021 with another $276 million in funding for EJA. This included $188 million deemed for FY 22 with at least $100 million for APS and other funds to LTCOP

Just Consider the funding levels of 2010-late 2020 where total EJA funding was just over $50 million

In less than 4 months, EJA gained $376 million
WE COMMEND ACL AND STATES ON THEIR QUICK ACTION

• ACL worked to disburse the money as quickly as possible and provided clear guidelines
• All states applied for initial funding
• Short term uses included increased staffing and more technology
• Also required long range planning to help maintain funding
THE STATE RESULTS SO FAR ARE PROMISING

• One state is reviewing existing abuse statutes, conducting an Equity Analysis and developing an Equity Plan
• Another state is enhancing the availability of elder shelters/other emergency short-term housing and the provision of accompanying wrap-around services for APS clients
• Another is increasing oversight of county APS providers, increasing quality assurance practices, and disbursing funds for investments in technology
• Another is expanding their pilot program for MSW students
• Multiple states are establishing public awareness campaigns
EXCITEMENT WHEN HOUSE PASSED BBB

Last November House passed Build Back Better (BBB)

Included was a $4.1 billion Elder Justice Reauthorization and Modernization bill led by Chairman Neal

Included $1.7 billion for long term care facility staffing incentives

$1.5 billion for APS, $183 million long term care ombudsman; $530 million for medical legal partnerships and legal hotlines and $265 million for programs to combat social isolation—new grants for are agencies and CBO’s
• Process on BBB stopped cold in tracks when Senator Manchin announced his opposition to the existing plan
• You know why his vote is critical
• Last week he announced resumed discussions/negotiations on what will be in “Build Back Smaller”
• Rough outline does not seem to include elder justice as passed by House
EXASPERATION: FY 23 FUNDING

The $276 million provided to elder justice for FY 22 has no guarantee of being continued without our aggressive advocacy.

We are in communication with both House and Senate urging at least maintaining this funding level for FY 23.

We include in our advocacy how well the funds have been spent and

We include the reality that a downstream issue following the winding down of pandemic—more reports of elder abuse which need to be investigated

And more funding needed to address staffing in nursing homes

President’s budget released on Monday was disappointing in that it limits the funding increase for APS to under $60 million about 1/3 of what was provided in FY22. We do applaud the doubling of funding for LTCOP
Build Back Better:
maintain contact with Senate Finance Committee to urge them to hold fast on elder justice. Chairman Wyden introduced the same bill as House passed

Committees:
Look for ways to pass elder justice in committee which they are looking at

West Virginia:
Continue to apply pressure on impact of elder abuse in one of the oldest states in the nation.
(I would love to caucus with anyone here this morning from WVA)

House:
Work with House to include EJRMA in whatever final BBB might emerge
Overall Funding Goal:
Avoid elder justice funding hitting and falling over the cliff.

Continued Funding:
Funds provided in FY 22 should not be one and done funding

Support Infrastructure:
Increased funding is helping build long overdue elder justice infrastructure.

Address Critical Shortages:
Funding addresses critical shortages in APS and nursing home staffing which are key to elder abuse prevention.

Partners:
We need USAging and know you are supportive

Your Help:
You know your older adults and work to provide services but by working with us on elder justice you are helping provide a safe environment to receive your services
• Just as there is no good policy without politics
• There is certainly no good and meaningful policies for older adults without all us advocating for it
• With elder justice it is about being a voice for those who need one
• We know a victim of elder abuse is never the same
• Imagine if our advocacy prevented even one case of elder abuse in your community
• Need more motivation than that?
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SAVE THE DATE!

April 25–26, 2023

www.usaging.org/apb