April 22, 2022

The Honorable Patty Murray, Chair
The Honorable Roy Blunt, Ranking Member
Senate Appropriations Subcommittee on Labor/HHS/Education
Washington, DC  20510

The Honorable Rosa DeLauro, Chair
The Honorable Tom Cole, Ranking Member
House Appropriations Subcommittee on Labor/HHS/Education
Washington, DC  20515

Dear Chairwoman Murray, Ranking Member Blunt, Chairwoman DeLauro and Ranking Member Cole:

As your Subcommittees consider the FY 2023 Labor/HHS/Education appropriations in the coming months, USAGing (formerly the National Association of Area Agencies on Aging), which represents the country’s 617 Area Agencies on Aging (AAAs) and advocates for the more than 270 Title VI Native American Aging Programs, urges you to prioritize Older Americans Act (OAA) and other aging programs which provide a range of critical services that help older adults age successfully at home and in their communities.

The nationwide Aging Network in which AAAs play a local leadership role is a critical policy partner in maximizing the health, safety and independence of older adults so they can live at home and in the community as they age—whether through discretionary programs such as Older Americans Act or mandatory programs such as Medicaid home and community-based services.

The range of AAA-provided supportive services for older Americans and their caregivers include, but are not limited to, information and assistance, in-home supportive services, congregate and home-delivered meals, transportation, evidence-based health and wellness programs, and caregiver support. The provision of these services oftentimes makes the difference between a person’s ability to age at home or being forced to move to an institutional setting.

This wealth of person and family-centered knowledge and community practice that the AAAs and Title VI programs have has proven critical during the pandemic.
AAAs, Title VI programs and other vital Aging Network partners have been selflessly serving on the front lines of the public health emergency and responding to the needs of older adults who face significantly increased risks. AAAs have also been—and will continue to be—vital partners in the rollout and adoption of vaccination strategies. The outreach, education, coordination and wrap-around supportive services that AAAs and their partners provide have been essential to implementing successful federal and state-level campaigns to get life-saving vaccines into the arms of the highest-risk and often hardest-to-reach older adults.

Throughout the COVID-19 crisis, the Aging Network has served more older adults than ever before with life-saving assistance thanks to federal emergency relief funds. High levels of need experienced by older adults have not faded away, however, and AAAs continue to serve dramatically increased numbers of older adults with escalating levels of complex needs—with demographic trends only pointing to increased need in the coming years and decade. In a recent USAging poll of AAAs, 94 percent of respondents indicated they are serving more older adults than before the pandemic and 95 percent of all respondents indicated that there is an increased complexity of needs in those they are serving.

In addition to increased need and increased complexity, USAging members are facing unprecedented workforce challenges owing to chronically low wages for critical jobs that support older adults in aging well at home. From retaining overworked case managers to recruiting direct care workers, the current workforce situation is a crisis. In a not-yet-released USAging poll, AAAs told us that 74 percent were facing staffing shortages within their agency, with 91 percent of respondents saying their service providers are also affected by staff shortages. This crisis has led to consumers not receiving the frequency of needed services and experiencing social isolation and loneliness, which research indicates leads to poor health outcomes. Additional federal funds would allow the Aging Network to increase wages to attract the caregiving workforce that this aging country desperately needs.

Appropriators must recognize that the foundational capacity of these programs must be dramatically increased to both meet the ongoing need that exists even as the pandemic begins to wane and to address a rapidly aging population.

As you consider funding levels for FY 2023, we urge you consider the following priorities identified by our members’ experience in directly supporting older adults and caregivers in their communities:

- Increase funding for all Older Americans Act programs and services.
While all OAA subtitles require immediate increases to meet the current and future needs of older adults, on behalf of our AAA and Title VI Native American Aging Program members—who administer these programs locally and therefore witness the critical pressure points as the number of older adults they serve rapidly grows—USAGing urges Congress to prioritize the following OAA services when developing the FY 2023 budget for the U.S. Administration on Aging, which is housed within the U.S. Administration for Community Living, Department of Health and Human Services:

- **Title III B Home and Community-Based Supportive Services**, $797.1 million
- **Title VI Grants for Native American Aging Programs**, $72.5 million for Part A (nutrition and supportive services) and $22.6 million for Part C (family caregiver support)
- **Title III E National Family Caregiver Support Program**, $387.9 million
- **Title III D Evidence-Based Disease Prevention and Health Promotion**, at least $50 million
- $2 million to the Administration on Aging for the engAGED: National Resource Center on Engaging Older Adults to help the Aging Network respond to the increasing incidence of social isolation among older adults
- $75 million for the newly authorized research and innovation center at the Administration on Aging
- **Title VII Long-Term Care Ombudsman Program**, at least $35 million
  - **Invest in other key programs that support healthy aging at home and in the community, including:**
    - Evidence-based health and wellness programs
    - State Health Insurance Assistance Programs (SHIPs)
    - National Community Care Corps
    - Social Services Block Grant, LIHEAP, Community Services Block Grant and AmeriCorps Seniors

Additional details follow on our requests, which we hope will guide your work on the FY 2023 Labor/HHS/Education spending bill.

**Older Americans Act**
The OAA is the cornerstone of the nation’s non-Medicaid home and community-based services (HCBS) system, providing older adults with much-needed supports, including in-home care, congregate and home-delivered meals, adult day care, information and referral assistance, case management, transportation, legal services and caregiver support/respite. With investments in these vital OAA programs that support the health of older adults with these services, these OAA
programs and services save Medicare—and the nation—money in the short and long-term.

The significant emergency COVID-relief dollars Congress provided through OAA allowed the Aging Network to adapt programs to meet the new realities and the dramatically escalating human need identified by all AAAs. While estimates in the degree of growth vary by program and by community, most of our members told us they saw at least a 50 percent increase in clients on average across all programs. A majority also reported that existing clients needed a higher level of service once the pandemic struck. However, even post-pandemic, our collective experience tells us that the need for these supports and services will remain high and continue to grow. There are two major reasons for this:

- The demand for these services was already and still is growing in every community as the older population continues to grow. There are simply more older adults and caregivers who need assistance in every community. By 2030, one in five Americans will be age 65 or older, an unprecedented percentage of the general population.
- Our members have told us that most of the new clients they began serving due to COVID-19 will still need help to age well at home beyond the pandemic. So many older adults have declined cognitively and physically during COVID-19 that we expect additional need for AAA services in the months and years ahead. Another COVID-related factor is that more and more older adults and their families are turning to home and community-based services like those provided by AAAs, rather than institutions such as nursing homes, for their long-term care needs.

It’s time for a reset to expand the reach of and investment in these programs to reflect the realities of a rapidly aging nation recovering from an ongoing pandemic.

*That is why we urge Congress to prioritize increased investments particularly for Title III B Supportive Services, Title VI Native American Aging Programs, and Title III E National Family Caregiver Support Program.*

**OAA Title III B Supportive Services** is the bedrock of the Act, providing states and local agencies with flexible funding to provide a wide range of supportive services to older Americans, which include in-home services for frail older adults, senior transportation programs, information and referral/assistance services, case management, home modification and repair, chore services, legal services, emergency/disaster response efforts and other person-centered approaches that
help older adults age well at home.

The critical flexibility of this funding stream gives AAAs greater means to meet the needs of older adults at home and in the community, thereby eliminating the need for more expensive nursing home care—which usually leads to impoverishment and a subsequent need to rely on Medicaid to meet critical health care needs. The flexibility of OAA Title III B also allows AAAs to meet new and emerging needs in their communities, such as wellness checks for homebound older adults, activities to help older adults stay socially engaged (historically in-person but now also virtual programming) and supporting vaccine outreach and assistance. However, years of eroded funding prior to COVID-19 resulted in local agencies losing ground in their ability to provide critical Title III B Supportive Services—and that was before the pandemic.

To meet current demand for services as well as meet the rising need as more and more people require assistance as they age, we call on Congress to double OAA Title III B over FY 2022 levels in FY 2023, for a funding level of $797.1 million.

OAA Title VI Native American Aging Programs are a primary authority for funding aging services in Indian Country, where elders are the most economically disadvantaged in the nation. We encourage lawmakers to build on COVID-19–relief funding for tribal aging programs and increase Title VI appropriations levels given the current and future needs of American Indian elders and the years of insufficient growth in funding to meet escalating need.

We urge Congress to double funding for Title VI over FY 2022 in FY 2023 in order to reach at least $72.5 million for Part A (nutrition and supportive services) and $22.6 million for Part C (family caregiver support).

Caregiver programs—such as the Older Americans Act’s National Family Caregiver Support Program (NFCSP, OAA Title III E)—support through training, respite, support groups and other programs those who care for friends and family members as they age. The NFCSP funds local AAA or tribal programs that assist older caregivers and family members caring for older loved ones by offering a range of in-demand supports to family caregivers in every community. Steady and sustained increases are needed for this modest federal program that supports the 41.8 million caregivers for people age 50 and older and could prevent billions in more expensive institutional care costs being borne by taxpayers.

For FY 2023, we encourage Congress to double-over-FY 2022 its appropriations for the National Family Caregiver Support Program to reach
$387.9 million, the only national program supporting the family caregivers of older adults who provide the lion’s share of long-term care in this country.

Additionally, beyond those top priorities, USAGing urges the following funding levels for three other OAA programs.

**Older Americans Act Title III D** delivers evidence-based health promotion and disease prevention programs to prevent or better manage the conditions that most affect quality of life, drive up health care costs and reduce an older adult’s ability to live independently. Commonly used interventions address the risk of falls, chronic diseases, mental health and medication management. *However, at less than $25 million in FY 2022, appropriations for Title III D are woefully inadequate and should be at least doubled to $50 million in FY 2023.*

The pandemic shone a brighter light on two pre-existing conditions among too many older Americans: **social isolation and loneliness**. Prolonged loneliness for an older adult is as medically detrimental as smoking 15 cigarettes a day. Individuals who are socially isolated have an increased risk of heart disease, dementia, functional impairment and premature death. Federally, social isolation and loneliness cost the Medicare program an estimated $6.7 billion annually—or an added $1,600 per socially isolated beneficiary. USAGing administers **enqAGED: The National Resource Center for Engaging Older Adults**, which is funded by the U.S. Administration on Aging under authority in the OAA. The Center is an important resource for assisting the Aging Network in getting older adults connected to and engaged in their communities.

*Given the high incidence of social isolation due to COVID-19 and the steadily increasing numbers of older adults nationwide, USAGing urges Congress to provide at least $2 million to the U.S. Administration on Aging for enqAGED to leverage the existing Aging Network infrastructure to combat social isolation and to create more safe social engagement opportunities for older adults across the country.*

The 2020 reauthorization of the OAA established a **research, demonstration and evaluation center for the Aging Network under Title II** to improve evaluation and research and to strengthen and promote the relationship between OAA programs and services and health outcomes of older adults. These efforts are vital to fully realizing the efficacy and efficiency of longstanding OAA programs as well as to evaluating innovations in service delivery to a growing population of older adults—an effort that the Aging Network’s response to the COVID-19 crisis has made even more important. However, without funding, this research center will not
realize these important goals. **As such, in FY 2023, we urge Congress to make the first investment in the updated vision of OAA Title II by investing $75 million.** This level was also recommended in the House-passed 2021 Build Back Better Act.

**The OAA Title VII Long-Term Care Ombudsman Program should be increased to at least $35 million in FY 2023** to reflect the expansions of its roles (into assisted living and to serve those younger than age 60) and the increased need—painfully highlighted by COVID-19—for advocates to serve those living in institutions and other congregate housing facilities.

**USAgeing also believes the following appropriation actions for FY 2023 are critical to build and sustain a comprehensive system of home and community-based services that can meet the needs of the growing older adult population while preventing unnecessary medical expenditures and costly institutionalization:**

**Evidence-Based Prevention and Wellness**
In addition to doubling appropriations for Older Americans Act III D, **USAgeing urges Congress to increase funding for the Chronic Disease Self-Management Program (CDSMP) and falls prevention efforts** administered through the U.S. Administration for Community Living that are implemented locally. The Prevention and Public Health Fund currently provides the modest funding, $8 million and $5 million respectively, for these successful programs, and we urge Congress to significantly grow these activities and resources.

**State Health Insurance Assistance Programs**
USAgeing requests that Congress increase funding for SHIPs in FY 2023 to meet the ever-growing need among Medicare beneficiaries for one-on-one unbiased assistance and personalized counseling. Administered by ACL, and leveraging the work of highly trained volunteers, SHIPs play a critical role in ensuring that older adults and people with disabilities make informed decisions about their Medicare coverage and navigate the complicated and shifting landscape of Medicare choices. SHIP counseling and assistance can save individual Medicare beneficiaries hundreds, or even thousands, of dollars every year. SHIPs, which two-thirds of AAAs operate locally, help individuals whose complicated situations cannot be successfully addressed by 1.800.MEDICARE or www.medicare.gov, an important distinction.
With 10,000 boomers becoming eligible for Medicare every day, USAging calls on Congress to increase SHIP funding to at least $80 million to reflect the growth in the older adult population and inflation over the past decade.

Community Care Corps

USAging also supports continuing the National Community Care Corps via a $5 million funding level in FY 2023. This ACL demonstration program is exploring models that engage trained volunteers to provide non-medical support to older adults and people with disabilities living in the community, in order to supplement other caregiving options.

Gap-Filling Programs

Local agencies rely upon a myriad of funding streams to successfully implement aging programs, including several federal block grants that serve older adults at risk of hunger, abuse, unsafe living conditions and unnecessary institutionalization. USAging supports the highest possible levels for the Social Services Block Grant, the Community Services Block Grant, the Low-Income Home Energy Assistance Program, the Community Development Block Grant and Americorps Seniors.

Thank you for your consideration of our recommendations. Should you have any questions, please feel free to contact me or USAging’s policy staff.

Sincerely,

Sandy Markwood
Chief Executive Officer

cc:
Chairman Patrick Leahy, Senate Appropriations Committee
Ranking Member Richard Shelby, Senate Appropriations Committee
Chairwoman Rosa DeLauro, House Appropriations Committee
Ranking Member Kay Granger, House Appropriations Committee
Members of the House and Senate Labor/HHS/Education Subcommittee