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
HOUSEHOLD PROJECTIONS

More older adults

more of them renters

more of them likely to be non-white
HUD Programs

PHAs: public housing & vouchers

Private Owners: Section 202 Elderly, Project-based Section 8, Section 811

https://resources.hud.gov/

Other Federal Programs:

Low Income Housing Tax Credits

USDA Rural Housing Service Section 515
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.
Building Caregiving Infrastructure

March 2024
Growing Community

The number of Americans providing unpaid care has increased over the last five years.

Caregiving in the U.S. 2020, National Alliance for Caregiving and AARP, 2020

43.5 million
2015

53 million
2020
4 in 10 family caregivers are in **high-intensity** situations

- **27%** Low intensity - 1
- **16%** 2
- **16%** 3
- **27%** 4
- **14%** High intensity - 5

Caregiving in the U.S. 2020, National Alliance for Caregiving and AARP, 2020
Health & Economic Impacts

Top Financial Impacts

- Any of these: 45%
- 2+ financial impacts: 34%
- Stopped saving: 28%
- Took on more debt: 23%
- Used up your personal short-term savings: 22%
- Left your bills unpaid/paid them late: 19%
- Borrowed money from family or friends: 15%

Caregiver Health Changes

- Made it better: 5%
- Made it worse: 23%
- Not affected it: 72%

Caregiving in the U.S. 2020, National Alliance for Caregiving and AARP, 2020
Value of Care

53 Million caregivers

$600 Billion

Economic Value
Most family caregivers want **financial support**

- An income tax credit to caregivers, to help offset the cost of care: 68%
- A program where caregivers could be paid for at least some of the hours they provide care: 65%
- A partially paid leave of absence from work, for caregivers who are employed: 54%
Policy Options

Paid family and medical leave

- The Family Act
  - Provide workers with up to 12 weeks of partial income, shared fund.

Caregiver Tax Credits

- Credit For Caring Act
  - Provide a $5,000 nonrefundable tax credit adjusted to inflation for family caregivers.
Community Infrastructure

14% Used respite services

38% Would be helpful to have respite services available

- Keeping recipient safe at home: 26%
- Managing emotional/physical stress: 26%
- Managing recipient’s paperwork/eligibility for services*: 25%
- Activities you can do with recipient*: 20%
- Making end-of-life decisions: 13%
- Managing your own personal finances*: 13%
- Choosing a home care agency, assisted living facility, or nursing home*: 13%
- Using technology to care for recipient*: 12%
- Managing recipient’s challenging behaviors: 11%
- Finding non-English language materials: 3%
- Other: 2%
- None: 38%

Caregiving in the U.S. 2020, National Alliance for Caregiving and AARP, 2020
Policy Options

Older Americans Act

Priorities

- Increase funding for caregiver support programs
- Increased funding for respite support
- Title VI Funding
- Caregiver Assessments
Caregiver Health & Wellness

Caregiver Self Rated Health

- Excellent: 10%
- Very good: 31%
- Good: 38%
- Fair: 18%
- Poor: 3%

21% in 2020 fair/poor vs 17% in 2015

13%↓

Had a doctor, nurse, or social worker ask you about what you need/needed to help care for yourself

29%

Had a doctor, nurse or social worker ask about what you need/needed to help care for your care recipient
Policy Options

Centering Caregivers in Medicare

Priorities

• Caregiver Training Services Reimbursement
• Improved awareness of caregiving benefits
• Increased access to telehealth services
“Change never happens at the pace we think it should….it happens over years of people joining together, strategizing, sharing, and pulling all the levers they possibly can.”

- Judy Heumann
Policy Spotlight: Medicare

USAging – Aging Policy Briefing
March 13, 2024

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
I. GOOD NEWS – Recent Policy Developments
Part A & B Enrollment Changes Effective 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
  - CMS has used its authority to grant Part A and B Special Enrollment Periods for “exceptional circumstances” including:
    - Loss of Medicaid
    - Health plan or employer error
    - For formerly incarcerated individuals
Inflation Reduction Act (IRA) Rx Changes

- Medicare rx provisions include:
  - 2023: covered insulin capped at $35/mo; free vaccines for certain conditions
  - 2024: Part D catastrophic coverage phase eliminated (costs capped around $3,300 for brand name drugs); Extra Help/LIS eligibility expanded
  - 2025: out-of-pocket cap lowered to $2,000 with option to spread cost-sharing over the year
  - 2026: negotiated prices of first batch of 10 drugs effective, more each following year
Medically necessary oral health coverage – in 2023, Medicare payment policy clarified for dental treatment related to certain conditions, with mechanism to add additional conditions each year

Starting 2024 – expansion of treatment for mental health and substance use disorders

Observation status – proposed rule issued re: appeals process for certain affected individuals

Nursing home oversight: nurse-staffing ratio rule pending
II. MEDICARE ADVANTAGE
Growing Imbalance with Trad. Medicare

- Policymakers have generally supported policies that further this imbalance, including re:
  - Payment
    - Significant Overpayments to MA plans – MedPAC – excess Medicare spending of almost $88 billion in 2024 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 years)
Increased Scrutiny of MA

- New rules and increased oversight re: marketing
  - Including restrictions on ads, agent/broker conduct
- New rules limiting plans’ use of prior authorization
  - Including continuity of care, disclosure requirements
- Some changes to MA payment
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!
Addressing Social Isolation, Loneliness, and Connection
2023-2024 Policy Updates

Abigail Gadbois, Senior Policy Analyst CESIL & Healthsperien
<table>
<thead>
<tr>
<th>Terms and Definitions</th>
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</thead>
<tbody>
<tr>
<td><strong>Loneliness</strong> is a <em>subjective</em> unpleasant or distressing feeling of a lack of connection to other people, along with a desire for more, or more satisfying, social relationships</td>
</tr>
<tr>
<td><strong>Social Isolation</strong> refers to having <em>objectively</em> few social relationships, social roles, group memberships, and infrequent social interaction.</td>
</tr>
</tbody>
</table>
Terms and Definitions

**Social Connection** means having a variety of relationships you can rely on that are high quality.

**Social Connectedness** is the degree to which one is socially connected.

**Belonging** is the feeling of being an accepted member of a group.
All of us are at risk, but some are more vulnerable

- Persons experiencing lower socioeconomic status
- Unmarried/unpartnered individuals
- People with chronic physical & mental health conditions and other disabilities
- LGBTQ+ individuals, especially if they have experienced discrimination
- Caregivers
- New parents
- Minority race/ethnicity
- Veterans
- Members of immigrant communities
- Individuals who live in rural areas
- For children & adolescents:
  - Weaker family structures and support
  - Do not experience belonging and connectedness at school
Our relationships are essential to our health and well-being

Learn more at SurgeonGeneral.gov/Connect2Heal
WHO Commission on Social Connection

The new WHO Commission will define a global agenda on social connection; raising awareness and building collaborations that will drive evidence-based solutions for countries, communities and individuals.

The Commission is led by co-chairs:

- **Dr. Vivek Murthy**, Surgeon General, United States
- **Chido Mpemba**, Youth Envoy, African Union Commission

“**This WHO Commission will help establish social connection as a global health priority and share the most promising interventions.**”
Legislative Action

**National Strategy for Social Connection Act S. 2350**
- Create an Office of Social Connection Policy to set a national strategy on social connection.
- Issue research-based best practices on how to better connect with local communities.
- Support the CDC’s continued research on social connection, loneliness, and social infrastructure.

**Improving Measurements for Loneliness and Isolation Act**
- H.R. 6284 & S. 3260
- Establish a working group that would develop standardized measures for loneliness and isolation, which would include representatives from several federal agencies
- Members include representatives from across federal agencies and other organizations and subject-matter experts

Endorsed by USAging
Legislative Action

Addressing Social isolation and Loneliness in Older Adults (SILO) Act
H.R. 2692
- Provide grants to eligible AAAs or other community-based organizations to conduct outreach to individuals at risk for social isolation or loneliness, development community-based interventions, and connect at-risk individuals with supports.

Endorsed by USAging

Older Americans Act Reauthorization
- Safeguard the core mission of OAA while modernizing the Aging Network to meet current and future needs
- Increase funding levels for all OAA programs and invest in capacity to reduce social isolation and loneliness
- Direct resources for training, TA, and evaluation assistance to proliferate innovations addressing SILC
- Provide guidance and TA to help states incorporate SILC measures and screening tools into their plans
Let’s get connected!

Abby Gadbois agadbois@healthsperien.com
https://endsocialisolation.org/

Explore the Action Guide
Join Global Loneliness Awareness Week June 11th
Seek Resources from our Website
Join the Local Leaders Network
Advocates To-Do List

• **THIS WEEK**: Use the APB Talking Points document in your Hill visits! www.usaging.org/2024apb

• **NEXT WEEK**: Follow-up with Hill offices; submit comments to Senate RFI by 3/21 (see 3/11 email)

• **ONGOING**: Use USAging OAA Reauthorization Toolkit to engage with Congress and your own grassroots, www.usaging.org/OAA

• **NEXT**: Advocate for AAA consultation on SUA policy and procedures! Consult USAging analysis on key provisions (see 2/16 email).
49th Annual Conference & Tradeshow

Save the Date!

Tampa

July 8–11 2024