Talking Points for Hill Visits on USAGing’s 2024 Policy Priorities

The future of aging is now! Support USAGing in our advocacy to meet the opportunities and challenges of a rapidly growing aging population. This document pulls out the asks from our 2024 Policy Priorities so that you have a cheat sheet for your Capitol Hill visits! If you can’t get through all the Policy Priorities on your visit, don’t worry—focus on the issues faced by older adults and caregivers and what your agency does to address them! You can always follow up with more information.

**PRIORITY #1**

Support Aging Well at Home by Investing in Older Americans Act (OAA) Programs and Services

**OAA Reauthorization:**

**GOAL 1:** To serve more older adults in need of help to age well at home, Congress needs to significantly increase authorized funding levels for OAA, ensure AAAs’ ability to contract with health care or use other private funding to serve more adults and meet their missions, expand access to health and wellness programs under Title III D to reach more older adults, and expand Title VI funding to support more services and robust training and technical assistance.

**GOAL 2:** The OAA must meet the needs of today’s and tomorrow’s older adults. Congress can support this goal in reauthorization by unifying and modernizing the Title III C nutrition program to reflect innovations and better meet the changing needs of consumers, including allowing new types of meals such as grab-and-go. As our agency continues to see high rates of social isolation among older adults and works to address the negative impacts, we ask that Congress authorize a national resource center to reduce loneliness among older adults, which would provide dedicated training and technical assistance to Aging Network professionals on building social engagement programs and activities.

**GOAL 3:** To ensure quality programming and services, AAAs must be able to maintain an adequate workforce, conduct quality assurance and oversight of providers, and successfully perform their planning and program development duties. We urge Congress to increase the administrative funding ceiling for AAAs administration of the area plan by two percentage points (10 percent to 12 percent). The current limit is no longer feasible due to many years of eroded funding.

**OAA Appropriations:**

- Increase funding for **Title III B Supportive Services in FY 2025:** These services are a lifeline for older adults living in the community, and this funding stream gives AAAs greater means to meet the needs of older adults, 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.

- **Title VI Native American Aging Programs:** increase funding in FY 2025 to at least $76.5 million for Part A (nutrition and supportive services) and $24 million for Part C (family caregiver support). These programs are a primary authority for funding aging services in Indian Country, where elders are the poorest in the nation.

- **Social Isolation:** authorize $5 million in FY 2025 for a dedicated national resource center to work toward ending social isolation and loneliness among older adults through provision of training and technical assistance to Aging Network professionals.
Recognize and Support Caregivers

- Significantly increase appropriations in FY 2025 for the OAA Title III E National Family Caregiver Support Program, the only national program supporting family caregivers of older adults.
- Continue implementation of the National Family Caregiving Strategy to improve the lives of our nation’s 53 million unpaid caregivers—and those they care for.
- Elevate the grave issues of direct care workforce shortages and recognize the shortages faced in other Aging Network roles.

Prioritize Medicaid Home and Community-Based Services Options to Reduce Unnecessary Institutionalization

- Make a major investment in Medicaid HCBS in 2024 to adequately address pressing workforce and access problems (The Better Care Better Jobs Act, S.100).
- Remove the institutional bias in Medicaid that allows states to make HCBS an optional service and not required as institutional care is (The HCBS Access Act).
- Permanently authorize the Money Follows the Person program to support individuals transitioning from institutional care to home or community-based settings.

Connect Health Care and Aging Sectors to Improve Care and Reduce Costs

- Maintain and strengthen person-centered consumer access to services—and assistance with planning and decision-making—with long-standing and trusted Aging Network Information and Referral/Assistance (I&R/A) platforms and services, which operate at the federal, state and local levels.
- Ensure that new social care models, coding standards, or systems consider the extensive work already invested in by federal, state and local governments, such as the data collection under the OAA, Medicaid and other robust systems. The Aging Network must be at the table as these coding standards or systems are being imagined, developed and implemented.

Questions?
Contact your USAging policy team!
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