

What the 116th Congress Needs to Know About an Aging America

The 116th Congress must adopt policies that address the unprecedented and long-term shift in our country’s age demographics that have been ushered in by the maturing of America’s baby boomer generation. By 2030, 73 million—or one in five—people in America will be 65 or older.¹ Federal priorities must address the opportunities and needs of an aging population.



MANY PLACES, IN EVERY REGION of the country but especially in rural areas, are already grappling with an historic population shift, with ratios of older adults far exceeding the current national average, and available services unable to keep pace with the growing need. However, by 2035, all communities must be prepared to address these demographic realities when, for the first time in the nation’s history, the population of adults 65 and older will outnumber children younger than 18.²

Furthermore, at some point in their lives a majority of this growing population of older adults—nearly 70 percent or almost 80 million people—will need an average of three to five years of long-term care (LTC; also called long-term services and supports) as they age.³

These demographic milestones are not simply blips on the U.S. Census radar. They are mile markers on a longer road toward a significantly older nation. It is critical that lawmakers at all levels of government recognize that, unlike at any other point in our history, demographics demand, and must drive, a policy agenda that:

- Enables people’s ability to live in their homes and communities as they age;
- Improves the health and well-being of the fastest-growing demographic cohort in our country while effectively managing expenditures; and
- Preserves the original intent and structural integrity of Medicare, Medicaid, Social Security and other vital aging programs upon which millions of older adults rely.

This Policy Brief for the 116th Congress is an update to the National Association of Area Agencies on Aging’s (n4a) *What Policymakers Must Know About an Aging America*, which was published in January 2017 at the outset of the Trump Administration. **In the months and years ahead, we encourage policymakers in the 116th Congress to pursue ambitious but achievable strategies to advance policy solutions and promote innovative best practices that improve support for older adults and caregivers in their communities.***

We hope the efforts of lawmakers to develop policy proposals that will affect older adults and caregivers, and their access to services at home and in the community, will reflect and advance the following key aging principles.

*n4a also publishes a comprehensive set of our annual *Policy Priorities*. Current n4a *Policy Priorities* are available online at <https://www.n4a.org/policypositions>.

People Want to Age Safely in Their Homes and Communities

Strengthen access to and the efficacy of social services that support the cost-effective aging options people most want.

Preserving the ability of millions of older adults to live at home and in their communities—and forgo more restrictive, expensive and often unwanted institutional care—requires a range of supportive services that include in-home care, homemaker services, transportation, respite care, home-delivered meals and more. These services are provided in nearly every community in the country through local Area Agencies on Aging (AAAs) and Title VI Native American aging programs.

Historically, AAAs and Title VI programs have fostered the development and coordination of these home and community-based services (HCBS) to older adults and their caregivers. Maximizing public-private partnerships, AAAs work with tens of thousands of local providers and vendors to deliver these critical home and community-based services to millions of older adults and caregivers annually. This collective community is known as the Aging Network, and the resulting national system, which has been functioning efficiently and effectively for more than four decades, supports people where they want to age—at home and in the community.

The Aging Network helps individuals avoid unnecessary and more expensive institutional care and/or spending down of their assets to qualify for Medicaid. In 2019, the average annual cost for a private room in nursing home care exceeded \$100,000.⁴ Delaying or preventing institutionalization can save federal and state governments between \$45,000 and \$70,000 dollars per individual each year.⁵ As the population of older adults grows, it is critical that federal policymakers place greater emphasis on advancing priorities and programs that enhance access to HCBS, including discretionary programs like those included in the Older Americans Act (OAA).

In addition to federal investments, AAAs leverage state, local and private funding to build comprehensive systems of HCBS in their communities. The U.S. Administration on Aging (AoA) surveys show that every \$1 in federal funding for the OAA leverages nearly an additional \$3 in both public and private funding.⁶ Furthermore, the Aging Network engages hundreds of thousands of volunteers who donate millions of volunteer hours each year, further reinforcing federal, state and local investments.

The current authorization of the Older Americans Act expires in September 2019, and the 116th Congress will have an opportunity to pass an OAA reauthorization that fulfills

important bipartisan promises to support opportunities for aging in place. Specifically, we urge lawmakers to include significant increases in OAA authorization amounts to make robust and necessary investments in critical OAA services.*

We also encourage congressional appropriators to seek opportunities to significantly increase annual appropriations for OAA programs and services. Congress can make a bold statement about supporting older adults and caregivers—and capitalize on the return on investment of these programs—by boosting the reauthorization request for OAA and other aging programs to recognize and respond to both the increasing population of older adults and the rising cost of providing aging services.

Health Happens in the Home and Community

Recognize and promote the importance of integrating social services with the health care delivery system.

The vast majority of people's health happens outside of traditional health care settings. Unfortunately, aging services and other HCBS that support older adults and caregivers outside of the medical system have a history of inadequate funding to meet the growing needs.

Fortunately, the health care world is increasingly recognizing how social issues affect health and thus health care costs. Programs to address the **social determinants of health** include transportation, nutrition, caregiver support, disease prevention and health promotion, and person-centered care management approaches. According to the Robert Wood Johnson Foundation, nearly 90 percent of physicians indicated they see their patients' need for social supports, but unfortunately 80 percent of doctors said they don't fully know how to connect them to community options.⁷ And, given current OAA funding limitations, if doctors do connect their patients with social services agencies without additional funding, those agencies may not have the financial capacity to adequately serve the referred patients.

It is essential, therefore, that Congress build upon current efforts and pursue new policy options to ensure that older adults and caregivers have sufficient access to social services/HCBS that can preserve and improve health and prevent the need for costly medical interventions. It is equally important that long-standing, successful, efficient and cost-effective systems—such as the Aging Network—are included and championed as key partners for the health care system.

*For additional information about the n4a's full slate of priorities for Older Americans Act reauthorization, see n4a's *Recommendations for the Reauthorization of the Older Americans Act*, released in late February 2019.

Additionally, any efforts to reform access to health care should include the critical conversation about how social determinants of health and issues such as long-term care for a growing aging population factor into health care access and cost trajectories well into the future.

While there is still a wide gap between social services and medical systems, we encourage Congress to seize policy opportunities in Medicare and Medicaid that would bridge this gap by both reinforcing existing integration and exploring new opportunities for new intersections, partnerships and coordination processes to successfully blend and support care across the continuum rather than medicalizing social services.

In fact, the cost of providing some care is lower outside of the medical facility, especially if care can be appropriately provided by a social worker or other social services provider instead of a doctor or nurse. For example, Medicare Advantage plans have, since 2017, begun incorporating coverage for some health-related social services into their service portfolios for chronically ill individuals. Congress and the Administration provided additional authority to do so in 2018, expanding the definition of supplemental benefits. It is incumbent upon policymakers to support these opportunities and evolutions in care and to seek additional strategies to expand access to critical community-based services. It is also important to note that although these services have been proven to reduce health care costs and improve the quality of care, there is still a cost to providing them. To this end it is imperative that congressional leaders understand the social services systems that already exist for HCBS and ensure that AAAs and other community-based organizations are adequately compensated for their contributions to preserving and improving the health outcomes of older adults.

We Are Only as Strong as Our Caregivers

Recognize the critical importance of caregivers by building on current caregiver support programs for this essential informal workforce.

Every year nearly 40 million unpaid caregivers provide more than \$470 billion worth of support to friends and family.⁸ The financial value of this unpaid care rivals the entire federal Medicaid budget. Communities, states and the federal government depend on the work of unpaid caregivers to meet the HCBS needs of an aging population. However, due to limited funding, programs such as the Older Americans Act National Family Caregiver Support Program, which support

those who are caring for aging loved ones (through training, respite, support groups, etc.), while essential to many, do not begin to meet the need for these services. We urge Congress to work with the Aging Network to expand federal investment in current caregiver support programs and to explore policy solutions to ensure that caregivers become a vital and empowered component of state and federal LTSS-delivery reform. The 116th Congress will have an important opportunity to significantly boost support for and investment in the National Family Caregiver Support Program through both the Older Americans Act reauthorization and the FY 2020 appropriations process. Additionally, we encourage lawmakers to seek innovative legislative strategies to bolster and invest in the country's informal caregiving workforce.

Community Infrastructure is a Critical Component of Healthy Aging

Commit to preserving and promoting existing efficient infrastructure and to prioritizing policies that build communities that are livable for people of all ages.

Ultimately, the ability of older adults to age in place depends on their ability to access services and infrastructure within their communities. Nearly 70 percent of AAAs have been essential partners in local, state and federal government efforts to make communities more livable for people of all ages.⁹ Access to community features, such as affordable, accessible and appropriate transportation and housing options, is often lacking for older adults and people with disabilities, creating barriers to full independence and engagement. We urge Congress to pursue federal policy solutions and support local efforts that enable communities everywhere to ensure that people of all ages have access to essential transportation services and housing options that meet their needs over their lifetime.

It must be noted that increasing older adults' transportation options is of particularly acute importance. The Eldercare Locator, the only national information and referral call center for older adults and caregivers, reports that transportation requests are consistently either the first or second most common inquiry from the thousands of its weekly callers.¹⁰ Many older adults find it difficult to access essential transportation services in their communities. This is particularly true for older adults who live in suburban or rural communities where destinations are too far to walk, public transit is inadequate or non-existent, and private transportation is prohibitively expensive.

Recognize We Are All Stakeholders in an Aging Nation

Address social isolation, ageism and other challenges of major demographic change.

If we are to realize the full potential of an aging nation, we will need national leadership and innovation. While the policy principles already outlined in this document are critically important, policymakers and all Americans must also join in the conversation to “rethink aging.” To combat social isolation and ageism, or to meet the needs of a growing population of people living with dementia, we must change the way we think about aging and the opportunities it presents.

As they tackle the challenges of the demographics on federal policy, congressional leaders must also be on the forefront of highlighting the *value and opportunity* that an aging population brings to society, and call out and reject ageist thinking.

Policymakers should support positive and effective responses to the very real problems older adults face. For example, a growing aging population also means that there will be more people living with Alzheimer’s and other dementias. In fact, researchers project

that the number of people living with dementia will double by 2050. Yet, this disturbing trend poses unique opportunities for policymakers to advance best practices—such as those identified through the national Dementia Friendly Communities initiative—and make large-scale improvements on how we address care for particularly vulnerable populations.

Furthermore, the Aging Network and community-based social services and supports provide an exciting opportunity to address a recently identified significant driver of health care costs. Nearly one-fifth of older Americans experience social isolation, which drives nearly \$7 billion in annual health care costs. The good news is that policymakers can initiate investments in opportunities using current Aging Network infrastructure and resources to address these and other emerging challenges resulting from our national demographic shift.

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Endnotes

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About n4a

The National Association of Area Agencies on Aging (n4a) is the membership organization for the 622 Area Agencies on Aging (AAAs) and a voice in the nation’s capital for the more than 250 Title VI Native American aging programs in the U.S. The fundamental mission of the AAAs and Title VI aging programs is to provide services that make it possible for older individuals to remain in their homes, thereby preserving their independence and dignity. These agencies coordinate and support a wide range of home and community-based services, including information and referral, meals, in-home care, transportation, employment services, senior centers, adult day care and more.



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