

PROJECT 2020

Building on the Promise of Home
and Community-Based Services

Frequently Asked Questions

(S. 1257/H.R. 2852)

1. How did S. 1257/H.R. 2852, legislation known as *Project 2020*, develop?

At the NASUA and n4a winter 2007 meetings, both Boards gave their support to the development of a joint policy agenda that would help reshape the Aging Services Network to prepare to meet the needs of current and future generations of older adults—out of this, our *Project 2020* partnership and proposal was born. After working with our Congressional champions to develop legislation based on our *Project 2020* proposal, NASUA and n4a shared the draft with Aging Services Network partners, as well as other interested groups like disability advocates, to hone the concepts into the Senate and House versions of the bill.

The goal of this legislation is to enhance the existing infrastructure for providing choices for home and community-based care. All of the components are based on the success of existing U.S. Administration on Aging programs and changes to the Older Americans Act that NASUA and n4a supported as part of the 2006 reauthorization.

2. What was the impetus for *Project 2020*? How does *Project 2020* differ from the current AoA demonstration grants?

Project 2020 has evolved from long-term care initiatives of the U.S. Administration on Aging (AoA) and other government agencies and is based on statutory authority incorporated into the Older Americans Act in 2006.



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Over the past few years, AoA, in cooperation with State Units on Aging, Area Agencies on Aging and Title VI Native American aging programs, has tested best practices in community-based long-term services and supports that have demonstrated effectiveness in reducing the need for more expensive institutional care and preventing spend down to Medicaid. Recognizing these successes, Congress expanded opportunities for the Aging Services Network to build on its leadership role in advancing home and community-based long-term services and supports in the 2006 amendments to the Older Americans Act.

Project 2020 proposes the funding necessary to implement and carry out a three-pronged approach through the Aging Services Network, focusing on person-centered access to information, evidence-based disease prevention and health promotion activities, and enhanced nursing home diversion services. *Project 2020* takes a bold approach to these three components that have been tried and tested to ramp them up to national scale reaching more older Americans in need and realizing substantial savings to state and federal governments over time. Moreover, *Project 2020* empowers older Americans to take personal responsibility for their own health and well being through these three elements.

3. Is *Project 2020* to be funded through the Older Americans Act?

The three main components of *Project 2020* are designed to be implemented through the existing Older Americans Act (OAA) infrastructure with funds flowing from AoA to State Units on Aging, Area Agencies on Aging and Title VI Native American aging programs.

We are still working with our legislative champions to determine the best funding mechanism within the federal budget system, but regardless of the source of the funds, the end result will be the same: funding for all levels of the Aging Services Network.

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All states would receive funding for person-centered access to information and evidence-based disease prevention and health promotion activities in the first year of *Project 2020*. Funds for enhanced nursing home diversion services would be distributed to states as a competitive grant program based on performance-based criteria and administered by AoA. In other words, states would not be competing against one another but rather against a set of performance-based criteria.

Funding for *Project 2020* will be based on each of the three components' target populations, matching rates and eligibility guidelines. For more details, see *Project 2020*'s "Funding Assumptions and Elements."

4. Will *Project 2020* affect our existing Older Americans Act funding?

Project 2020 is designed to supplement, **not supplant**, existing Older Americans Act (OAA) programs and funding. *Project 2020* funding would come from budgetary adjustments made as result of savings accrued in the Medicaid and Medicare programs, and thus would not adversely affect existing OAA funding levels your state and agency receives. NASUA and n4a will continue advocating for OAA funding increases for core programs along with the funding necessary to fully implement *Project 2020*.

5. What is the timeline for implementing *Project 2020*?

All states will be engaged in *Project 2020* implementation within three years of passage, and all three components of *Project 2020* will be fully rolled out on nationwide basis within ten years. We expect every state would have a person-centered access to information system in place within five years of enactment. The evidence-based disease prevention and health promotion programs would be rolled out over ten years, although every state/territory would begin receiving funding in the first year following enactment. Finally, all states and territories would have operational programs running in the enhanced nursing home diversion services component by year five.

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6. What does “Person-Centered Access to Information” mean? Does this include Aging and Disability Resource Centers (ADRCs)?

The *Project 2020* proposal is based on a person-centered and consumer-directed approach to long-term supports. The term “person-centered access to information” is intended to encompass the use of different models that address the lack of information on and fragmentation of community-based long-term services. One model that has been successfully tested in states is the Aging and Disability Resource Center (ADRC), however other successful “single point of entry” models have also been developed by states and community agencies and are also eligible under this component of *Project 2020* so long as they coordinate with or build on the capacities of the Aging Services Network through SUAs and AAAs/Title VIs.

Whether it is an ADRC or another model, person-centered access to information refers to a single entry point system that coordinates with or builds on the capacities of the Aging Services Network through SUAs and AAAs/Title VIs to assist consumers make difficult decisions about long-term care and determine the most appropriate services through options counseling, planning and care management.

The system will provide streamlined access to public and private long-term services and supports, including home and community-based services as well as other benefits, programs and services administered through the Aging Services Network and other sources. Secondly, the program must have the capacity to link consumers to evidence-based programs. Thirdly, it must target consumers at the highest risk of Medicaid spend down and nursing home entry to offer enhanced nursing home diversion services.

7. What types of programs qualify as Evidence-Based Disease Prevention and Health Promotion programs?

Evidence-based programs empower older adults to take personal responsibility for their health by making informed health choices and adopting healthier behaviors. Most importantly, states that have piloted these programs have documented the savings that such

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programs have generated by helping participants avoid hospitalizations and unnecessary physician visits. The Aging Services Network is well positioned to provide low-cost interventions to help older adults make behavioral changes through clinically tested and proven methods to help them better manage their chronic conditions, prevent falls and maintain their independence in the community.

Project 2020 seeks to build on and replicate these successful evidence-based programs in a variety of areas. States, Area Agencies on Aging and Title VI Native American aging programs would have the flexibility to choose among a number of evidence-based programs focusing on chronic disease self-management, falls prevention and other areas. Following enactment of *Project 2020*, it is anticipated that more detailed guidelines, as well as a list of approved evidence-based programs, would be made available to assist state and community agencies design or expand their programs.

8. What technical assistance will be available to State Units on Aging, Area Agencies on Aging and Title VI Native American aging programs on Project 2020? Will an evaluation of the program be conducted?

The *Project 2020* proposal includes technical assistance to ensure that implementation will generate the savings projected for the initiative. Analysis of related AoA demonstration projects has revealed that with extensive technical assistance, participating agencies can successfully implement and perform the required activities in a disciplined manner that produces consistent results.

Based on the types of technical assistance that state and community agencies have found work the best, *Project 2020* would include on-the-ground real time, state and community-specific technical assistance that takes full advantage of peer-to-peer information exchange among state and local aging professionals, such as partnering more experienced aging professionals with their counterparts at agencies new to implementing the programs envisioned under *Project 2020*.

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Transparency and accountability are built into this initiative from the process of applying for the funding through regular reporting to Congress on achieving the performance goals. Further, accountability is achieved through a complete national evaluation of all components and conducted by AoA to ensure that the established performance goals are met.

9. What are the next steps for S. 1257/ H.R. 2852?

The bills have been assigned to the committees of jurisdiction: S. 1257 has been referred to the Senate Finance Committee and H.R. 2852 to the House Energy and Commerce Committee. Since those two committees are also crafting health care reform legislation, we are working hard to get *Project 2020* into those legislative packages to improve our chances of passage. Please visit our respective websites (www.nasua.org and www.n4a.org) for frequent updates on the progress of the legislation.

10. What can advocates do to push for passage of *Project 2020*?

Now is the time to lend your support to advance S. 1257/H.R. 2852 in Congress. **Urge your members of Congress to sign on to the bill as a co-sponsor, to advocate for *Project 2020*'s inclusion in health reform** and to talk with their peers to build support in Congress. Educate other advocates to take action to meet with and talk with their members of Congress to move for quick passage of the bill.

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