January 29, 2021

The Honorable Charles Schumer, Majority Leader
The Honorable Mitch McConnell, Minority Leader
United States Senate
Washington, DC 20510

The Honorable Nancy Pelosi, Speaker
The Honorable Kevin McCarthy, Minority Leader
United States House of Representatives
Washington, DC 20515

Dear Leader Schumer, Leader McConnell, Speaker Pelosi and Leader McCarthy:

On behalf of the country’s 622 Area Agencies on Aging (AAAs) and the more than 250 Title VI Native American aging programs, which the National Association of Area Agencies on Aging (n4a) represents, we urge congressional action on several critical health and aging policy priorities that were left unaddressed in the COVID-19 relief and omnibus FY 2021 appropriations package at the end of the 116th Congress.

We thank you for your support in the early days of our prolonged health and economic crisis of emergency funding for OAA programs, which included home-delivered meals, in-home services, caregiver assistance, and other community-based supportive services. But, given the duration and magnitude of this public health crisis and the vastly increased caseload of our members as a result, additional emergency funding is necessary and required to enable those older adults most at-risk of COVID-19 and in greatest need to continue receiving life-sustaining services.¹

Despite bipartisan Senate and House support for additional investments in OAA programs—and the enormous ongoing need for OAA services in nearly every community—we are concerned and disappointed that lawmakers did not prioritize the needs of the population at the greatest risk of hospitalization and death from the virus in the December 2020 COVID package. Of the more than 425,000 Americans lost to COVID-19, 80 percent were 65 or older. Sixty percent were 75 or older. Furthermore, older Americans who contract the coronavirus have a five to 13 times higher risk of hospitalization and a 90 to 630 times higher risk of death than adults under age 30.²

Given the fact that the nation’s older adults, as a group, experience the
worst outcomes from the COVID-19 pandemic, it is imperative that the Congress address the needs of this population, especially the subpopulations of older adults who need assistance to remain safe and live independently. **As such, we implore you to take the following actions.**

1. **Support the Older Americans Act to Prevent a Tragic Funding and Services Cliff for Older Adults Living at Home**

   Older Americans Act emergency funding has bipartisan support in the **Senate** and **House** and directly aids the homebound, high-risk and high-need older adults who are, of those living at home and in the community, most at risk from this deadly pandemic. **Without an infusion of funding to replace the expended CARES Act dollars, there will be millions of older adults who already are, or very soon will be at risk of losing access to meals, in-home support, case management, transportation, and health and wellness programming to stave off social isolation and loneliness**—all of which are crucial to enabling older adults to stay safe at home and in the community and avoid infection from the coronavirus.

   **Therefore, we urge lawmakers to include, at a minimum, an additional $1.364 billion provided through the Older Americans Act in the next relief package.** This funding request **echoes the urgent call-to-action** from n4a and our fellow Aging Network national organization colleagues. It also directly aligns with the Biden Administration’s goals—**and our recent messages to the Biden Administration**—to prevent further illness and death from COVID-19; support home and community-based services for older adults and people with disabilities; bolster family caregivers bearing an incredible burden during this crisis; promote health equity for particularly high-risk and hard-to-reach populations; and deploy an effective and efficient national vaccination campaign that prioritizes vaccinations for particularly vulnerable populations. **Without OAA investments, the next COVID-19 response will leave behind the older adults who desperately need continued support to age successfully at home and in the community and their family caregivers.**

   Specifically, we urge you to invest, at a minimum, **$1.364 billion for Older Americans Act programs administered by the Administration for Community Living (ACL),** including:
   - **$750 million for Congregate and Home-Delivered Nutrition Services** (Title III C)
   - **$400 million for Supportive Services** (Title III B), which includes $200 million for existing services as well as $200 million for vaccination outreach and support to hard-to-reach older adults
   - **$20 million for Native American Aging Programs** (for Nutrition and Supportive Services) (Title VI)
   - **$44 million for Evidence-Based Health Promotion and Disease Prevention** (Title III D)
   - **$150 million for Family Caregiver Support** (Title III E)

   n4a recently conducted a survey of the AAA network in each state to assess the status of current OAA funding, evaluate the unmet need, and to gain insight into the consequences of failing to provide additional OAA emergency funding to the network during the extended health and economic crisis. Specifically, since the pandemic began, a majority of AAAs have expanded nutrition and supportive services by more than 50 percent, with a significant number seeing much higher increases. In addition to home-delivered meals and supportive services, the network also saw significant growth in the needs for social isolation and prevention and
mitigation programs (73 percent of respondents); grocery provision and shopping services (53 percent); in-home supportive services (40 percent); information and referral support (38 percent); and caregiver supports (35 percent).

Devastatingly, of the 40 percent of agencies that have already exhausted previous emergency relief funds, most ran out of that funding in the fall of 2020 and have either eliminated or significantly reduced services for high-risk, hard-to-reach older Americans and caregivers that still need services. For AAAs that are still spending previously allocated relief funds, most will fully expend those funds by spring 2021 and will be forced to take similar actions unless Congress acts soon.

2. Provide Additional Support through OAA Title III B to the Aging Network to Help Vaccinate the Most At-Risk and Hardest-to-Reach Older Adults

Adults ages 65-74 are 90 times more likely to die from COVID-19 than their age 18-29 counterparts. For those ages 75-84, their risk of death is 220 times more likely, and for those age 85 and older, the figure is 630 times more likely.iii To ensure equity and prevent further age disparities, THIS is a population that should be prioritized for vaccination. Approximately 95 percent of the older population lives at home and in the community—not in nursing homes where vaccination is fundamentally easier to administer—and millions of them will need special assistance to get vaccinated.

To meet the nation’s admirable goals of vaccinating the highest-risk populations, who are also often hard-to-reach, we urge you to rely on and support the nationwide Aging Network and Area Agencies on Aging. The Aging Network already serves these older adults and supports their caregivers, and we are trusted resources at the community level. Additionally, because AAAs are required under existing federal law to prioritize and target outreach and services to those most in need—specifically including racial minorities and other populations with greatest social and economic need—the nationwide network of AAAs can support the Administration’s efforts to focus on and connect with the older adults most affected by racial and/or socioeconomic health disparities in this pandemic and beyond.

AAAs can provide education on the importance of vaccination, can help older adults navigate the often complicated and non-age-friendly vaccine sign-up systems most of which are online and can provide the direct, supportive services that enable these older adults to keep the vaccination appointment (e.g., transportation, personal assistance, case management). These efforts essentially enhance existing and future massive vaccine deployment efforts by state and local public health agencies, but in order to do this, the network will require additional federal resources.

Therefore, we urge Congress to support a $200 million boost to federal investments in Older Americans Act III B Supportive Services to provide the wrap-around services that will greatly aide our national efforts to vaccinate older adults and family caregivers.

We also ask you to prioritize for vaccination the direct care staff that AAAs and other community-based organizations employ. This workforce will be essential in implementing the hands-on, non-virtual vaccination support (accompanying older adults to
vaccine sites, providing transportation, etc.), but only if they themselves are vaccinated.

We have an historic opportunity to turn around our nation’s COVID-19 efforts and provide a unified response that meets the moment and the need. **As such, we implore federal lawmakers to rely upon and support the national Aging Network that can be a critical partner in ensuring that collectively we reach millions of high-risk and high-needs older adults who live at home and in the community.**

Overall, we are at a critical juncture as a nation. Without further federal legislative leadership and action to advance additional supports to vital community-based aging and health care programs, older adults and their caregivers will endure unnecessary, preventable suffering spurred by an unforeseen pandemic but exacerbated by political stalemate. **We implore lawmakers to prioritize older Americans by including funding for these vital aging programs in the next relief legislation.** Should you have any questions, please feel free to contact me, smarkwood@n4a.org, or n4a’s policy chief Amy Gotwals, agotwals@n4a.org.

Sincerely,

Sandy Markwood  
Chief Executive Officer

cc:  
Members of the United States Senate  
Members of the United States House of Representatives

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