January 27, 2021

To: Administration of Joseph R. Biden  
From: Sandy Markwood, CEO, National Association of Area Agencies on Aging  
Re: Protect Older Adults in the COVID-19 Crisis

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 Biden Administration address the needs of this population, especially the subpopulations of older adults who need assistance to remain safe and live independently. On behalf of the country’s 622 Area Agencies on Aging (AAAs) and the more than 250 Title VI Native American aging programs and building on our December 8 memo to the Biden COVID-19 Transition Team, we write to you to again to urge you to deploy the Aging Network to support of the Biden Administration’s efforts to defeat COVID-19.

We are concerned that the President’s COVID-19 relief proposals left out continued emergency funding for Older Americans Act programs and services, a situation that must be remedied before we face yet another crisis, this one wholly preventable. 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 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.

In your negotiations with Congress, please support at least $1.364 billion provided through the Older Americans Act in the next relief package. The Biden Administration’s support will be critical and this support directly aligns with the Administration’s goals 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.

2. Deploy 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 ages 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. To ensure equity and prevent further age-related health 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 Biden Administration’s admirable goals to target the highest-risk populations, who are also often hard-to-reach, we urge you to rely on 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 the Administration to support an additional $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. Additional details on both proposals follow below, but do not hesitate to contact me for any further information about older adults, their caregivers or n4a’s members.

The Biden Administration has an incredible 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 the Administration 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.**

**Together we can build a safer, more equitable future for America’s older adults and their caregivers.**

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Addendum to n4a’s January 27 Memo to the Biden Administration

Further details on the requests of our January 27 memo follow.

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

Of the more than 400,000 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 younger adults.iii Simply, older Americans have borne the brunt of the most tragic consequences of the coronavirus pandemic. While the tragic situations in nursing facilities and other congregate living situations are well deserving of the attention and scrutiny they have received, as a country, we must not overlook the fact that the vast majority of older adults live in their own homes or in the community, and a significant number of those older adults require some assistance to continue to do so. COVID-relief efforts must meet the needs of this high-risk and often hard-to-reach population of older Americans and their caregivers.

The mission of AAAs and other Aging Network organizations is to maximize the health, safety, and independence of older adults so they can live at home and in the community as they age. To that end, AAAs develop, coordinate and provide a broad range of supportive services that include, but are not limited to, information and assistance, congregate and home-delivered meals, transportation, social engagement supports, evidence-based health promotion interventions, in-home personal care services and caregiver support.

During the many months of this national health and economic emergency, AAAs, Title VI Native American aging programs, and other vital Aging Network partners have selflessly served on the front lines of the COVID-19 pandemic by meeting the emergency and ongoing needs of older adults who face significantly increased risks from the virus. Relying on more than 55 years of experience in providing support to enable older Americans to stay safe and healthy in their homes, this nationwide network has efficiently and effectively responded to our new national reality and accommodated the dramatically growing needs for aging services by deploying rapid-response innovations to address pandemic-related challenges. They could not have accomplished these significantly elevated service levels
without the federal Families First and CARES Act funding for the Older Americans Act, which has begun to run out in many states.

Despite bipartisan Senate and House support for additional investments in OAA, the December 2020 relief package only included $175 million for OAA nutrition services, an amount that fell far short of the need for meal assistance, and did not support other critical services offered under the Act. We are calling on Congress to include $1.364 billion in funding for Older Americans Act programs in the next coronavirus emergency supplemental funding bill.

As you work with Congress to determine the details of the next COVID package, we implore you to demonstrate clear support for the inclusion of Older Americans Act emergency funds in the final package. We appreciate just how bold and comprehensive the Biden COVID proposal is, but without Older Americans Act investments, it will leave behind the older adults who desperately need support to age successfully at home and in the community.

The specifics of our ask follow.

- $1.364 billion for Older Americans Act programs provided by the Administration for Community Living (ACL):
  - $750 million for Congregate and Home-Delivered Nutrition Services (Title III C)
  - $400 million for Supportive Services (Title III B), including $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)

**Deploy the Aging Network to Help Vaccinate the Most At-Risk and Hardest-to-Reach Older Adults**

In the battle to defeat COVID-19, AAAs are perfectly positioned to play several important roles. AAAs are the trusted health and social supports resource for their older adult and caregiver clients at the local level. This provides a level of access to older adults, especially those who need help to remain independent and healthy at home, that is not matched by any other entity or network. AAAs, working in coordination with their provider networks, know where
these high-risk and hard-to-reach older adults are and know how best to educate and support them. The same can be said for the Title VI Native American aging programs serving tribal elders.

Furthermore, AAAs and their Aging Network partners understand the magnitude of the response required, and these local leaders in aging and community living serve an important role to help mobilize other critical partners to meet the needs of older Americans and their caregivers in nearly every zip code across the country. Community collaboration is a core component to the decades-long efficacy of the Aging Network.

Additionally, because AAAs are required 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—our network of AAAs can assist with Administration efforts to focus on and connect with the older adults most affected by racial and/or socioeconomic health disparities in this pandemic and beyond.

Many of the authorized functions under Older Americans Act III B Supportive Services align naturally with the types of services that State Units on Aging and Area Agencies on Aging (AAAs) can provide to older adults to contact, educate and assist them surrounding vaccination from COVID-19. In many cases, this is already beginning to happen, but without additional funding, it will be difficult to tap the true potential the Aging Network offers to this critical public health vaccination campaign.

The Aging Network has the experience communicating on difficult or complex subjects with all subpopulations of older adults, including those with cognitive challenges, physical disabilities or complicated care needs. The Aging Network has information and referral/assistance lines at the state and local levels to assist older adults with connecting to services; with resources, they can handle diverted, high-needs older adult callers from whatever existing vaccination system the state or county has set up. The Aging Network also deploys case managers to arrange and coordinate care on a person-by-person basis and operates or contracts transportation programs designed for older adults and people with disabilities. Most importantly, the local agencies within the Aging Network are trusted sources of information and resources in the community—making them perfect messengers and a key source of wrap-around support for the public health and other governmental efforts already underway.

We therefore request the Biden Administration support:
• **Prioritizing the home and community-based services direct care workforce for vaccination.** AAA workers, in-home care workers and all the other types of professionals working directly with older adults and people with disabilities should be given priority access to the vaccine as soon as possible, which will enable them to more safety assist in the vaccination of and continuing care of the millions of clients we serve on a regular basis.

• **Promote additional funding for the Aging Network’s role in supporting public health’s roll-out of vaccination plans** and the massive task of getting the approximately 56 million people over the age of 65 (including the 6.7 million of those over the age of 85) vaccinated against COVID-19. We believe the most efficient way to accomplish this is to provide an additional $200 million for Older Americans Act Title III B Supportive Services, to be used to directly support older adults in being vaccinated against COVID-19. These vaccination support activities would include, but are not limited to, efforts of State Units on Aging, local AAAs and/or their contracted providers conducting outreach and education, utilizing Information and Referral and case management systems to support vaccination scheduling which in most cases requires online access, providing transportation or other supportive services to ensure older adults can travel to and from vaccination sites, and other activities to support the vaccination of the most vulnerable older adults living at home and in the community.

For further information on these and n4a’s other policy proposals, visit [www.n4a.org](http://www.n4a.org) or contact:

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