Senate Passes $1.9 Trillion Relief Bill
Investments Include Older Americans Act, Medicaid FMAP

March 8, 2021

In the wee hours of Saturday morning, after several days and long nights of negotiations and debate, the Senate passed the American Rescue Plan Act by a vote of 50-49 along party lines. A tie-breaking vote by Vice President Kamala Harris was not needed, as Senator Dan Sullivan (R-AK) was absent due to a personal family matter. The passage of this $1.9 trillion package represents a major victory for President Biden and Democrats in Congress, given their collective campaign promises for a major economic stimulus and pandemic relief bill.

Senators made changes to the House-passed bill, so the legislation will move back to the House of Representatives for final approval this week. Democrats hope to have the measure signed into law before March 14, when current federally funded unemployment benefits expire.

All of n4a’s top COVID-relief requests are included in this measure, from Older Americans Act (OAA) to Medicaid FMAP to state/local aid, which is a testament to the excellent advocacy n4a members conducted around this ask.

The Details

Older Americans Act
In the Senate process, one change was made to the OAA funding levels: $10 million was moved from the $470 million allocation for OAA Title III B Supportive Services to create a national technical assistance center for grandparents raising grandchildren and kinship caregivers at ACL. This means the final spending levels for this additional OAA funding are:

- $460 million for Supportive Services (Title III B), which will be used for continuing traditional III B services, supporting and facilitating vaccinations for older adults, and additional activities to mitigate the risks of prolonged social isolation and loneliness among older adults
- $750 million for Congregate and Home-Delivered Nutrition Services (Title III C)
• $25 million for Native American Nutrition, Supportive and Caregiver Services (Title VI, Parts A and C)
• $44 million for Evidence-Based Health Promotion and Disease Prevention (Title III D)
• $145 million for National Family Caregiver Support Program (Title III E)
• $10 million for Title VII Long-Term Care Ombudsman Program

n4a is thrilled that these flexible, emergency funds will flow to the Aging Network—and we are especially pleased with the unprecedented investment in III B Supportive Services, a top n4a priority. These levels embody n4a’s longtime advocacy requests and reflect the coordinated advocacy conducted with our advocacy partners in the Aging Network and beyond (January 27 letter on OAA and vaccines; February 2 sign-on letter on III B ask on vaccines).

The included funding is designed to replenish extinguished CARES funds, so that dangerous service cliffs can be avoided or, in cases where funding has already lapsed, service gaps restored amidst the ongoing pandemic. The budget process used to pass this bill means that the OAA funding in the American Rescue Plan Act will not need to be spent within one fiscal year, as it is not appropriated funding, but rather direct funding. More details to come about what flexibilities states, AAAs and Title VI Native American Aging programs will have with these dollars.

**Medicaid HCBS**

Another one of n4a’s priorities since the start of COVID-19 has been to secure an increased Federal Medical Assistance Percentage (FMAP) for home and community-based services (HCBS) waivers. The House provided a 7.35 percentage-point increase to HCBS waivers for one year. In an unexpected but welcome turn, the Senate amended the legislation to make that FMAP boost rise to 10 percent points! The provision would apply starting April 1, 2021 and run through March 31, 2022. This means that states, which cannot use this federal funding to replace existing state funding for HCBS, would receive a higher percentage of federal funding for HCBS throughout that period of time, allowing them—and the AAAs and providers who then implement these services locally—to increase access to HCBS in a variety of ways.

**Other Provisions**

One of the legislation’s higher-cost provisions includes funding for state and local governments. Intended to help states and localities address COVID-19 and prevent damaging cuts to services or staff, the bill allocates $350 billion for this purpose. n4a members’ concerns about state cuts to aging programs and the effects on older adults drove n4a’s support for these additional resources.

Elder justice programs will receive $276 million, with the bulk of that funding dedicated to Adult Protective Services (building on the December 2020 relief package, which sent ~$93 million to states for APS), and modest amounts expected to be used for the Long-Term Care Ombudsman Program.
There are many other provisions in the relief package that may affect older adults, caregivers and your agencies; as n4a learns more, we will share this information with our members. For just one example, many caregivers who claim their adult care recipient as a dependent will receive a $1,400 stimulus check for that person, in addition to their own (assuming the household is below the income limits).

**Next Steps**

Assuming the House passes the bill without incident—Democrats have only a slim majority in the House and many progressives are disappointed that the federal minimum wage increase was removed in the Senate—this measure should become law by March 14.

Typically, it takes four to six weeks before new federal OAA funding flows out to states, although the large price tag of this particular bill could slow that timeline. We encourage n4a members to work with their state units on aging to start planning for the most expeditious way to get this emergency funding out into communities, thus preventing service cliffs and increasing the Aging Network’s ability to respond to the current need for vaccination support.

Meanwhile, **make sure you have the 2021 Virtual n4a Aging Policy and Advocacy Summit on your calendars for April 27-29.** Registration will open this week! This online-only event will be the perfect opportunity to both engage your staff and advisory committees in advocacy efforts and to learn the latest health and aging policy news coming out of a new Administration and Congress. We hope the silver lining of having to go virtual in 2021 will be that more of our members and their stakeholders can partake in this important policy and advocacy conversation!

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**This Legislative Update is an n4a membership benefit.** For more information about these and other federal aging policy issues, please contact n4a’s policy team: Amy Gotwals and Monica Billger at policy@n4a.org, 202.872.0888.