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May 28, 2020

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

Dear Leaders McConnell and Schumer:

I write today on behalf of the National Association of Area Agencies on Aging (n4a), which represents the country's 622 Area Agencies on Aging (AAAs) and the more than 250 Title VI Native American aging programs. These Aging Network organizations continue to serve on the front lines of the COVID-19 pandemic by responding to the needs of older adults who face significantly increased risks from the virus. Across the country and throughout the coronavirus crisis, AAAs and Title VI aging programs have tapped into more than five decades of expertise providing support to enable older Americans to stay safe and healthy in their homes. The Aging Network has efficiently and effectively responded to our new national reality both by modifying existing local service delivery models to accommodate the dramatically increasing needs for aging services and deploying rapid-response innovations to address pandemic-related challenges.

n4a and our members greatly appreciate Congress' initial expediency to support older adults' safety and independence via emergency funding for Older Americans Act (OAA) nutrition services included in the Families First and CARES Acts and for OAA supportive services, family caregiver supports, and ombudsman and elder justice activities included in the CARES Act. ***However, federal lawmakers must continue to prioritize policies that enable older adults to remain safely in their homes and to avoid especially risky medical and institutional care settings.*** These priorities must include efforts to mitigate the negative effects of prolonged social isolation as a result of extended social-distancing policies for vulnerable populations during this crisis. Even when social distancing policies are lifted, many older adults may be hesitant to leave their homes due to their vulnerability from COVID-19 and will face prolonged social isolation and loneliness.

## ***Social Isolation Among Older Americans Is a Critical Concern During Coronavirus***

Long before the coronavirus pandemic upended opportunities for community engagement and forced the nation's older adults into federally recommended, extended stay-at-home orders, social isolation was a critical issue affecting more than 8 million older Americans. A body of evidence demonstrates that social isolation and loneliness are associated with myriad negative mental and physical health consequences, including heart disease, diabetes, anxiety and depression. Recent research also demonstrates that social isolation carries a 29 percent higher risk of mortality than obesity and a 26 percent higher risk of death than cigarette smoking.<sup>1</sup>

Unaddressed social isolation and loneliness also has an economic cost—particularly among vulnerable populations. Federal Medicare spending is \$134 more monthly per person for every socially isolated older adult, and social isolation costs Medicare \$6.7 billion annually, which is comparable to Medicare spending on chronic conditions.<sup>2</sup>

During this crisis, more than half of n4a members have reported increasing negative health effects of their clients due to social isolation from COVID-19, despite early and ongoing efforts to help older adults stay connected. Among reporting AAAs, demand for telephone reassurance and wellness checks has surged among most AAAs, second only to increased requests for home-delivered meals. Virtually all AAAs report serving isolated older adults who were not previously connected with their agency's services. This growth in demand for critical aging services calls for additional targeted funding to address social isolation and provide technology to the Aging Network.

This is why n4a is supporting federal proposals led by Senators Tina Smith, Chris Van Hollen and Debbie Stabenow to ensure that local aging services programs can implement locally directed solutions to keep older adults connected to their loved ones and communities throughout the duration of this pandemic. ***We urge Senators to incorporate the solutions offered in the Senators' [May 12 letter to Senate and House Leaders](#) and echoed in both the [n4a](#) and the [Coalition to End Social Isolation](#) letters to Congress.***

Specifically, we urge Senators to ensure that the next phase of legislation to respond to the coronavirus pandemic helps to mitigate social isolation and loneliness among older Americans by incorporating:

- At least \$12 million for the Administration on Community Living's National Resource Center for Engaging Older Adults, which will capture and disseminate best practices, create innovative models, and work to enhance the Aging Network's efforts to reduce social isolation among older adults, including the special needs of minority older adults;
- \$80 million in targeted funding for the Aging Network to purchase and disseminate

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<sup>1</sup> J. Holt-Lundstad, et. al. Loneliness and Social Isolation as Risk Factors for Mortality: A Meta-Analytic Review. 2016.

<sup>2</sup> AARP Public Policy Institute. Medicare Spends More on Socially Isolated Older Adults. 2017

technology, including laptops, tablets, and assistive devices, to help low-income older adults without technology stay connected;

- \$50 million for Older Americans Act programs to adapt existing evidence-based programs to be offered online or telephonically to reach older adults who are abruptly and unexpectedly homebound as a result of the pandemic; and

Incorporating these resources into the next COVID-19 relief package will ensure that older adults can stay connected to society while staying safe at home. As previously stated, even when other Americans resume activities as the outbreak resolves, older adults may continue to limit their physical exposure to others. As such, we urge Senators to build on existing Older Americans Act programs to address social isolation and to implement these policy solutions.

### ***Additional Policy Considerations to Incorporate into Future Coronavirus Legislation***

We recognize that as the Senate works to develop its next measure to focus federal relief efforts toward critical needs as the coronavirus pandemic continues, priorities may deviate from those reflected in the House-passed Health and Economic Recovery Omnibus Emergency Solutions (HEROES) Act, H.R. 6800. ***However, we urge Senators to continue to incorporate proposals demonstrating an ongoing and sincere commitment to meeting the needs of vulnerable older adults during this crisis. To ensure that homebound older adults can survive this pandemic, we also ask Senators to include the following proposals that echoed in our [April letter to Congress](#):***

- **Implement funding increases and policy changes for Medicaid and Medicaid home and community-based services (HCBS) waiver programs** to ensure that state Medicaid beneficiaries and HCBS service providers can sustain and, as needed, increase home and community-based care options during the coronavirus pandemic. Nearly two-thirds of AAAs are involved in delivering Medicaid home and community-based services (HCBS), which are essential to ensuring that, nationally, a majority of older adults and people with disabilities who require an institutional level of care can remain in their homes and communities. States and community-based organizations will need much more funding to meet the growing needs. Therefore, we urge the Senate to adopt the House-passed 14 percentage-point bump in the federal Medicaid allocation and 10 percentage-point increase for Medicaid HCBS waiver programs to ensure that the health and economic crises related to COVID-19 do not force states to choose between the health of their populations and other essential investments in state services.
- **Incorporate additional funding for OAA and other vital aging programs administered through the Administration for Community Living.** In addition to the funding requested above to address and alleviate the particular the negative health implications of prolonged social isolation, we urge the Senate to also prioritize funding for Older Americans Act programs and services including Title III B supportive

services, Title III C1 and C2 nutrition services, Title VI Native American aging program nutrition services, Title III E family caregiver support services, Title III D evidence-based health promotion and disease prevention programs, and Title VII elder rights protection activities. A majority of n4a members have already indicated that they will need additional funding from Congress to sustain this level of service and continue to meet their community's needs; only 1 in 5 indicated they have sufficient funding to last through the service period authorized by Families First and CARES. If state funding is cut due to the economic effects of COVID-19 in the coming months, additional federal funding will surely represent a universal need for AAAs.

We also urge the Senate to include additional funding for ACL's Medicare programs including the State Health Insurance Assistance Programs and the Senior Medicare Patrol program, which are vital, volunteer-led programs that have had to significantly modify their service models to ensure that they continue to serve Medicare beneficiaries.

- **Provide ongoing financial relief to states, communities and other essential safety net systems** that have been especially hard hit from the economic fallout of the coronavirus pandemic to ensure that these systems—and the aging programs they support—are not subject to future devastating funding cuts. With stay-at-home orders shuttering businesses and concerns about health leading to wide-spread layoffs, state tax revenues have tumbled at the same time that state unemployment insurance and health care costs are skyrocketing. Consequently, we support the state, local and tribal government funding included in the HEROES Act and urge the Senate to incorporate important state and local government funds to ease state and local shortfalls that will hit vulnerable populations, including older Americans, particularly hard.

Additionally, we urge the Senate to consider including the House-passed emergency funding for vital federal block-grant programs, including the Social Services Block Grant (SSBG), and life-sustaining food assistance through the Supplemental Nutrition Assistance Program (SNAP). Enacting these investments will bolster the ability of our nation to mitigate the devastating economic and health effects of the coronavirus pandemic.

We hope the Senate will adopt these and other [recommendations](#) that prioritize the health and safety of older adults and implement proposals to alleviate widespread social isolation and loneliness among older Americans. Should you have any questions, please feel free to contact me or n4a's policy staff at 202.872.0888.

Sincerely,



Sandy Markwood  
Chief Executive Officer

cc:

The Honorable Nancy Pelosi, Speaker, U.S. House of Representatives

The Honorable Kevin McCarthy, Minority Leader, U.S. House of Representatives

Members of the U.S. Senate