

# Invest

## in Cost-Effective Aging at Home and in the Community



Invest in Older Americans Act and other supportive services that help older adults live successfully and independently in their homes and communities.

As Congress considers FY 2021 federal funding, there are difficult choices ahead for our nation and its leaders. n4a encourages lawmakers and the Administration to have thoughtful conversations about strategies to restore and sustain investments in our nation's most effective federal programs while developing common-sense solutions to address the growing federal debt. The budget-making process should allow for honest, transparent debate over national revenue and spending priorities. We specifically oppose shutdowns of the federal government, as they create unnecessary confusion, inefficiencies and the risk of harm to older adults. Additionally, short-term continuing resolutions create instability at the state and local levels, so we encourage Congress to meet its appropriations process deadlines on a regular basis.

### Older Americans Act (OAA)

*Congress must make critical investments in OAA in FY 2021 by protecting these essential programs and continuing to restore the capacity lost to years of funding erosion.* In recent years Congress has made strides toward restoring and boosting funding for most OAA programs to better address the rapidly rising need of our aging nation. As the population of older adults and caregivers continues to grow, an upward trajectory of these investments must continue. While important, even these recent funding increases do not adequately address the needs of an aging nation. Congress must seize this tremendous opportunity and prioritize the most cost-effective programs that directly address the demographic realities we face as a nation.

While all subtitles of OAA require immediate increases to meet the escalating demand, n4a's members—who administer these programs locally and therefore see firsthand where the pressure points are as the number of older adults rapidly grows—urge Congress to prioritize the following OAA services.

Perpetually overlooked despite being one of the most valued sources of funding at the local program delivery level, **Title III B Supportive Services** provides states and local agencies with flexible funding to provide a wide range of needed supportive services to older Americans.

Years of eroded funding has resulted in local agencies losing ground in their ability to provide critical Title III B supportive services, which include in-home services for frail older adults, senior transportation programs, information and referral/assistance services, case management, home modification and repair, chore services, and emergency/disaster response efforts.

Furthermore, inadequate funding for Title III B supportive services undermines the ability of AAAs to facilitate access to other core OAA programs, such as providing older adults with transportation to congregate meals sites. The critical flexibility of this funding stream gives AAAs greater means to meet the needs of older adults, as identified at the community level, and often is vital to keeping seniors from needing expensive nursing home care—which usually leads to their impoverishment and subsequent need to rely on Medicaid to meet critical health care needs.

*As the demand for and cost of providing services grows significantly each year along with the growth in the population of older adults, we call on Congress to, at a minimum, fund Title III B at the amount authorized in the recent bipartisan OAA reauthorization proposal, \$437 million, which would reflect a 12 percent funding increase in FY 2021.*

**Title VI Native American aging programs** are a primary authority for funding aging services in Indian Country, where elders are the most economically disadvantaged in the nation. We encourage lawmakers to build on their FY 2020 recommendations by increasing Title VI appropriations levels given the current and future needs of American Indian elders and the years of insufficient growth in funding to meet escalating need. Fortunately, it does not require much additional funding to begin this process, given the small size of these programs, *so we urge Congress to boost funding for Title VI Part A (nutrition and supportive services) and Part C (family caregiver support) in FY 2021 by at least 20 percent.*

The **National Family Caregiver Support Program** (NFCSP, Title III E) funds programs offered locally by AAAs that assist older caregivers and family members caring for older loved ones. The NFCSP offers a range of in-demand supports to family caregivers in every community. Unpaid family caregivers annually provide more than \$470 billion in uncompensated care<sup>16</sup>—an amount that rivals the entire federal Medicaid budget.<sup>17</sup>

Steady and sustained increases for these modest federal programs that support the 40 million caregivers for people age 65 and older<sup>18</sup> could prevent billions in more expensive institutional care costs being borne by taxpayers.

*For FY 2021, we encourage Congress to, at a minimum, fund the National Family Caregiver Support Program at the amount authorized in the recent bipartisan OAA reauthorization proposal, \$206 million, which would reflect an 11 percent funding increase for the only national program supporting family caregivers who provide the lion's share of long-term care in this country.*



## Other Appropriations Priorities

n4a also believes the following appropriation actions for FY 2021 are critical to build and sustain a comprehensive home and community-based services system that can meet the needs of the growing older adult population while preventing unnecessary medical expenditures and costly institutionalization.

### Evidence-Based Prevention and Wellness

Community interventions are proven tools that our nation has used to improve health outcomes and reduce costs. These programs have been rigorously evaluated to ensure that they improve the health and well-being of—or reduce the incidence of disease, disability and/or injury among—older adults.<sup>19</sup>

Supporting existing—and developing new—evidence-based prevention and wellness programs for older adults is imperative, given the nation's aging population and growing rates of chronic disease. More than 80 percent of Americans age 65 and older have more than one chronic condition.<sup>20</sup> Costs, both in terms of health care dollars and disability rates, are staggering. For all ages, health care spending on all chronic disease was \$1.1 trillion in 2016, and the total cost to the economy was an estimated \$3.7 trillion (20 percent of GDP).<sup>21</sup> Among older adults,

chronic conditions account for nearly 95 percent of health care expenditures<sup>22</sup> and limit the activities of millions of people, decreasing their productivity and ability to live independently.

Congress and the Administration should protect and expand evidence-based programs, specifically:

**Older Americans Act Title III D:** This subtitle of the OAA delivers evidence-based health promotion and disease prevention programs to prevent or better manage the conditions that most affect quality of life, drive up health care costs and reduce an older adult's ability to live independently. Commonly used interventions address the risk of falls, chronic diseases, mental health and medication management. *However, at less than \$25 million, appropriations for Title III D are woefully inadequate and should be increased significantly in FY 2021—at minimum, a 13 percent increase to reflect authorizers' recent recommendation.*

**Chronic Disease and Falls Programs:** n4a urges Congress to protect funding for the Chronic Disease Self-Management Program (CDSMP) and falls prevention efforts administered through the U.S. Administration for Community Living (ACL) but implemented locally. The Prevention and Public Health Fund currently provides the funding, \$8 million and \$5 million respectively, for these





## National Aging and Disability Transportation Center

Transportation is one of the most pressing needs for older adults who live at home and in the community, and yet it can be extremely difficult for older adults to find reliable, accessible and affordable options to get to the doctor, the grocery store, religious services or social events—all of which are critical to staying healthy, engaged and independent.

Appropriators should ensure that the FY 2021 Department of Transportation appropriations bill includes at least \$5 million from the general fund for the Federal Transit Administration's (FTA) Technical Assistance and Standards Development Program. This program funds the National Aging and Disability Transportation Center (NADTC), a partnership between

successful programs, and we urge Congress to continue to grow these activities and resources. We must invest in preventing the diseases and injuries that are a main driver of health care costs, and Congress should look beyond discretionary appropriations to find other ways to increase investment in these approaches.

## State Health Insurance Assistance Programs

n4a requests that Congress increase funding for SHIPs in FY 2021 to meet the ever-growing need among Medicare beneficiaries for one-on-one unbiased assistance and personalized counseling. Administered by the ACL, and leveraging the work of highly trained volunteers, SHIPs play a critical role in ensuring that older adults and people with disabilities make informed decisions about their Medicare coverage and navigate the complicated and shifting landscape of Medicare choices. SHIP counseling assistance can save individual Medicare beneficiaries hundreds, or even thousands, of dollars every year.

SHIPs, which two-thirds of AAAs operate locally, help individuals whose complicated situations cannot be successfully addressed by 1.800.MEDICARE or [www.medicare.gov](http://www.medicare.gov), an important distinction.

*With 10,000 boomers becoming eligible for Medicare every day, n4a calls on Congress to increase SHIP funding to at least \$70 million to reflect the increasing number of clients and the growing complexity of Medicare.*

n4a and Easterseals that provides technical assistance, education and support to the aging, disability and transit communities to increase the availability and accessibility of transportation options that address the mobility needs of older adults and people with disabilities. (For our recommendations for the surface transportation reauthorization due in 2020, see page 8.)

## Elder Justice

Financial exploitation and elder abuse cost taxpayers and victims billions of dollars annually. (See page 9 for details.) n4a urges Congress to increase the existing funding for the Elder Justice Initiative at ACL, which focuses on Adult Protective Services, to \$17 million. Additionally, **Title VII of the OAA**, which works to prevent elder abuse and provides ombudsmen to residents of long-term care facilities, should be increased by at least 10 percent.

## Gap-Filling Block Grants

Local agencies rely upon myriad funding streams to successfully implement aging programs, including several federal block grants that serve older adults at risk of hunger, abuse, unsafe living conditions and unnecessary institutionalization. n4a supports at least sustained funding at FY 2020 levels for the Social Services Block Grant (\$1.7 billion), Community Services Block Grant (\$740 million), Low-Income Home Energy Assistance Program (\$3.74 billion), Community Development Block Grant (\$3.425 billion) and Senior Corps (\$221 million).