March 30, 2016

The Honorable Roy Blunt, Chair  
The Honorable Patty Murray, Ranking Member  
Senate Appropriations Subcommittee on Labor/HHS/Education  
Washington, DC  20510  

The Honorable Tom Cole, Chair  
The Honorable Rosa DeLauro, Ranking Member  
House Appropriations Subcommittee on Labor/HHS/Education  
Washington, DC  20515  

Dear Chairman Blunt, Ranking Member Murray, Chairman Cole and Ranking Member DeLauro:  

As your Subcommittees consider the FY 2017 Labor/HHS/Education appropriations in the coming months, the National Association of Area Agencies on Aging (n4a), which represents the country’s 622 Area Agencies on Aging (AAAs) and more than 250 Title VI Native American aging programs, urges you to prioritize programs that help older Americans get the support they need to age successfully at home and in their communities. The dramatic growth in the number of older individuals in the U.S. means that support services for seniors are more important than ever. To this end, we urge you to:  

- **Restore eroded funding to at least FY 2010 levels for all Older Americans Act (OAA) programs**, but in particular the following titles, which have had little to no relief from sequestration:  
  - Title III B Supportive Services  
  - Title III E National Family Caregiver Support Program  
  - Title VII State Long-Term Care Ombudsman Program  
- **Continue to build on last year’s long-overdue investment in Title VI Grants for Native American Aging Programs** with increased funding, a little of which can go a long way in serving these vulnerable and disadvantaged elders.  
- **Continue development of Aging and Disability Resource Centers (ADRCs)**. We support the President’s budget request of $8.1 million to continue the national development of ADRCs, which are “no wrong door” networks that help consumers access long-term services and supports.
n4a fully understands the economic realities facing governments and families. We support sound federal budget decision-making that values key domestic programs to support our growing aging population, and we believe that this investment is in the best interest of all Americans.

n4a recognizes that the Budget Control Act of 2011 and subsequent budget deals have left appropriators to handle the tough decisions with little room for growth, but given the cost-saving and health-promoting potential of the following OAA and other discretionary programs, we endorse the following appropriation levels for fiscal year (FY) 2017 to support older Americans and their caregivers.

**Older Americans Act (OAA)**

The OAA is the cornerstone of the nation’s non-Medicaid home and community-based services (HCBS) system, providing older adults with much-needed supports, including in-home care, congregate and home-delivered meals, adult day care, information and referral assistance, case management, transportation, legal services and caregiver support/respite. These services are in high demand in every community, but have very limited federal resources.

For years, OAA funding has not kept pace with inflation or the growing population eligible for services, which has made it increasingly difficult for the Aging Network to even maintain existing services, let alone meet escalating need. In fact, just to keep pace with inflation and maintain purchasing power over the last 12 years, funding for OAA should have increased by $330 million, or 17 percent. These calculations don’t account for a growing population, which increases by thousands each day.

As a result, waiting lists are long and growing longer—in some cases seniors must wait as long as six months or more just for home-delivered meal services. This dire situation only intensifies the need for federal investment, both in the short and long term. Finally, it is important to note that these vital discretionary programs help offset mandatory spending—when seniors are healthier, Medicare saves money; when frail older adults receive in-home services that prevent or delay nursing home admission, Medicaid saves money.

n4a supports restoring all OAA programs to at least pre-sequestration FY 2010 funding levels and encourages appropriators to give special attention to four OAA programs: **Title III B Supportive Services, Title VI Grants for Native Americans, Title III E National Family Caregiver Support Program and Title VII State Long-Term Care Ombudsman Program.**

**Title III B Supportive Services** provides flexible funding to states and local agencies to deliver a wide range of needed supportive services to older Americans. Title III B dollars, for example, support in-home services for frail older adults, senior transportation programs, information and referral/assistance services, case management services, home modification and other housing help, chore services, and emergency/disaster response efforts targeted to older adults. The 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 near-
low-income seniors from impoverishment and subsequent Medicaid eligibility.

Yet III B remains funded at FY 2004 levels—there has been no restoration to III B of the FY 2013 sequester cuts or other cuts in recent years, even as other OAA programs have seen modest gains. This oversight causes tremendous strain on local agencies and providers struggling to keep these services, and the seniors they help, afloat. This type of imbalance between programs can erode the strength, efficiency and effectiveness of the OAA service delivery network, compromising the seamless, person-centered approach and putting seniors at risk. Furthermore, with inadequate III B funding, access to other OAA programs and services is jeopardized. For example, without sufficient funds to provide transportation services, funded through OAA Title III B, seniors may be left without rides to congregate meal sites, resulting in poorer nutrition and increased isolation.

Accordingly, n4a requests Congress restore III B Supportive Services to its FY 2010 level of $368 million. At a minimum, n4a supports the President’s recommendation of a $10 million increase in FY 2017, a modest, but very necessary, 3 percent increase.

The increases provided in FY 2016 for the Title VI Grants to Indians (Native American aging programs), Parts A (meals, supportive services) and C (caregivers) are very much appreciated. OAA provides the primary authority for funding services to elders in Indian country, and older American Indians are the most economically disadvantaged elders in the nation. But, even with the recent increases, Title VI funding levels remain woefully inadequate to meet the needs of Indian elders, as decades of underinvestment in these programs has created large gaps in service capacity. Without continued investment, tribes cannot hope to remedy the many challenges faced by their vulnerable elder population.

n4a urges increases for Title VI Part A and C in FY 2017, recognizing the incredible need among Indian elders and the ability of Congress to make a sizeable change in the capacity of these programs with just a few million dollars.

The National Family Caregiver Support Program (NFCSP) was added to the OAA as Title III E in 2000 and funds programs offered at the community level through the Aging Network and its partners. The programs assist family members caring for older loved ones who are ill or who have disabilities. The NFCSP offers a range of supports to family caregivers, including information about services; assistance in gaining access to services; counseling, support groups, and caregiver training; respite care; and supplemental services as funding allows. These services are in high demand in every community.

We appreciate the modest increase of $5 million (3.4 percent) for the National Family Caregiver Support Program in FY 2016, and encourage lawmakers in FY 2017 to, at a minimum, fully restore III E services to FY 2010 levels.

The State Long-Term Care Ombudsman Program (Title VII) advocates for residents of long-term care facilities in order to resolve quality of life and care problems, including abuse, neglect and exploitation. Ombudsman representatives protect residents’ rights and
improve the long-term supports and services system by giving voice to the problems of residents of nursing homes, assisted living, and board and care facilities. The network has nearly 9,000 volunteers and more than 1,000 paid staff certified to resolve complaints. Many local ombudsman programs (working under the state-level Ombudsman) reside at the AAA or otherwise coordinate with the AAA. The demand for ombudsman services is growing, yet along with OAA III B, the Ombudsman program has not yet received any restoration from the FY 2013 sequester and other budget cuts.

We ask you to restore Ombudsman funding to at least $21.8 million (FY 2010 level) to ensure that these critical and largely volunteer-led efforts to protect residents’ rights continue.

n4a also believes the following appropriation actions for FY 2017 are critical to building and maintaining a comprehensive HCBS system that can meet the needs of the growing older adult population. All of the following programs are administered by the Administration for Community Living, HHS.

Aging and Disability Resource Centers (ADRCs)

n4a appreciates the President’s request of an additional $2 million in discretionary funding for Aging and Disability Resource Center (ADRC) work. We encourage Congress to, at a minimum, increase the current $6.1 million investment in the ADRC network to meet the President’s request. The ADRC network was created with a vision to facilitate and streamline access to public and private long-term services and supports (LTSS) options for older adults, people with disabilities and caregivers across the country. This ambitious and important goal to build an integrated, robust network of information, referral and even enrollment assistance in every state remains of critical importance. ADRC systems not only streamline access to LTSS, they also use taxpayer dollars more efficiently by diverting older adults and individuals with disabilities from the most costly forms of care including institutionalization and hospitalization.

State Health Insurance Assistance Programs (SHIPs)

n4a requests that Congress increase funding for the State Health Insurance Assistance Programs (SHIPs) in FY 2017 to meet the ever-growing need to provide one-on-one assistance and counseling on Medicare to beneficiaries at the community level. Now administered by ACL, the SHIP program received $52.1 million in FY 2016. Two-thirds of local SHIPs are operated through AAAs. SHIP programs, which rely heavily on trained volunteers, play a critical role in ensuring that that older adults and people with disabilities make informed decisions about their Medicare coverage—including selecting among supplemental Medigap plans, Medicare Advantage (MA) plans and Part D prescription drug plans—and navigate the shifting landscape of Medicare choices (e.g., managed care demonstrations). With 10,000 boomers becoming eligible for Medicare every day, Congress needs to increase SHIP funding to at least $66.6 million reflect this increasing volume and complexity.
Prevention and Public Health Fund

n4a supports the Administration’s FY 2017 proposal to allocate at least $8 million in funding from the Prevention and Public Health Fund (PPHF) to ACL for the Chronic Disease Self-Management Program. Additionally, we support the allocation of at least $5 million to ACL for falls prevention activities.

Elder Justice Act / Adult Protective Services

The Elder Justice Act (EJA) of 2010 would implement a comprehensive national strategy to address elder abuse, neglect and exploitation and is authorized at $777 million. If adequately funded, EJA would enhance training, recruitment and staffing in long-term care facilities and enhance state adult protective service systems, long-term care ombudsman programs and law enforcement practices. n4a appreciates that Congress doubled funding to $8 million for this crucial work in FY 2016 and supports the President’s FY 2017 request for an additional $2 million in EJA funding.

While we understand the difficult fiscal constraints under which you are operating, we hope you will make every effort in FY 2017 to prevent the erosion of, and reinforce commitment to, innovative, efficient and cost-effective programs that enable older Americans to live at home and in their communities for as long as possible. Thank you.

Sincerely,

Sandy Markwood
Chief Executive Officer

cc:
Chairman Thad Cochran, Senate Appropriations Committee
Ranking Minority Member Barbara Mikulski, Senate Appropriations Committee
Chairman Harold Rodgers, House Appropriations Committee
Ranking Minority Member Nita Lowey, House Appropriations Committee
Members of the House and Senate Labor/HHS/Education Subcommittees