



**Charting the Course: Federal Aging
Policy Insights and USAgging's
Priorities**

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Policy Priorities 2023

Promote the Health, Security and Well-Being of Older Adults

USAging

Leaders in Aging Well at Home



Support

**Aging Well at Home
by Investing in Older
Americans Act Programs
and Services**

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Leaders in Aging Well at Home

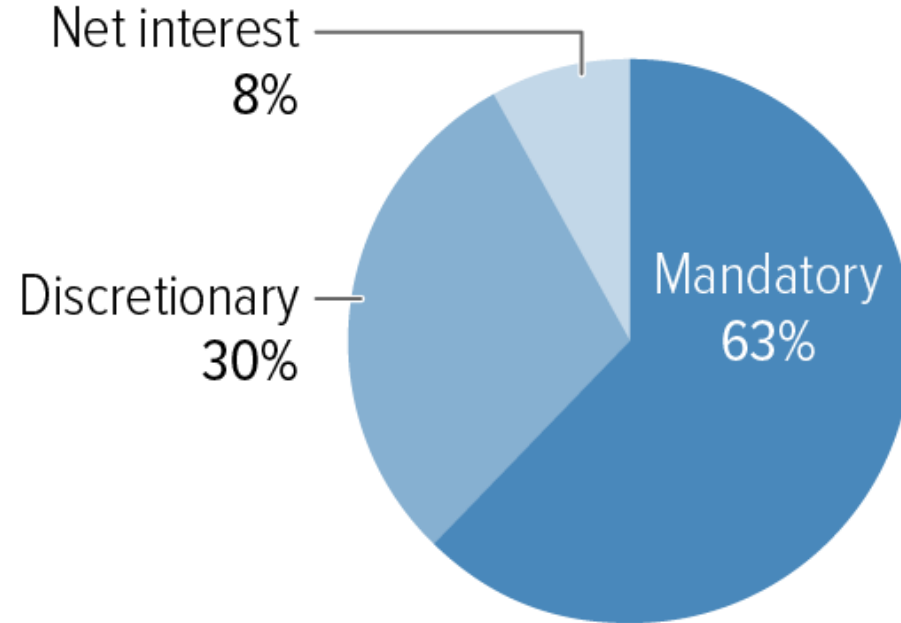


Mandatory vs. Discretionary Programs

- **Mandatory:** *spending is automatic, infrequently amended*
 - Social Security
 - Medicare
 - Medicaid (federal-state)
 - SNAP
- **Discretionary programs:** *spending is allocated annually by appropriators; authority is updated every few years through separate authorization committees if required*
 - Older Americans Act
 - Low-income housing (Sec. 202)
 - Medicare State Health Insurance Assistance Programs (SHIPs)

Most of the Federal Budget = Social Security and Major Health Programs (Mandatory Spending)

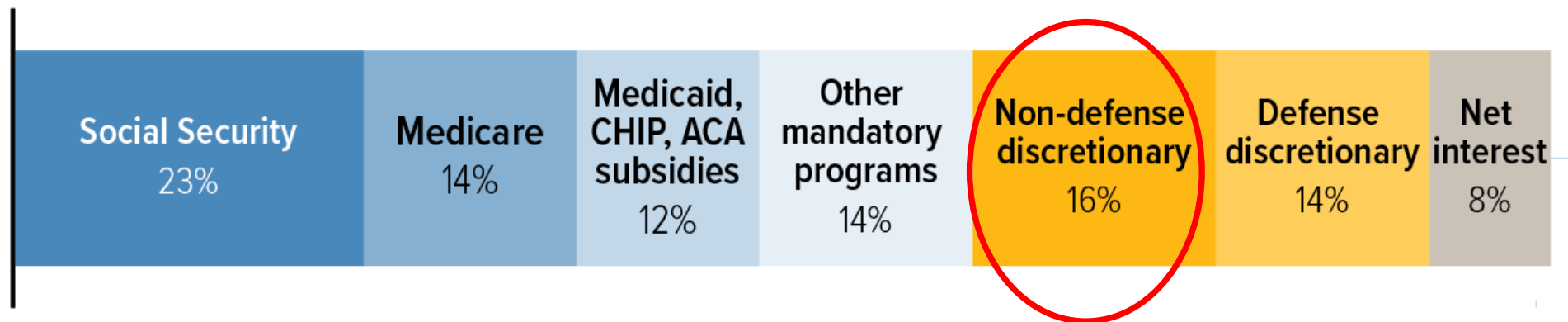
Types of Federal Spending, Fiscal Year 2023



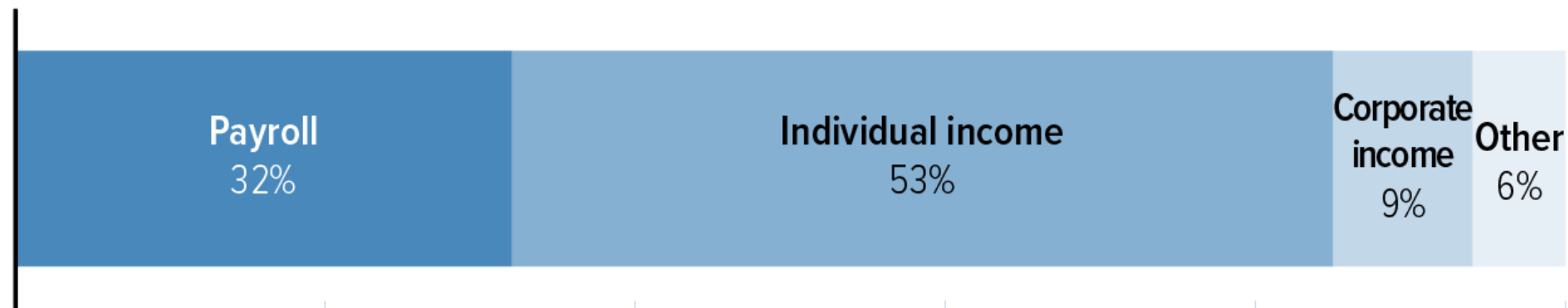
Note: Does not add to 100 percent due to rounding.

Source: Congressional Budget Office

Components of Federal Spending



Components of Federal Tax Revenue



Note: "CHIP" = Children's Health Insurance Plan. "ACA" = Affordable Care Act. "Other" includes excise, customs duties, and more. Data are for fiscal year 2023 and do not add to 100 percent due to rounding.

Source: Congressional Budget Office

USAgging Older Americans Act Top Funding Priorities

- Title III B Supportive Services
- Title III E National Family Caregiver Support Program
- Title VI Native American Aging Programs

➡ Calling for a doubling of these essential programs that have been long underfunded.

➡ Also support increasing funding for *all* titles!

President's FY 2024 Budget

- **Title III B** Supportive Services: 22% increase
- **Title III E** National Family Caregiver Support Program: 20% increase
- **Title VI** Native American Aging Programs: nearly doubling of Part A, 32% for Part C
- **Title III C** Nutrition: overall ~20 percent increase; but 41% C1 congregate, 12% increase C2 home-delivered, then NSIP cut 30%
- **Title III D** Evidence-Based Health and Wellness Programs: 0.2% increase

Debt Ceiling Deal

- Pauses the existing debt limit through January 2025 (not a rise of the ceiling, but a pausing on the \$31.4 billion ceiling previous Congresses enacted)
- **Cuts \$1 trillion over 10 years (projected) but it all comes from a portion of NDD funding**
- Caps amount to frozen topline number this coming fiscal year and only 1% growth for FY 2025—not remotely what is needed to keep up with inflation or population!

Senate Labor-HHS Appropriations Bill

- End of July, the Senate Appropriations Committee advanced its FY 2024 Labor HHS Education appropriations bill.
- Mostly level funding, small increases in some programs
- Earlier in July, the House marked up its Labor HHS measure but didn't release the numbers!
- So here's what we know...

FY 2020-2024 Labor/HHS Appropriations
 As of July 28, 2023 (Dollars in thousands)
 Increases over prior year final funding are noted in **BOLD**. Decreases are noted in *italics*.
 Funding from mandatory sources in blue; PPHF = Prevention and Public Health Fund.

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| Older Americans Act and Other Key Aging Programs | FY 2020 Final Enacted Dec. 2019 | FY 2021 Final Enacted Dec. 2020 | FY 2022 Final Enacted March 2022 | FY 2023 Final Enacted Dec. 2022 | FY 2024 President's Budget March 2023 | FY 2024 USAGING TOP PRIORITIES ONLY | FY 2024 Senate Full Committee 7.27.23 |
|---|---------------------------------|---------------------------------|----------------------------------|---------------------------------|---------------------------------------|-------------------------------------|---------------------------------------|
| Title III | | | | | | | |
| B: Supportive Services & Centers | 390,074 | 392,574 | 398,574 | 410,000 | 500,000 | 820,000 | 410,000 |
| C1: Congregate Meals | 510,342 | 515,342 | 515,342 | 540,342 | 762,050 | | 565,342 |
| C2: Home-Delivered Meals | 266,342 | 276,342 | 291,342 | 366,342 | 410,335 | | 361,342 |
| Nutrition Services Incentive Program | 160,069 | 160,069 | 160,069 | 160,069 | 112,000 | | 112,000 |
| D: Preventive Health | 24,848 | 24,848 | 24,848 | 26,339 | 26,399 | | 26,339 |
| E: Family Caregivers Support | 185,936 | 188,936 | 193,936 | 205,000 | 249,936 | 410,000 | 210,000 |
| Title V SCSSEP (Dept of Labor) | 405,000 | 405,000 | 405,000 | 405,000 | 405,000 | | 405,000 |
| Title VI | | | | | | | |
| A: Grants to Indians | 34,708 | 35,208 | 36,264 | 36,264 | 70,208 | 76,528 | 38,264 |
| C: Native American Caregivers | 10,306 | 10,806 | 11,306 | 12,000 | 15,806 | 24,000 | 12,000 |
| Title VII | | | | | | | |
| Ombudsman/Elder Abuse | 22,658 | 23,658 | 24,658 | 26,658 | 27,000 | | 26,658 |
| Elder Rights Support Activities plus AFS/Elder Justice Initiative | 13,874 | 17,874 | 18,874 | 33,874 | 73,000 | | 33,874 |
| Title II | | | | | | | |
| Aging Network Support Activities (incl. Eldercare Locator) | 12,461 | 16,461 | 18,461 | 30,461 | 40,000 | | 30,461 |
| Aging & Disability Resource Centers | 8,119 | 8,119 | 8,119 | 8,119 | 10,000 | | 8,619 |
| Program Administration | 41,063 | 41,063 | 42,063 | 47,063 | 63,859 | | 47,813 |
| Research, Demo & Eval | | | | 5,000 | 5,000 | 10,000 | 0 |
| Other AoA/ACL Programs | | | | | | | |
| State Health Insurance Asst. Program | 52,115 | 52,115 | 53,115 | 55,242 | 55,242 | | 55,242 |
| Community Care Corps | n/a | 4,000 | 4,000 | 5,500 | 5,500 | | 0 |
| Chronic Disease Self-Management Program | 8,000 (PPHF) | 8,000 (PPHF) | 8,000 (PPHF) | 8,000 (PPHF) | 8,000 (PPHF) | | 8,000 (PPHF) |
| Alzheimer's Disease Program Initiative | 26,500 (incl PPHF) | 27,500 (incl PPHF) | 29,500 (incl PPHF) | | 31,500 (incl PPHF) | | 33,500 (incl PPHF) |
| Elder Falls Prevention | 5,000 (PPHF) | 5,000 (PPHF) | 5,000 (PPHF) | 7,500 (incl 5,000 PPHF) | 10,000 (incl 5,000 PPHF) | | 12,500 (incl 5,000 PPHF) |
| Lifespan Respite Care | 6,110 | 7,110 | 8,110 | 10,000 | 14,230 | | 11,500 |
| Senior Medicare Patrol | 18,000 (HCFAC) | 18,000 (HCFAC) | | | 35,000 (HCFAC) | | 35,000 (HCFAC) |
| Other HHS Programs | | | | | | | |
| Social Services Block Grant | 1,700,000 | 1,700,000 | 1,700,000 | 1,700,000 | 1,700,000 | | 1,700,000 |
| Community Services Block Grant | 740,000 | 745,000 | 755,000 | 804,383 | 770,000 | | 765,000 |
| LIHEAP: Low-Income Home Energy Assistance | 3,740,304 | 3,750,304 | 3,800,304 | 4,000,000 | 4,100,000 | | 4,075,000 |
| CWCS: AmeriCorps Senior | 221,184 | 224,184 | 230,768 | 236,917 | 262,000 | | 236,917 |

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Senate FY 2024 Labor/HHS

- **Title III B** Supportive Services: Level funded
- **Title III E** National Family Caregiver Support Program: \$5 million increase for demos/RAISE, not formula \$
- **Title VI** Native American Aging Programs: nearly doubling of Part A, 32% for Part C
- **Title III C** Nutrition: +\$25 million boost for C1 congregate, \$11 million boost to C2 home-delivered, then NSIP cut 30% as President's budget suggested
- **Title III D** Evidence-Based Health and Wellness Programs: Level funded

Next Steps on FY 2024

- **Fiscal Year 2024 began October 1 after near shutdown**
- CR runs through November 17, 2023
- Only 1 bill of 12 has passed even one chamber
- High-level bipartisan negotiations are next step but the House's intraparty drama has derailed everything
- Congress still has to agree on an overall spending level if different than the bipartisan May deal that averted a default, then hammer out the details between Senate and House bills on every line item!

Forecast Foggy

- Who is going to be Speaker?
- What promises will they make about the spending bills to gain enough support?
- Will Rebel Republicans still insist on passing all bills on the floor vs using a CR or an omnibus?
- Even if the House achieved that by Nov. 17, nothing they pass will survive the Senate
- A new shutdown clock begins...
- This could go into 2024 *calendar* year

Advocacy Needed

- USAging *Advocacy Alert* coming soon!
- Push for increases, but goal is now to PROTECT current funding levels, as there are a lot of ways this goes badly:
 - Year-Long CR at FY 2023 levels
 - Across-the-board cuts in CR(s)
 - Across-the-board cuts in final spending bills
 - We aren't loud enough and OAA takes a hit in final negotiations



OAA Regulations

2023 Proposed OAA Regulations

- Title III and VI updated in 1988; Title VII Ombudsman updated this decade
- ACL's Notice of Proposed Rulemaking published June 16 with comments due August 15
- *Thank you for filling out our survey!*
- It informed our 25-page comment letter (www.usaging.org/advocacy)
- We expect a final rule very end of this year, early next

Top Issues

States have great flexibility on what the policies and procedures will be.

- A potential liability for AAAs if SUA overreach
- Will require tremendous AAA-SUA engagement post-regulation finalization
- We pushed for AAA participation wherever we could

Note: USAging positions/comments in purple

Top Issues

Contracting/commercial relationships: [1321.9(c)(2)(xiv)]

- A too-strict interpretation of “approval to establish contracts” could disrupt current successes and relationships
- Sec. 306(g) says no restrictions, but Sec. 212 raises state approval language
- The reg tells states to develop a policy for AAAs and service providers to receive “approval to establish contracts and comm. relationships and participate in activities related to contracts and comm. relationships.”

Top Issues

Contracting/commercial relationships: [1321.9(c)(2)(xiv)]

- We assert this should not be applied when no OAA funds are used
- When OAA funds are used, we also are pushing for the lightest possible touch on a blanket approval process
- For consistency of our argument that SUAs should not have this authority if outside of OAA, we do not believe it should be in the area plan

Example of USAging Edit

- (xiv) Contracts and Commercial Relationships. The State agency shall maintain requirements for contracts and commercial **relationships that are, in part or full, supported by OAA funding**, where: (A) State agencies, area agencies on aging, and service providers may enter into contracts and commercial relationships, subject to State and/or area agency policies and procedures and guidance as set forth by the Assistant Secretary for Aging, including through:

Example of USAging Edit

- (C) The State agency shall, through the area plan or other process, develop policies and procedures for area agencies on aging and service providers to receive **blanket** approval to establish contracts and commercial relationships and participate in activities related to contracts and commercial relationships **when such contracts and relationships are supported by OAA funding**; such policies and procedures around blanket approval should not be onerous, impede or cause undue delays in securing such contracts or engaging in contracting relationships;

Top Issues

Contracting/commercial relationships: [1321.9(c)(2)(xiv)]

- Lots of support from Aging Network, health plans for our position, so possible ACL will adjust their position, if not likely
- Hoping to find some common ground with ADvancing States this fall with ACL's subregulatory guidance in mind
- Already having seed-planting Hill conversations about fixing this for good in 2024

Top Issues

Nutrition flexibilities:

- III C1 congregate: limited funding (20 percent) may be used for “shelf-stable, pick-up, carry-out, drive-through and similar meals” under certain circumstances
- State decides to offer; if they do, must be statewide
- We urged increase to 25%
- Asked for AAA ability to offer this option even if not statewide; asked for lighter documentation

Top Issues

Nutrition flexibilities:

- Clarifies that HDM may also be provided via pick-up, carry-out or drive-through
- Eligibility for HDM is not limited to those identified as homebound, and an HDM client may also be encouraged to attend congregate activities
- **We supported both changes:** “We trust AAAs will continue to be judicious and thoughtful as they prioritize those most in need of services and adjust to local resources and conditions. The limited funding available for all OAA services should not be a justification for overly strict guidelines that do not reflect the roles of AAAs to determine local needs and leverage local resources to meet those needs.”
- We thanked them for clarifying transfer limits per AAA

Top Issues

- **Legal Services and Guardianship**
 - Framed as a serious COI
 - For significant minority of AAAs, the guardianship role is dictated or necessary as a last resort
 - We believe no irremediable COI
 - Legal services: Generally supported with above exception, but did raise concerns about the rigor of the regs and impact on smaller/rural/under-resourced AAAs, and objected to the pre-screening language

Top Issues

- **Long-Term Care Ombudsman Program and APS,** perceived COI
 - COI is remediable
- **III B Legal Services and APS,** perceived COI
 - COI is remediable
- **Non-Federal Share (Match)**
 - Should not be limited to non-means-tested program dollars
- **Cost-Sharing**
 - Should be allowed by individual AAAs



OAA Reauthorization

2024 Opportunity: OAA Reauthorization

- Expires at the end of FY 2024, which is Sept. 30, 2024
- Congress will get engaged in 2024, timing depending on motivations of Members/staff
- New leadership: Sen. Bernie Sanders & Repub. Ranking Member Sen. Bill Cassidy, LA (Senate HELP), Sen. Mike Braun, IN (Senate Aging RMM), new Chair Rep. Virginia Foxx, NC (House Education and Workforce)
- **Next Steps:** educate your Members about how OAA works

2024 Opportunity: OAA Reauthorization

- Only one congressional Ohioan involved in OAA reauthorization: Senator J.D. Vance (R-OH) is on Senate Aging Committee, but all MoCs important
- USAging Survey for AAA/Title VI directors in field until 10/31!
 - III C Nutrition unification?
 - Contracting fix!
 - Legal services and guardianship
 - Other flexibilities
 - Administrative percentage
 - Technical assistance on social isolation
 - Title VI Native American Aging Programs
 - What did we miss?

Recognize

and Support Caregivers

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Family Caregivers in Crisis

RAISE Caregivers and Next Steps

- National Strategy released Sept. 2022 with 300+ actions for agencies, states, employers and CBOs
- ACT on RAISE (NAC; goal is to push implementation; USAging is steering committee member)
- What can you do locally? United as AAAs across the state? With the SUA?
- What's percolating statewide from other quarters? Get involved!
- Keep advocating with Congress for resources. FY 2024 approps campaign tools on www.usaging.org.

Executive Order

- President Biden's Executive Order, April 18
- All ages: childcare, all settings of long-term services and supports
- Directs agencies to improve policies to support workers in direct care settings as well as family caregivers
- Encourages states to boost the HCBS workforce, for agencies to support better wages and benefits, to expand veterans HCBS care, improve access to HCBS, access to behavioral health for direct care workers, to consider caregiver supports in CMS demos...



CMS 2024 Medicare Physician Fee Schedule Proposed Rule

- The proposed rule announces rate updates, advances health equity and expands access to critical medical services; comments were due Sept. 11.
- **CMS is proposing to pay for certain caregiver training services in specified circumstances**
- CMS also included a section on Community Health Integration in which they encouraged partnerships with AAAs to help address identified social needs

Connect

**Health Care and Aging
Sectors to Improve Care
and Reduce Costs**



AAAs Are Contracting With Health Care

- 47 percent of AAAs reported health care contracts in Aging and Disability Business Institute's 2021 RFI
- Since 2017, the proportion of AAAs that report contracting as part of a network of community-based organizations has doubled.
 - 2017: 22%
 - 2021: 44%

CMS 2024 Medicare Physician Fee Schedule Proposed Rule

- The proposed rule announces rate updates, advances health equity, and expands access to critical medical services; comments were due Sept. 11.
- **CMS also included a section on Community Health Integration in which they encouraged ACO partnerships with CBOs to help address health-related social needs (HRSNs).**
- Read USAging's letter: usaging.org/advocacy

USAgging Key Areas of Feedback

- Role of AAAs in addressing health-related social needs
 - The most effective way for the health system to address HRSNs is through contracting with social care entities
- Principal illness navigation services
 - Highlighted AAAs involvement in CMS' Community-Based Care Transition Program (CCTP)
- Payment for caregiver training services
- Medicare Part B payment for services involving community health workers

House Budget Committee RFI

- Health Care Task Force to look for health care savings, improved outcomes
- USAging answered Committee's RFI on Oct. 15
- Highlighted AAAs role, importance of caregivers, investments in workforce
- Find our response:
<https://usaging.org/currentissuesandresources>

Forecast

- Appropriations advocacy, Continuing Resolution (All Fall)
- USAging OAA reauth prep/feedback (October)
- Educate MoCs on OAA, range of what you do! (All Fall)
- Holiday-time bill on spending? Or punt to 2024?
- 2024 will start strong on OAA reauth

Advocates Prep List, 2023-2024

- Get re/connected to your elected officials now!
- Get your data and stories ready
- Seize all opportunities to create a champion
- Tap your new allies to echo your messages
- Stay tuned to USAging *Advocacy Alerts* and keep us tuned in to what you are doing (and want us to do)!
- Buckle your seatbelts....

Join us for the next Aging Policy Briefing & Capitol Hill Day!

March 12-13, 2024

Learn more at www.usaging.org/apb

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49TH ANNUAL CONFERENCE & TRADESHOW

Save the Date!

Tampa

JULY 8-11 | 2024



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