



April 5, 2010

The Honorable Kathy Greenlee
 Assistant Secretary
 Administration on Aging
 Washington, DC 20201

Dear Assistant Secretary Greenlee:

I write today on behalf of the National Association of State Units on Aging (NASUA), our members, and the seniors, family caregivers, and persons with disabilities they serve. We wish to share with you some preliminary ideas for modernizing the Older Americans Act (OAA) as you develop your proposal for its reauthorization in 2011.

President
 Irene B. Collins
 Alabama

First, we would like to thank you for hosting the listening sessions in Dallas, TX, Alexandria, VA, and San Francisco, CA. These sessions provided a venue to gather valuable public input about the OAA and its reauthorization, and it allowed NASUA, through your assistance, the opportunity to host regional listening sessions with our own members.

Vice President
 James Toews
 Oregon

As you know, NASUA represents the 56 officially designated state and territorial agencies on aging that administer programs authorized in the OAA. Many of our members serve as the operating agency in their states for Medicaid home and community based services (HCBS) waivers that serve older adults, and in some cases, individuals with disabilities.

Treasurer
 Charles D. Johnson
 Illinois

Secretary
 Carol Sala
 Nevada

NASUA is excited by the OAA reauthorization and the opportunity it presents to modernize the Aging Network and empower older Americans to age with dignity in their homes and communities. We see this reauthorization as a key part of the strategy to rebalance the delivery of long term care from predominantly institutional settings to those in the home or community.

Immediate Past President
 Patricia A. Polansky
 New Jersey

As a collective body, our members will vote on the OAA reauthorization priorities this June, and from that meeting we expect to have a fully developed proposal for the reauthorization to present to Congress. In the interim, we wanted to share with you some of the issues of concern and ideas for modernization that emerged as a result of the listening session process.

Past President
 Kathy Leitch
 Washington

Recommendations

We believe the nexus of rebalancing the delivery of long term care should be the Aging Network established by the OAA. The OAA has played a key role in extending the period of time that seniors can remain independent in their homes, where they prefer to live, and avoid unnecessary,

premature and costly institutionalization. However, the scope of the OAA is vast and the investment in its mission has been severely underfunded. Providing today's seniors with the home and community based services, including affordable housing, transportation, and in-home supports, that are necessary to remain independent is an immense challenge. Compounding these issues is the economic crisis and its impact on seniors and the Aging Network. Our members have been pushed to the brink by increase demand for services coupled with fewer resources; fewer services are being delivered while waitlists grow, which almost certainly, leads to more seniors facing inappropriate, premature and unneeded institutional placement because a lack of basic core programs. With the first of the Baby Boom generation reaching the age of 65 in 2011, the time is ripe for Congress to act now and make a commitment to seniors. NASUA and its members believe the Aging Network is poised for mobilization to help our nation meet these challenges. To that end, NASUA suggests the following approaches to modernization through the reauthorization of the OAA:

Increasing Flexibility to Respond to Consumer-Driven Needs.

One of the top concerns we heard in our listening sessions was the call for increased flexibility and funding. Specifically, states report that they are having higher demand for home-delivered meals than they can provide leading to waiting lists in over 80 percent of the states. Several states are unable to address demands because of the limit on transferability under Title IIIC between congregate and home-delivered meals.

Recommendation: States should have increased flexibility in the distribution of the funding authorized for nutrition under Title IIIC so that area agencies on aging and state units on aging can more quickly and accurately respond to the needs of the most frail seniors who are home bound and in need of delivered meals.

The need for the long term care ombudsman program has expanded and encompasses more than first envisaged by the OAA. As an Aging Network, we aim to meet the needs and wants of consumers by rebalancing the delivery of long term care, from institutional settings to home and community based settings, and while the Long-Term Care Ombudsman program is woefully underfunded, no protections exist for consumers of home and community based care services. Moreover, the OAA does not authorize Ombudsman funding to be used to monitor and advocate for consumers of home and community based services; as a result, seniors are exposed to increased risks of deceptive practices and have no federally authorized advocate to improve consumer's care and quality of life in the home and community based setting.

Recommendation: NASUA recommends allowing the state the option to use ombudsman funding to serve individuals in home and community based settings, but not the requirement to do so. Modernizing the ombudsman program in this way would allow states to target those most at risk of abuse and neglect.

Modernizing Language and Objectives to Reflect Current and Future Realities

The Aging Network is poised to face expanding challenges from an exponentially larger older population with more complex needs. Accepting these challenges, the Network has focused its services on meeting the functional needs of its target population, older Americans, and at all times has sought to empower the consumer by adhering to their needs and preferences. The OAA must reflect this change by acknowledging the broader community the Aging Network serves, and it should enhance its ability to serve individuals of all ages and abilities in need of long term care planning.

Recommendation: NASUA recommends modernizing the OAA's objectives to ensure person-centered language and to better encompass the full scope of whom the Aging Network currently serves, which includes individuals of all ages and abilities in need of long term care planning.

Even before the first baby boomer turned 60 years old in 2006, national spending for long-term care, especially under Medicaid, was placing significant strain on federal and state resources. In 2008, there were already more than 52 million Americans over age 60. By 2020, almost one in six individuals will be age 65 and older. The fastest growing segment of the aging population is individuals over 85, the most vulnerable older adults who tend to need long-term care and whose numbers are expected to double by 2020. These demographic trends make our current strategy for financing long term care costs through the Medicaid and Medicare programs unsustainable. Conscious of the financial pressures facing states and the federal government, NASUA supports an incremental, coordinated national long-term care strategy that will generate savings in Medicaid and Medicare at the federal and state levels while enabling older adults and individuals with disabilities to get the support they need to successfully age where they want to—in their own home and community.

Recommendation: AoA, in cooperation with SUAs and AAAs, has been testing best practices in community-based long-term care that have been demonstrated to reduce the need for more expensive institutional care and prevent “spend down” to Medicaid for people of all ages with disabilities. NASUA recommends making permanent three demonstrations that have proven how the Aging Network effectively reduces hospitalizations and institutionalization and preserves the ability for seniors to age in their homes. These demonstrations include the Aging and Disability Resource Centers (ADRCs), the evidence-based health promotion and disease prevention programs such as the Chronic Disease Self Management Program (CDSMP), and AoA's nursing home diversion demonstration, the Community Living Program (CLP). This three-pronged approach will allow communities to provide services to this growing population at a lower cost to consumers and to Medicaid and Medicare.

These programs build on the historic role of State Units on Aging (SUAs), Area Agencies on Aging (AAAs) and Title VI Native American aging programs (Title VIs). Together, they are a comprehensive and integrated approach to enabling the elderly and individuals with disabilities to make their own

decisions, to take steps to manage their own health risks, and to receive the care they choose in order to remain in their own homes and communities for as long as possible, avoiding unnecessary and unwanted institutionalization. In order to be successful, these programs must be taken to scale and fully funded as a core service authorized by the OAA.

The Aging Network needs to streamline its administrative processes to ensure more funding is channeled towards direct services. Far too often, states are required to adhere to distinct administrative requirements for specific programs; as a result of these variations, states must divert limited funds to undertake ineffective processes.

Recommendation: NASUA recommends streamlining administrative processes to allow states the opportunity to standardize its processing of administrative matters. For instance, NASUA recommends adjusting the federal match to ensure that it is the same (15%) across all core programs and OAA grants, where match is applicable.

Fulfilling and Enhancing the role of the State Agencies on Aging as Outlined in the OAA

The Aging Network must evolve appropriately to serve the needs of the growing senior population, including moving to more sustainable, viable models of operation. To sustain and enhance our efforts to serve our target population, we must also modernize our planning and services and elevate the importance of the Aging Network by demonstrating the value we can bring to a market that will help to fiscally sustain our core mission of maintaining the independence of frail, vulnerable seniors while prohibiting abuse by financial and other predators.

Recommendation. NASUA's members are aware that underlying the need for support services are even more basic needs for shelter and transportation. NASUA supports enhancing the planning role of the states and area agencies on aging for the development of livable communities where older Americans and individuals with disabilities can lead a productive and sustainable lifestyles in their own homes for as long as possible.

Core programs, Title III and VII, are the center piece of the OAA; yet no federal resources are devoted to building the Aging Network's capacity to develop, expand, and promote integrated best practices at the state level. The OAA mandates a comprehensive and coordinated system that serves older individuals; however, outside the planning process, the different core programs operate in silos and miss opportunities to leverage resources and share their best practices across different programs.

Recommendation. NASUA recommends creating a National Center for Core Programs Peer to Peer Technical Assistance Center which would provide states with technical assistance that compliments the Technical Assistance they receive on state planning.

Older workers are a valuable resource for the 21st century workforce. The current economic slowdown has substantially increased the unemployment rate for older Americans; the unemployment rate for persons aged 55 and over has more than doubled over the past two years, and it is at the highest level since before World War II. Mitigating these trends is the Senior Community Service Employment Program (SCSEP), which aims to enhance employment opportunities for older Americans and promotes them as a solution for businesses seeking trained, qualified, and reliable employees. However, because of SCSEP's current network, which fails to promote state innovation and provide a forum for different states to share their best practices, the program is stagnated and has been able to capitalize on different innovative practices. Moreover, no organization exists to offer technical assistance about how to best serve and recruit participants, or anything centered on serving the aging population.

Recommendation. NASUA recommends establishing a National Technical Assistance and Resource Center for State SCSEP Programs under Title V.

We expect to have a more robust conversation over the next several months in advance of NASUA's June member meeting. NASUA looks forward to sharing with you our more specific requests once this process has played out.

Thank you again for eliciting NASUA's input. We look forward to your guidance and vision for the Aging Network and the excitement of the upcoming years in which the law will be examined.

Sincerely,



Martha Roherty
Executive Director