



601 E Street, NW | Washington, DC 20049
202-434-2277 | 1-888-OUR-AARP | 1-888-687-2277 | TTY: 1-877-434-7598
www.aarp.org | twitter: @aarp | facebook.com/aarp | youtube.com/aarp

April 30, 2019

The Honorable Rosa DeLauro
Subcommittee on Labor, Health
& Human Services
Committee on Appropriations
2358-B Rayburn House Office Building
U.S. House of Representatives
Washington, D.C. 20515

The Honorable Tom Cole
Subcommittee on Labor, Health
& Human Services
Committee on Appropriations
1016 Longworth House Office Building
U.S. House of Representatives
Washington, D.C. 20515

Dear Madam Chairwoman DeLauro and Ranking Member Cole:

AARP, on behalf of our nearly 38 million members and all older Americans nationwide, would like to express our concerns with respect to programs that are critical to the well-being of millions of older Americans as you prepare for markup of the Labor, Health & Human Services and Related Agencies Appropriations bill for FY 2020.

We truly appreciate the Committee's steadfast support of the many programs important to older Americans in the FY 2019 bill. However, we remain concerned regarding repeated proposals for elimination or deep reductions in spending in the Administration's budget request. We urge the Committee to continue to make smart investments in programs that help ensure older Americans and persons with disabilities can live independently with dignity as they age. We respectfully urge the following funding levels for programs we believe are most critical to the health and financial security of older Americans.

OLDER AMERICANS ACT (OAA)

AARP continues to strongly urge the Committee to reject proposed cuts that would undermine the health and well-being of seniors. These cost-effective investments serve the needs of older Americans while deferring or eliminating the need for costly institutionalization. Many of these older adults face economic and health challenges, making them more likely to need long-term services and supports (LTSS) to help them live independently. Three out of four older adults age 65 and older have multiple chronic conditions and at least one in seven seniors struggle with hunger.

FAMILY CAREGIVING (HHS/ACL)

AARP urges \$191.9 million for the National Family Caregiver Support Program (NFCSP) for FY 2020. NFCSP is effective in reducing caregiver burdens and in helping family caregivers to continue caregiving for longer. The recommended funding level is aligned with the growth in the 80-plus population and inflation. The number of Americans age 80 or older is projected to increase by 54 percent between 2019 and 2030, from about 13 million to about 20 million. This increased demand comes at a time when family caregivers will be less available and further stretched. The caregiver support ratio is expected to decline from nearly 6.5 to 1 today to just 4 to 1 over the next decade.

Additionally, AARP urges no less than \$10 million for the Lifespan Respite Care Program in FY 2020. Aging and Disability Resource Centers (ADRCs) provide streamlined access for consumers and family caregivers seeking one-on-one person-centered counseling as well as information and referral assistance about public and private options for LTSS. We request that you also include \$8.1 million for ADRCs to address their needs.

About 40 million family caregivers are the backbone of LTSS in this country, providing about \$470 billion annually in unpaid care to their loved ones and enabling them to live independently in their home and communities. Without family-provided help, the economic cost to the U.S. health and LTSS systems would skyrocket.

SUPPORTIVE SERVICES (HHS/ACL)

The supportive services provide part of the foundation of long-term services and supports that help older adults maintain their independence and dignity in the less costly environments of their homes and communities where they want to live. OAA supportive services can also help delay or prevent the need for individuals to receive Medicaid LTSS. Investing more in home-based supports will prevent unnecessary nursing home placement and poor management of nutritional and chronic health conditions. AARP urges no less than \$385 million for Title III supportive services.

Core formula grant programs currently reach more than one in six seniors, serving nearly a half million seniors in their own communities who meet the disability criteria for nursing home admission and helping to keep them from joining the 1.7 million seniors who live in institutional settings. Nationally, 24 percent of individuals age 60 and older live alone, and in FY 2017, 44 percent of OAA consumers were individuals who live alone.

NUTRITION SERVICES (HHS/ACL)

People receiving OAA services are at higher risk of nursing home placement than others in their age group. Without cost-effective intervention, institutional care costs will increase. A 2012 Brown University statistical analysis of 16,000 nursing homes concluded that states spending an additional \$25 per year per adult aged 65 and older on home-delivered meals could reduce their percentage of low-care nursing home residents by one percentage point, compared to the national average. And, cost data from home-delivered meal providers shows that they can feed a senior for an entire year for the same cost as a single day in the hospital. A 2018 report contracted by the Administration for Community Living (ACL) found that

congregate meal program participants had lower health care expenditures and were more able to remain living in their home compared with non-participants. AARP urges no less than \$964 million for Title III nutrition programs.

SENIOR COMMUNITY SERVICE EMPLOYMENT (DOL/SCSEP)

AARP strongly opposes the Administration's proposed elimination of SCSEP, and instead calls upon the Congress to restore funding to its pre-2008 recession level of \$600 million. SCSEP is unique in that it has a dual purpose: it is the only program to focus on building skills and employment opportunities for low-income older workers while also enhancing important community services.

Older workers are the fastest growing segment of the workforce and the most recent data shows that SCSEP provided jobs and training for 65,170 economically disadvantaged older adults in FY 2015, who in turn provided nearly 35 million hours of community service to private nonprofit agencies through the United States. Of these individuals, 10,456 were placed in unsubsidized employment and the community service provided was valued at more than \$820 million. Through SCSEP, the dignity of older Americans is enhanced, poverty is alleviated, and the program shows that low-income older workers can meet employer needs for in-demand jobs and reduce the skills gap.

SOCIAL SECURITY ADMINISTRATION

Over the next decade, nearly 18 million Boomers will reach traditional retirement age, and the number of beneficiaries of SSA's three federal programs is expected to increase from 66.5 million in FY 2016 to an estimated 73 million in FY 2020. AARP respectfully submits that the Administration's FY 2020 budget for SSA is inadequate to correct long-standing deficiencies and alarming trends in customer service and other areas. Without a higher level of funding, SSA will be unable to fulfill its core mission of delivering Social Security services in a way that meets changing needs. AARP requests that no less than \$12.952 billion, as approved by the Senate Committee last year, be made available for SSA operations or administrative budget in FY 2020 to enable SSA to make meaningful improvement in customer service. AARP further urges the Committee to reject the Administration's unprecedented proposal to begin charging fees for Social Security card replacement.

In FY 2018, SSA paid about \$978 billion in OASDI benefits to a monthly average of approximately 62 million beneficiaries and over \$47 billion in SSI payments to a monthly average of about 8.2 million recipients. Beneficiaries currently report significant dissatisfaction with reduced field office hours and inexcusable phone waiting times if they are able to get through at all. In FY 2018, more than 4.7 million callers reported being unable to get through to the SSA nationwide 800 number or waited on hold more than 25 minutes before speaking with a representative. In its December 2018 report, the SSA OIG found that "(t)he hearings process "has experienced worsening timeliness and growing backlogs." It found that the average processing time for a hearing increased 40 percent from 426 days in FY 2010 to 595 days in FY 2018.

LOW INCOME HOME ENERGY ASSISTANCE (ACF/LIHEAP)

AARP again disapproves of the Administration's proposal to halt aid to more than 6.1 million very poor households that rely on LIHEAP to help pay their home heating and cooling bills. AARP urges the Committee to restore LIHEAP program services to the level provided in FY 2011 when LIHEAP was last funded at \$4.7 billion. In that year, LIHEAP was able to help 6.9 million households and cover about 63 percent of the cost of their home heating with an average annual grant of \$560. In contrast, in FY 2019, program funding was about \$3.7 billion, \$1 billion less than the amount of funding provided in FY 2011. In FY 2019, the number of households receiving heating and cooling assistance is expected to remain at about 5.9 million or about 19 percent of eligible households, with an average annual grant size of about \$513. In addition, 70 percent of recipient households have at least one vulnerable and at-risk member who is elderly or disabled, or have a child under the age of six.

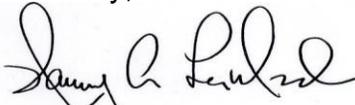
CORPORATION FOR NATIONAL AND COMMUNITY SERVICE (CNCS)

AARP again opposes the proposed elimination of the Corporation for National and Community Service. CNCS provides service opportunities and grants that focus on disaster services, economic opportunity, education, environmental stewardship, healthy futures, and veterans and military families. CNCS programs serve more than 5 million people at a local level through a wide array of services. More than 220,000 Senior Corps members and nearly 75,000 AmeriCorps members served in CNCS supported programs at more than 50,000 locations across the nation. Senior Corps volunteers report much higher self-rated health scores compared to older adults in similar circumstances who do not volunteer. They also reported feeling significantly less depressed and isolated compared to non-volunteers.

CONCLUSION

AARP greatly appreciates the opportunity to comment on these programs of great importance to older Americans. Should you have any questions regarding these requests, please do not hesitate to contact me or please have your staff contact Timothy Gearan of our Government Affairs staff at 202-434-3803.

Sincerely,



Nancy LeaMond

Executive Vice President & Chief Advocacy & Engagement Officer

cc: The Honorable Nita M. Lowey, Chairwoman, Committee on Appropriations
The Honorable Kay Granger, Ranking Member, Committee on Appropriations