



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 8, 2020

Dear Senators and Representatives:

AARP, on behalf of our 38 million members and all older Americans nationwide, appreciates the enormous amount of work Congress has undertaken to address the unprecedented public health and economic crisis that we face as a nation. The gravity of the present challenge will require both the recently enacted legislation and additional resources and investments to address the growing health and financial needs of the American people.

Older Americans and their families are being hit particularly hard by both the health and financial impacts of this pandemic. That is why it is so important that the legislative responses to this crisis continue to be expansive. We strongly urge you to act on needed policies to support residents of nursing homes and assisted living facilities, individuals who need assistance to live in their homes and communities, and family caregivers. At the same time, Congress must help those hurt financially by this crisis as well, by expanding access to food assistance, paid leave, and unemployment insurance benefits, as well as access to affordable health coverage. These needs are especially great in underserved communities, which is why it is so important to address disparities in our response to the coronavirus.

Furthermore, as states and the federal government look to expand physical distancing requirements, we ask that they be mindful that the coronavirus can be spread by anyone, and the health impacts – while potentially more severe for older Americans – can occur across ages.

Protect Residents in Nursing Homes and Other Residential Facilities

Nursing homes and other residential care facilities have been, and will continue to be, hard hit by this pandemic. For residents and their families, remaining connected is essential to their safety and health, including protecting against social isolation. As in-person visitations in nursing homes and other residential care facilities are largely halted, virtual visitation between residents and their loved ones is critical. Accordingly, we urge that facilities be required to provide and support virtual visitation for their residents. Specifically, we urge that Congress:

- Require skilled nursing facilities, nursing facilities, temporary facilities for residents during the coronavirus public health emergency, assisted living facilities, and other residential care facilities where visitors are restricted to make available and facilitate virtual visitation via video-conference or other technologies for residents and their loved ones.

- Provide funding for the provision of technology and equipment, including video-conference and two-way audio/video options and acquisition or expansion of broadband Internet access services.
- Require states to prioritize the use of civil money penalties to purchase equipment to respond to visitation restrictions.
- Ensure adequate support is provided to residents to facilitate virtual visitation. Some individuals may be able to conduct virtual visitation independently but need the technology. Other individuals may or may not need the technology but need human assistance to use the technology and communicate with their loved ones.

Further Investments and Flexibility in Federal Nutrition Programs

As a growing number of people struggle to put food on the table, additional measures are needed to ensure that older adults can continue to access food during the pandemic and throughout the related economic crisis. We urge Congress to temporarily increase both the Supplemental Nutrition Assistance Program (SNAP) maximum benefit and the minimum monthly SNAP benefit until the economy recovers from the current shock. Especially at this time when individuals need to stock up to avoid unnecessary trips to the grocery store, temporarily increasing the SNAP benefit amount should be common sense.

There is strong evidence to suggest that increasing SNAP benefits may have stabilized and improved food security for low-income individuals during the last economic downturn, as reported in the U.S. Department of Agriculture's (USDA) Economic Research Service (ERS), *Food Security Improved Following the 2009 ARRA Increase in SNAP Benefits*. Additionally, the increase to the minimum benefit could be particularly helpful for older Americans given that older Americans make up a significant portion of people receiving the minimum SNAP benefit. In 2018, nearly 1.9 million households received the minimum SNAP benefit, of which over one million of these households had an individual age 60 or older.

We also call on Congress to suspend all rulemaking that would eliminate SNAP eligibility and reduce benefits. The USDA's proposed rules to revise categorical eligibility and methods for calculating standard utility allowances would disproportionately impact older adults resulting in substantial benefit losses and eliminating SNAP eligibility for many.

In addition, we urge Congress to look for ways to expand access to online grocery shopping and delivery using SNAP benefits for older adults who may be unable or concerned about going into a grocery store. It is important that older Americans can access nutritious food during this public health and economic crisis, especially given that SNAP participation is associated with improved health outcomes and lower health care costs.

Provide Financial Relief for Family Caregivers

Credit for Caring Act: Family caregivers play a lifesaving role caring for their loved ones. We know more and more family members will take on the role of family caregiver during this pandemic, and the existing 40 million family caregivers across the country are facing additional challenges and financial obligations. A targeted family caregiver tax credit would provide much needed financial assistance to help alleviate the challenges they face. The bipartisan Credit for

Caring Act (H.R. 2730/S.1443) could provide this financial relief through such a family caregiver tax credit to those caring for loved ones.

Recovery Rebate: Caregivers could receive significantly greater financial assistance during this crisis if provisions recently enacted by Congress in the CARES Act and the Families First Coronavirus Response Act (FFCRA) were extended to benefit them. Individuals who live in a household with an adult dependent are not eligible to receive an additional recovery rebate for their adult dependent, while individuals who have dependent minors do receive an additional rebate amount. Moreover, adult dependents themselves are not eligible to receive a recovery rebate of their own. The rebates should be expanded so that adult dependents who live with a loved one are eligible for a recovery rebate.

Emergency Paid Family and Sick Leave: In addition, family caregivers are not adequately covered by the emergency paid family and sick leave enacted in FFCRA. While the provisions in FFCRA are an important step in offering workers paid leave during this public health crisis, caregivers have less access to paid leave than others. Individuals caring for adult loved ones affected by the coronavirus are ineligible for emergency paid family leave and can only receive 2/3 wage replacement for sick leave when caring for anyone other than themselves. Allowing these caregivers to be eligible for paid family leave and to receive full wage replacement if they are caregiving, would greatly alleviate the enormous pressure that millions of Americans are currently facing as they choose between the health of a loved one or going to work.

Personal Protective Equipment

As the coronavirus continues to quickly spread, the need for personal protective equipment is even more critical. We appreciate efforts already undertaken to address this growing need and urge continued vigilance and diligence to ensure that personal protective equipment is available to those who need it, including those caring for individuals in hospitals, nursing homes, assisted living, other residential care facilities, individual homes, outpatient settings, hospice and palliative care settings, as well as care recipients themselves, where appropriate.

Extension of Emergency Unemployment Insurance and Recovery Rebates

The CARES Act financial relief for millions of Americans -- who through no fault of their own have lost a job, are working reduced hours, have less retirement income, or unforeseen expenses -- should be expanded and extended for the duration of this public health crisis. The staggering job losses in the weekly unemployment claims reports and the growing signs of an unprecedented economic decline support the need for additional income supports. Specifically, we urge that emergency unemployment benefits, including all the additional categories of eligibility and the additional benefit amounts, be extended until the pandemic and its economic effects end. Additionally, we urge that additional recovery rebates be extended to all individuals, whether working, unable to work, unemployed, or retired, including caregivers with adult dependents, as noted above. We further urge that an explicit direction to provide rebates to the recipients of Social Security, Supplemental Security Income and Veterans Affairs benefits without the need to file any additional forms be included in the legislation.

Health Care Access and Affordability

Special Enrollment Period: Access to affordable health care coverage is more important now than ever. Furthermore, As the unemployment rate skyrockets, we must ensure that everyone can gain health coverage and access needed care and treatment during this public health emergency. We continue to strongly support a national special open enrollment period (SEP) to allow those without comprehensive insurance to get coverage. While some state-based exchanges have already enacted these special enrollment periods, we know this pandemic and the economic impacts are striking every community across the country. We urge Congress and the Administration to open a nationwide SEP.

Out-of-Pocket Protections: We also remain concerned that individuals and families could face significant out-of-pocket costs when accessing treatment for the coronavirus. We strongly urge Congress to improve cost protections to make treatment affordable and ensure public and private health insurance plans cover coronavirus treatments without cost sharing being subject to a deductible. Combined with a nationwide SEP, these policies will remove financial barriers to accessing needed care for millions of Americans.

Medicare Enrollment: To ensure older Americans have continuous access to health care, Medicare coverage should begin as soon as possible after enrollment—and no later than the first day of the month following enrollment—regardless of when during the Initial Enrollment Period, General Enrollment Period or Special Enrollment Period the individual signs up, including if the person misses their enrollment period. Moreover, we urge Congress to provide an explicit waiver of Part B penalties at least until the current pandemic comes to an end.

Medical Expense Deduction: The medical expense deduction is a critical tool to help offset high health care costs. We know that individuals and families impacted by this pandemic may see higher health care costs this year, and potentially many years into the future, as well as reduced retirement income due to significant job and market losses. Permanently extending the 7.5% deduction threshold would provide needed financial relief and certainty to those facing ongoing, high health care costs. The bipartisan, bicameral legislation (H.R. 2073/S.110) would permanently extend the medical expense deduction at the 7.5% threshold, which expires this year.

Comprehensive Prescription Drug Reform: Americans need relief from rising prescription drug prices. The economic impact of the coronavirus pandemic will have a significant negative effect on retirement security, which makes the ever-increasing prices of prescription drugs even more unaffordable. Congress should enact comprehensive prescription drug reform that lowers prescription drug prices and out-of-pocket costs to combat skyrocketing prices and ensure access to needed medications.

Health Care Workforce: There is an urgent need to increase health and long-term care staffing during this crisis. The many individuals who are risking their own health to serve others every day, and the many others who are prepared to return to their healthcare careers in this time of need, should not have to worry about their finances in addition to their physical wellbeing when serving the public. We strongly urge Congress to consider the best measures to appropriately recruit, train, retain and compensate healthcare workers during this crisis.

Protect the Rights of Residents and Families Regarding Transfers and Discharges

We are concerned about reports of patients being discharged or transferred from hospitals and unable to get back into their nursing home or other residential care. In addition, we are seeing reports that residents may be moved from their residential care setting to another facility or setting to avoid exposure to the coronavirus or to enable institutions to care for individuals with the same health status in one location. We expect these situations will only increase as the disease spreads.

Accordingly, we urge Congress to enact important protections that will be vital for the individuals and families who face these situations. Facilities should be prohibited from discharging patients due to inability to pay for services during this pandemic. Furthermore, facilities should be required to report and disclose data on discharges and transfers. Timely notice and clear and comprehensive information to residents and loved ones, including designated representatives, is also critically important. In cases of discharge or transfer, they should receive prompt notice, clear communication of the individual's rights around discharge and transfer, information on continued virtual visitation rights, rights and ability to appeal a discharge or transfer and written notice of the long-term care ombudsman's name and contact information prior to discharge.

Eliminate Barriers to Care in Homes and Communities

Helping older adults remain in their homes and communities as they age supports what most older Americans want to do while also alleviating the challenges we are facing in this nation's nursing homes. Accordingly, it is important to provide sufficient resources, such as grants, to enhance access to Medicaid home and community-based services (HCBS). Funding is needed to pay for back-up services when regularly scheduled home care workers or family caregivers are not available. It is also important that the workforce is supported to provide these important services. There may also be greater demand for HCBS since more individuals may be trying to avoid or leave congregate settings. HCBS are also generally more cost effective. On average, for every one person residing in a nursing home, Medicaid can fund three individuals receiving community-based long-term care.

Additional Support for State and Local Government

In addition to the many supports state and local governments are receiving to address the health challenges they are currently managing, more financial support should be provided to help them meet newly emerging needs. Given the speed with which job losses are mounting, states are likely to exhaust their UI trust funds in order to meet the need for basic unemployment benefits. In order to help states, Congress should provide grants rather than loans to ensure benefits continue to be paid. States desiring to adopt mail-in balloting for upcoming elections will likely require more funding than already provided in the CARES Act. In addition, given declining state and local revenues due to the pandemic, it is reasonable to anticipate that there will be significant budget shortfalls when new state fiscal years begin. Those shortfalls could lead to a reduction in vital services or voter disenfranchisement unless additional resources are made available to states and localities.

Broadband Investment

The unprecedented coronavirus crisis requires immediate and meaningful action to expand the affordability and availability of broadband telecommunication services. There is a pressing need for high-quality fixed and mobile voice and broadband services that are affordable, reliable, and robust. Americans of all ages and income levels are now critically dependent on broadband telecommunication services, with millions of individuals now being required to continue their work or educational activities, including clinical education, from home, while also being encouraged to rely on telemedicine to both stem the spread of the virus and offer relief to an overtaxed medical system. Overall, physical distancing can be promoted, social isolation mitigated, and online-education increased through the use of video conferencing technology. However, the benefits of advanced telecommunication technologies needed to achieve these objectives are not reasonably available or affordable for many Americans. The benefits of high quality and affordable broadband have not yet reached many rural communities, as well as underserved populations in cities. A significant broadband infrastructure investment is critical to deliver essential broadband services to all Americans.

In addition, broadband telehealth subsidies for low-income and older Americans should be expanded, so that those who have access to broadband but cannot afford it receive support to enable the purchase of not only broadband services, but also the equipment to access it, such as Wi-Fi routers and tablets, and training on how to use the services for telehealth purposes. The ability to expand telehealth services to the largest number of older Americans is critical during this crisis as telehealth services can relieve strain on overtaxed medical facilities while encouraging physical distancing. Finally, Lifeline funding should be increased to meet the pressing needs of low-income Americans for voice and broadband services during the coronavirus crisis.

Ensure Transportation Services for Vital Services

AARP urges expansion of the Section 5310 program eligibility to allow deliveries of food and medicine during this national emergency, and additional supplemental funding for those services. The Section 5310 program provides specialized transportation services for older adults and individuals with disabilities, who miss more than 11 million medical appointments annually due to inadequate transportation. This service is particularly vital in rural areas, where medical facilities are increasingly very distant. During this crisis, we urge that the program serve the same populations by delivering food and medicine to support households whose mobility challenges are especially difficult to overcome during this time.

In addition, we urge that public transportation is available when we emerge from these crisis conditions. Public transportation is a vital component of livable communities and of our transportation system, providing connections to health care, jobs, and family. However, under the current severe travel restrictions, transit agencies are struggling to maintain operations. We expect that the return of normal fixed transit operations will require additional assistance beyond that recently provided and recommend that additional funds be allocated to ensure safe and reliable operations.

Access to Skilled Nursing Facilities (SNFs)

People who are newly admitted to SNFs need to have improved access to initial and subsequent medical visits. Current requirements for long-term care facilities only allow physicians to conduct initial medical visits for newly admitted residents within skilled nursing facilities. These requirements also direct physicians to either conduct follow up visits or delegate follow up visits to nurse practitioners, clinical nurse specialists, and physician assistants. To improve SNFs residents' access to fundamental clinical care and to reflect the recent change in the CARES Act that allows these advanced clinicians to certify home health, these same highly skilled clinicians should also be allowed to conduct all medical visits in SNFs without physician oversight.

Maintain Shelter for All

AARP was pleased that the CARES Act requires a foreclosure moratorium of 60 days and extended forbearance to borrowers who cannot make their mortgage payment for up to six months. Since home equity conversion mortgage (HECM) borrowers do not make loan payments, forbearance as described in the Act does not apply to HECM borrowers. However, HECM borrowers face an analogous situation with respect to payments of property taxes and homeowners insurance. Mortgage servicers will advance these payments if a borrower fails to do so. These payments should be made only after determining if the taxing authority is offering a deferral period. We urge Congress to direct the Department of Housing and Urban Development (HUD) to require mortgage loan servicers to offer mitigation options to borrowers following the national emergency period. Mitigation options should include repayment plans or adding the arrearage amount to the loan balance. Servicers would then be repaid by HUD when the loan terminates.

We also urge Congress to direct HUD to halt approving due and payable requests for a six-month period, thereby removing the burden from the borrower and pausing the pre-foreclosure process. HUD recently announced that upon the request of the borrower, servicers must delay submitting a request to call a loan due and payable. However, servicers must first seek permission from HUD to declare a loan due and payable.

The CARES Act requires mortgage servicers to evaluate borrowers for mortgage modifications or to extend the term of the loan. Analogous relief for a HECM borrower would be to evaluate the borrower for a repayment plan or to add the amount of the arrearage to the loan balance—meaning it would be collected when the loan terminates. However, in a recent Mortgagee letter, HUD states that it does not confer any right to loss mitigation to a borrower, thereby denying a path for borrowers to become current following the moratorium. Given this violation of the requirements of the CARES Act, Congress should direct HUD to rescind the Mortgagee Letter immediately.

We are also concerned about the ability of homeowners and renters to maintain their housing while absorbing unprecedented job loss and other stresses unique to this pandemic. The public health injunction to shelter in place makes this even more pressing. Nearly 10 million older adult households were cost-burdened in 2017; and half of these were severely cost-burdened. We greatly appreciate the steps taken in the CARES Act to protect against foreclosures and evictions, together with similar actions by certain states and localities. However, given the magnitude of economic disruption we believe a clear national policy is warranted that covers all

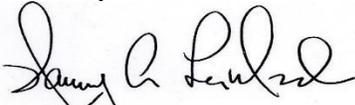
residents. AARP also recommends additional funding for emergency rental assistance and eviction prevention, which may be expended through existing programs. This will protect not only individual renters and homeowners and their families, but it will also help to ensure the sustainability of our nation's affordable housing infrastructure.

Pension Relief

Nearly 10 million workers and retirees are covered by jointly sponsored multiemployer retirement savings plans. While most of these plans are well funded, a smaller percentage have been struggling. While many have taken steps to improve their funded status, the current severe economic effects of the coronavirus are likely to further devastate these plans, and more importantly, put at risk the much-needed retirement income of an estimated 1 million workers, retirees, and their families. We urge Congress to include funding that would enable these multiemployer pension plans to prevent benefit reductions and pay retirees their earned pensions. If Congress also considers additional multiemployer provisions, they should protect the funding of existing plans and prohibit any provisions that would allow plans discretion to reduce already earned and vested benefits.

We look forward to continuing to work with you to help protect Americans, including those aged 50 and older, as we confront the economic and health impacts of the coronavirus. The robust and targeted solutions outlined above will provide immediate and meaningful relief to older Americans across the country. If you have any questions, please let me know.

Sincerely,



Nancy A. LeaMond
Executive Vice President and
Chief Advocacy and Engagement Officer