

# USAging

## **A National Perspective on Aging Policy, Programs and Trends!**

**for the Montana Governor's Conference on Aging**

**Amy E. Gotwals, Chief, Public Policy and External Affairs**

**10.2.24**



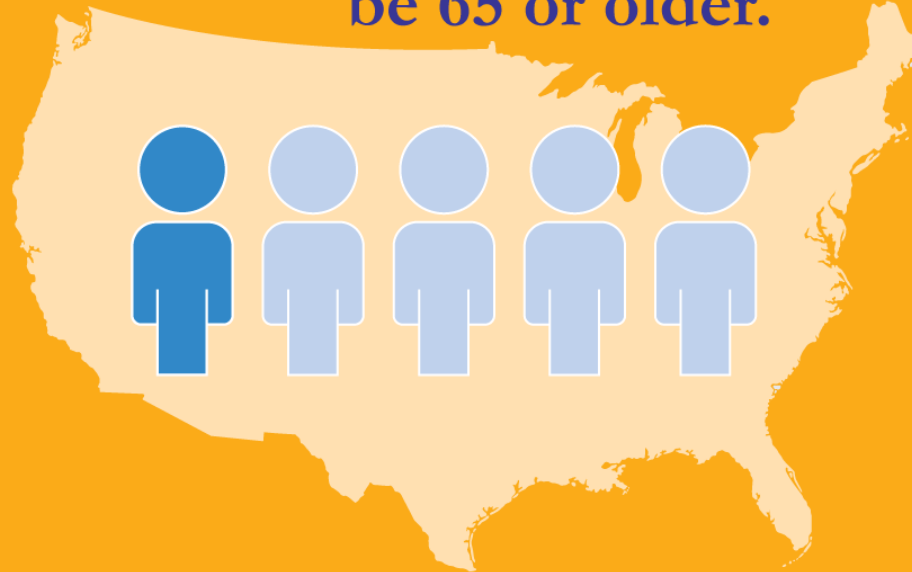
# **An Aging Nation**

# An Aging Nation

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Over the next two decades, the proportion of the U.S. population over age 60 will dramatically increase as the baby boomers reach this milestone. By 2030, more than 70 million Americans will be 65 and older, twice the number in 2000.<sup>1</sup>

By 2030, **1 in 5** Americans will be 65 or older.



# Historic Demographic Shift

Year	Number of Older Americans	Percent of Overall Pop.
2000 actual	35 million older Americans (65+)	
2020 actual	55.6 million	17%
2030 projected	70 million	~20%
2035 projected	Older adults outnumber children 18 years and younger	
<b>2040 projected</b>	<b>80.8 million</b>	<b>22%</b>

The population of older adults is also becoming more diverse, and the proportion of non-White older adults will continue to significantly increase over the next several decades.



**90%**  
of adults age  
65 and older say  
they hope to stay  
in their homes  
for as long as  
possible.<sup>2</sup>

But to do so, many people will eventually need some level of service or support to live safely and successfully in their home or community.

# Aging Services 2.0



# Trends and Directions Impacting Aging Services



# Context: Workforce Challenges

AAA Workforce Challenges	
Challenge	Percent (n=178)
Staff feeling overwhelmed or burnt out due to workload	79%
Having strong applicant pools	78%
Offering or maintaining competitive wages	75%
Staffing shortages	74%
Recruiting staff with aging and/or disability expertise	74%
Maintaining appropriate staff workloads/caseloads	67%
Coverage issues due to staff illness or quarantine	53%

Contracted Provider Workforce Challenges	
Challenge	Percent (n=178)
Staffing shortages	91%
Offering or maintaining competitive wages	81%
High staff turnover/low retention	80%
Staff feeling overwhelmed or burnt out due to workload	71%
Having strong applicant pools	67%
Providing competitive benefits	61%
Coverage issues due to staff illness or quarantine	60%



# 90 Percent of AAAs Serve Consumers Under Age 60



- **80%** of AAAs serve individuals under 60 with a disability or chronic/serious illness
- **75%** serve caregivers of all ages
- **49%** serve consumers with dementia of all ages
- **33%** serve veterans under 60

# People Living with Dementia



**72 percent** of AAAs have targeted programs for people living with dementia



Dementia  
Friendly  
America.®

[dfamerica.org](https://dfamerica.org)

USAging

# Social Engagement Programming

- **98 percent** of AAAs offer programs to specifically address social isolation and engagement



Health and  
Wellness

90%



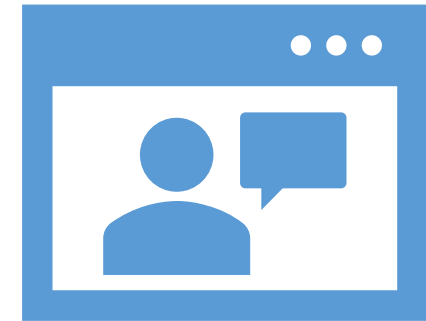
Volunteer  
Engagement

75%



Arts and  
Creative

63%



Technology

56%

# Social Engagement Resources

engAGED

The National Resource Center  
for Engaging Older Adults



COMMIT TO  
*Connect*

[www.engagingolderadults.org](http://www.engagingolderadults.org)

[committtoconnect.org](http://committtoconnect.org)

# Housing and Homelessness

<b>Top 5 Housing-Related “Major Challenges” Facing Older Adults</b>	<b>% AAAs</b>
Lack of affordable housing	85
Unavailability of/long waitlist for subsidized housing or vouchers	71
Increasing rents - “priced out” of long-term rental housing	64
Lack of accessible housing	63
Increasing homelessness	42



# Housing and Services Resource Center

**Connecting** \_\_\_\_\_  
the housing sector and the  
community living networks



**[acl.gov/HousingAndServices](https://acl.gov/HousingAndServices)**

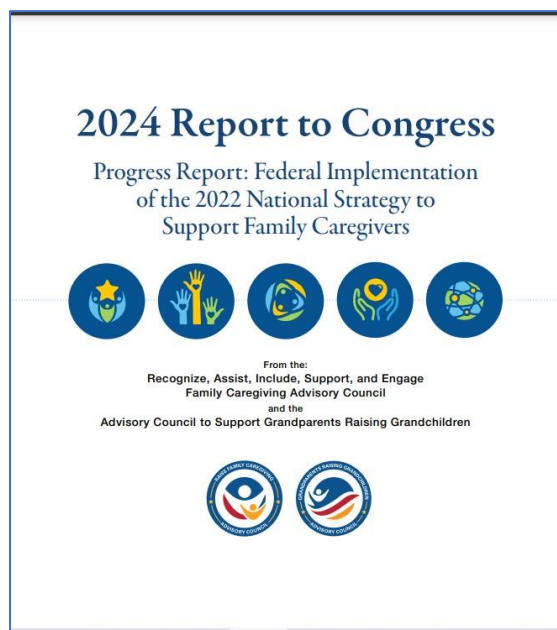
# Caregiving Needs are Growing



- 53 million family caregivers in the U.S. 41.5 million caring for an adult 50+ and that number is growing.
- On average a caregiver who lives with their care recipient provides 37.5 hours of care a week, a caregiver who does not live with their care recipient provides on average 23.7 hours of support a week.



# Caregiver Innovation



USAgging efforts include:

- ACT on RAISE (for implementation)
- New caregiver navigator project (with funding for the Aging Network)
- Aging Network Caregiver Services and Supports Innovations (Hub, action guides, pilot sites)
- Grandfamily/kinship caregivers
- Community Care Corps Innovations

# Advancing Equity

**96 percent of AAAs are actively taking steps to advance equity in access to and delivery of programs and services.**

- 71 percent identify underserved geographic areas
- 66 percent identify demographic groups that are underserved
- 46 percent recruit staff members that reflect the ethnic, racial and/or linguistic background of consumers
- 45 percent partner with culturally specific organizations



# Health and HCBS New Initiatives

- Hospital Assessments
- Physician Fee Schedules
- New Medicare Coding for SDOH
- HCBS Access Rule



# Health / Integration Resources



[www.aginganddisabilitybusinessinstitute.org](http://www.aginganddisabilitybusinessinstitute.org)

# Roles for the Aging Network Moving Forward!



- Critical Provider of **Social Care**
- Role in **Community Care Hubs**
- Facilitator of **Brain Health**
- Provider of **Dementia and Other Disease Support** Services
- Hub for **Caregiving** Support
- Partner in **Housing** with Services
- Partner in Bridging **Aging and Disability**



# **Federal Policy Updates**

# USAging

Leaders in Aging Well at Home

## Policy Priorities 2024

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





# Support

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





# Recognize and Support Caregivers

# Prioritize

**Medicaid Home and  
Community-Based  
Services Options to  
Reduce Unnecessary  
Institutionalization**



# Connect Health Care and Aging Sectors to Improve Care and Reduce Costs



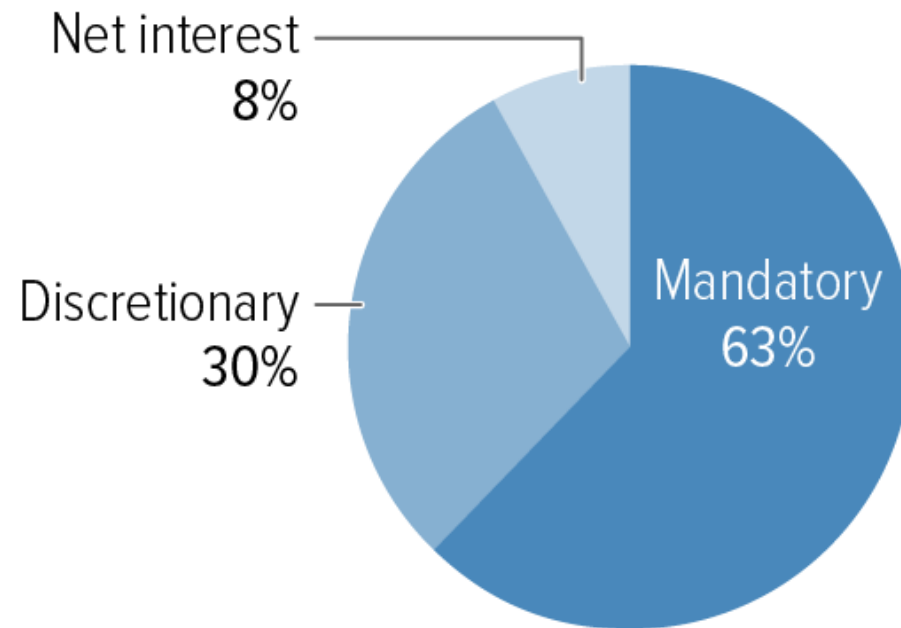


# **Federal Discretionary Funding**

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

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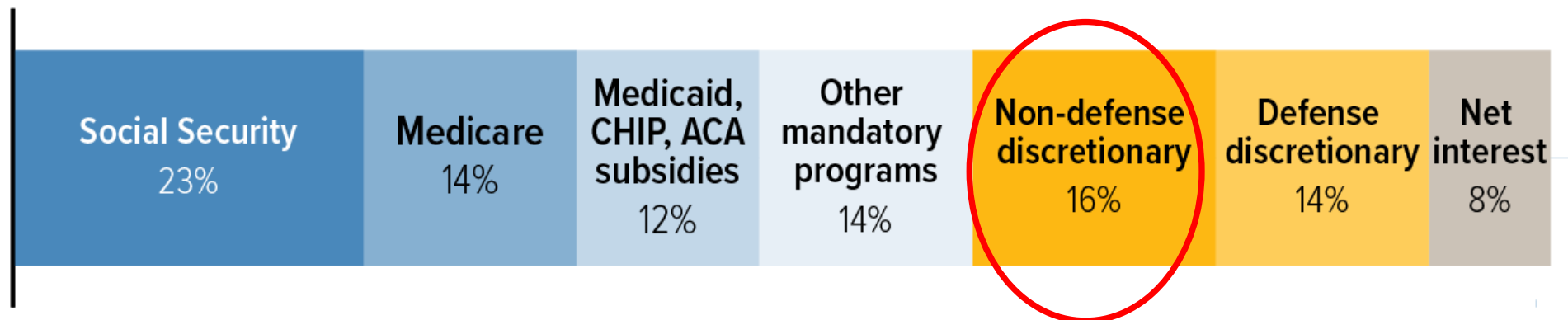
## Types of Federal Spending, Fiscal Year 2023



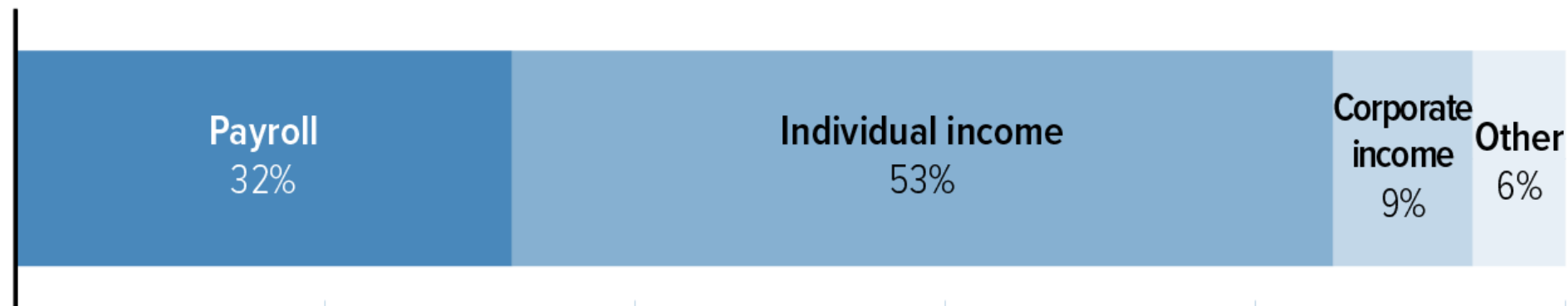
Note: Does not add to 100 percent due to rounding.

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

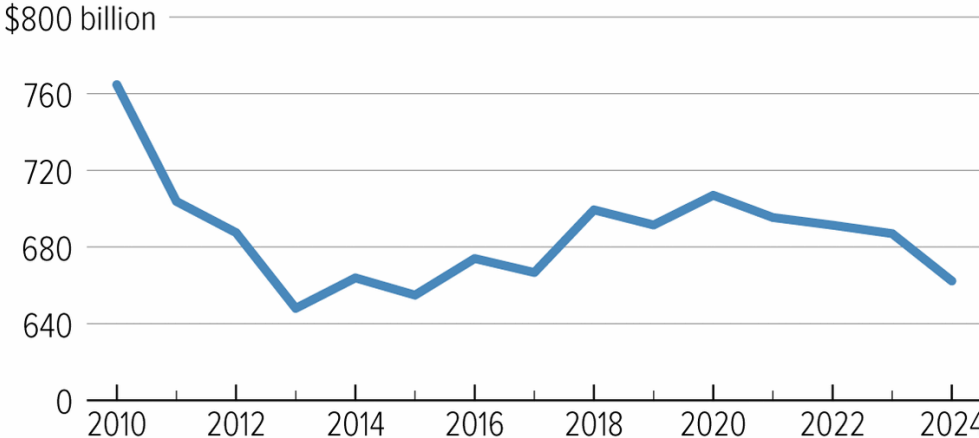
# Debt Ceiling Deal/Fiscal Responsibility Act

- Paused 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**
- Frozen topline in FY 2024
- Caps amount to a topline number that only has 1% growth for FY 2025—not remotely what is needed to keep up with inflation or population!

# Non-Defense Funding Down

## Non-Defense Funding Outside Veterans' Medical Care Down 14 Percent Since 2010

Enacted appropriations, in billions of 2024 dollars, adjusted for population growth and inflation



Note: Totals in this graph include the following categories exempt from the Fiscal Responsibility Act (FRA) appropriations caps: overseas contingency operations, program integrity, wildfire suppression, Cures Act, and Harbor Maintenance Trust Fund. They exclude veterans' medical care (budget subfunction 703), and the Census Bureau (excluded to avoid distortions because this graph starts in 2010, a decennial census year when the Bureau's funding rises dramatically). They also exclude offsets from Changes in Mandatory Programs ("CHIMPs") and mortgage insurance receipts. (Note that excluding these two categories of negative numbers raises the overall total.) Also note that for 2023, the FRA directly appropriated some funding and rescinded some other funding that might otherwise be considered discretionary, but we treat those 2023 effects as mandatory, following the legal definition of mandatory funding: funding not provided by appropriations acts.

Source: CBPP analysis of appropriations data



# Final OAA FY 2024 Levels

- **Title III B** Supportive Services: Level funded
- **Title III E** National Family Caregiver Support Program: \$2 million bump for projects
- **Title VI** Native American Aging Programs: level funding
- **Title III C** Nutrition: 4.6% boost for C1 congregate, 4.1% 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

# President's OAA FY 2025 Budget

- **Title III B** Supportive Services: Level funding
- **Title III E** National Family Caregiver Support Program: Level for services
- **Title VI** Native American Aging Programs: level funding
- **Title III C** Nutrition: 15% increase for C1 congregate 22% for C2 home-delivered, but another cut to NSIP (-28.5%)
- **Title III D** Evidence-Based Health and Wellness Programs: Level

# House Labor/HHS FY 2025

- **Wins!**

- **Title III B** \$415 million (↑ \$5 million)
- **Title VI**
  - A/B \$42.3 million (↑ \$4 million)
  - C (Native American Caregivers) \$16 million (↑ \$4 million)
- **Title III E** \$210 million (↑ \$3 million)
- **NSIP** \$132 million (increase of \$20 million)

- **Decreases**

- **C1 congregate** \$543.3 million (↓ \$22 million) **C2 home-delivered** \$366.3 million (↓ \$15 million, back to FY 2023 funding level)
- No APS funding

# House Labor/HHS FY 2025

- **Level Funded**
  - Title III D \$26.3 million
  - Ombudsman \$26.7 million
  - ADRCs \$8.6 million
  - SHIPs \$55.2 million

# Senate Labor/HHS FY 2025

- **Level funded for all\* Older Americans Act programs**
- \* = Slight boost of \$2 million for Title III E, National Family Caregiver Support Program
- Rejects House's cuts to nutrition and Title V, but also doesn't include their boosts to III B and Title VI

# What's Next?

## Fall—Winter: CR! CRs?

- House, Senate, President rushed the continuing resolution (CR) through last week
- Nov. 5: Election
- Dec. 20: More Punting? Or Lame Duck final bill?

## New Congress in January 2025

***Advocate now, but prepare for the reality:*** allocations could be lower next year for many




# **OAA Reauthorization**

# www.usaging.org/OAA

**USAging** POLICY BRIEF  
Leaders in Aging Well at Home

## Recommendations for the Reauthorization of the Older Americans Act



The Older Americans Act authorization will expire at the end of FY 2024. As it has for every past reauthorization, USAging will work with policymakers and stakeholders to update this vital Act, which supports millions of older adults and caregivers annually, and is the foundation of the Aging Network's ability to create a wide range of programs and services to support older adults' health, well-being and ability to age well at home and in the community.

### Introduction

The Older Americans Act (OAA) was first signed into law in 1965 as part of President Lyndon Johnson's "Great Society" initiative aimed at eliminating poverty and injustice among the country's most vulnerable populations. Over time, the Act created a nationwide network of organizations delivering community-based services for older Americans to support sustained health, independence and dignity.

Today the vision and mission of the Older Americans Act is even more important than it was nearly six decades ago, as our nation faces an unprecedented demographic shift. According to US Census data, in 2019, 16 percent—or 54.1 million—of Americans were 65 or older. With approximately 10,000 Baby Boomers turning 65 each day, by 2040, an estimated 80.8 million—or one in five Americans—will be 65 or older, or 21.8 percent of the population.<sup>1</sup> And by 2034, older adults are expected to outnumber children under 18 for the first time in history!<sup>1</sup> The population of older adults is also becoming more diverse, and

<sup>1</sup>the proportion of non-White older adults will continue to significantly increase over the next several decades.<sup>4</sup>

One thing this rapidly growing and diverse demographic cohort agrees on is the overwhelming desire to age at home rather than in institutional settings: 85 percent of those age 65 and older want to remain in their home and community as they age.<sup>5</sup>

Enabling aging in place should be a national bipartisan priority. Fostering a society in which aging at home and in the community is not only the collective desire but also the national expectation requires us to recognize, protect and bolster the foundation upon which this goal was built. The Older Americans Act is that foundation, and as federal policymakers consider the Act's reauthorization, USAging urges Congress and the Administration to work toward policy decisions that honor the longstanding intent of the OAA while seeking legislative updates that enable

1

**USAging** OLDER AMERICANS ACT  
Leaders in Aging Well at Home

## REAUTHORIZATION TOOLKIT

### Toolkit Overview

The Older Americans Act authorization will expire at the end of FY 2024. As it has for every past reauthorization, USAging will work with policymakers and stakeholders to update this vital Act, which supports millions of older adults and caregivers annually, and is the foundation of the Aging Network's ability to create a wide range of programs and services to support older adults' health, well-being and ability to age well at home and in the community. Go to [www.usaging.org/OAA](http://www.usaging.org/OAA) for our recommendations and tools for your own advocacy!

### Our Positions



[Recommendations for the Reauthorization of the Older Americans Act, January 2024](#)

### Advocacy Toolkit

[Get the Facts about the Older Americans Act](#)

[Key Milestones: OAA From 1965 to the Present](#)

[Key Authorizing Committees for the 118th Congress](#)

[Talking Points for Congressional Meetings](#)

[Template Letter to Congress for Aging Network Organizations](#)

[Social Media Toolkit](#)

[Template Advocacy Alert](#)





# OAA Reauthorization

- Expires at the end of FY 2024, Sept. 30, 2024
- HELP and Aging Committees worked closely together, formed OAA workgroup: Sanders, Cassidy, Kaine, Mullin, Casey, Braun, Markey and Collins
  - March 7 HELP Committee Hearing
  - May 23 Aging Committee Hearing
  - July 31 HELP Committee Mark-Up
- **Senate HELP Committee passed a bipartisan bill on 7/31! (S. 4776)**

# A Win!

- **Our Health Care Contracting Recommendation!**
  - Senators Mike Braun (R-IN) and Tim Kaine (D-VA) are lead sponsors
  - Amends Sec. 212 to make clear that process is different when no OAA funds used
  - Would only require AAA to notify SUA of those non-OAA contracts 30 days after start, annually; includes assurances that all OAA activities and clients are still prioritized

# A Win!

- **Our Title III D Evidence-Informed Recommendation!**
  - Senator Mike Braun (R-IN) was lead sponsor, introduced 6/18
  - Amends III D to allow evidence-informed programs as well as evidence-based
  - No definition of evidence-informed in the draft language (on purpose)

# Key Provisions

- 4.62 percent increase in authorization levels each year for five years
- **Grab-and-go meals codified!** 25% of C1 may be used in any community location. More flexible than the regulations.
- Lots of reports for ACL to do!

# Proved Difficult

- **Our Title III C Unification Proposal with MOWA**
  - Opposition from congregate groups
  - NCOA, NANASP can't support our draft as is
  - Possible compromises would tie AAA hands more than they are now, in USAging opinion
  - Senators did not want to get in the middle and so we haven't been able to gain support for this otherwise sensible, modest proposal

# Next Steps

- It won't go to the floor—not that kind of bill
- House then needs pressure to consider the Senate bill and get moving!
- Election-year schedule makes this tough
- But a lame duck bill isn't out of the question

**Use our advocacy tools to weigh in now!**  
**[www.usaging.org/OAA](http://www.usaging.org/OAA)**

# OAA Resources Available Act Now!

## Our Positions Policy Priorities 2024

**Policy Priorities 2024**  
Promote the Health, Security and Well-Being of Older Adults

## OAA Reauthorization Recommendations

**POLICY BRIEF**  
Recommendations for the Reauthorization of the Older Americans Act

# Advocacy Toolkit

Get the Facts about the Older Americans Act

**USAgING OLDER AMERICANS ACT**  
Leaders in Aging Well at Home  
GET THE FACTS

Key Milestones: OAA From 1965 to the Present

**USAgING OLDER AMERICANS ACT**  
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REAUTHORIZATION TOOLKIT

Key Authorizing Committees for the 118th Congress

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Template Letter to Congress for Aging Network Organizations

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REAUTHORIZATION TOOLKIT

Social Media Toolkit

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REAUTHORIZATION TOOLKIT

FY 2021-2025 Labor/HHS Appropriations Chart

**USAgING**

FY 2025 Appropriations Template Letter for AAAs

**USAgING**

Template Advocacy Alert

**USAgING OLDER AMERICANS ACT**  
Leaders in Aging Well at Home  
REAUTHORIZATION TOOLKIT

# FY 2025 Appropriations

# Health Care and HCBS



# Federal Efforts

- Medicare Physician Fee Schedule (Fall 2023 and 2024)
  - New options focused on SDOH
- HCBS Access Rule
  - 80% of Medicaid payment to direct care workers within 6 years
  - New requirements around waiting lists, service delivery timing
- Section 1557 Rule
  - Civil rights in health care which includes Aging Network
- Section 504 Rule
  - Web accessibility, least segregated environments

# CMS CY 2025 Physician Fee Schedule Proposed Rule

- USAging submitted a [comment letter](#) in September
- Key components of proposed rule for Aging Network:
  - New payment pathways and coding for Caregiver Training Services specifically for direct care services and supports
  - A request for more insight on relationships between CBOs and Medicare Part B billing practitioners
- Opportunities in the proposed rule for the Aging Network but not without limitations
- Final rule effective on or after January 1, 2025

# Caregiver Training Services for Direct Care Services and Supports

- Eligible Caregiver Training Services (CTS) providers limited to Physicians or Non-Physician Practitioners (nurses, physician assistants, etc.)
- Current and proposed CTS benefit difficult to implement, requires provider to squeeze in CTS in <15-minute medical appointments
- **USAging Recommendation:** Urged CMS to change the CTS benefit and the proposed Direct CTS benefit to allow a qualified health care provider to bill for all CTS when rendered by trained auxiliary personnel.

# Relationships Between AAAs and Medicare Part B Billing Practitioners

- AAAs and CBOs continuing to increase their contracting w/health care entities; **as of 2023, 45 percent of AAAs report at least one health care contract**
- Growing numbers of AAAs are also leading contracting networks known as Community Care Hubs (CCHs)
- Though AAAs experience benefits from health care contracts, AAAs also experience significant challenges:
  - Negotiation of price or term contracts
  - Referrals and volume
  - Time it takes to establish a contract
  - Common understanding of proposed programs and services

# Relationships Between AAAs and Medicare Part B Billing Practitioners

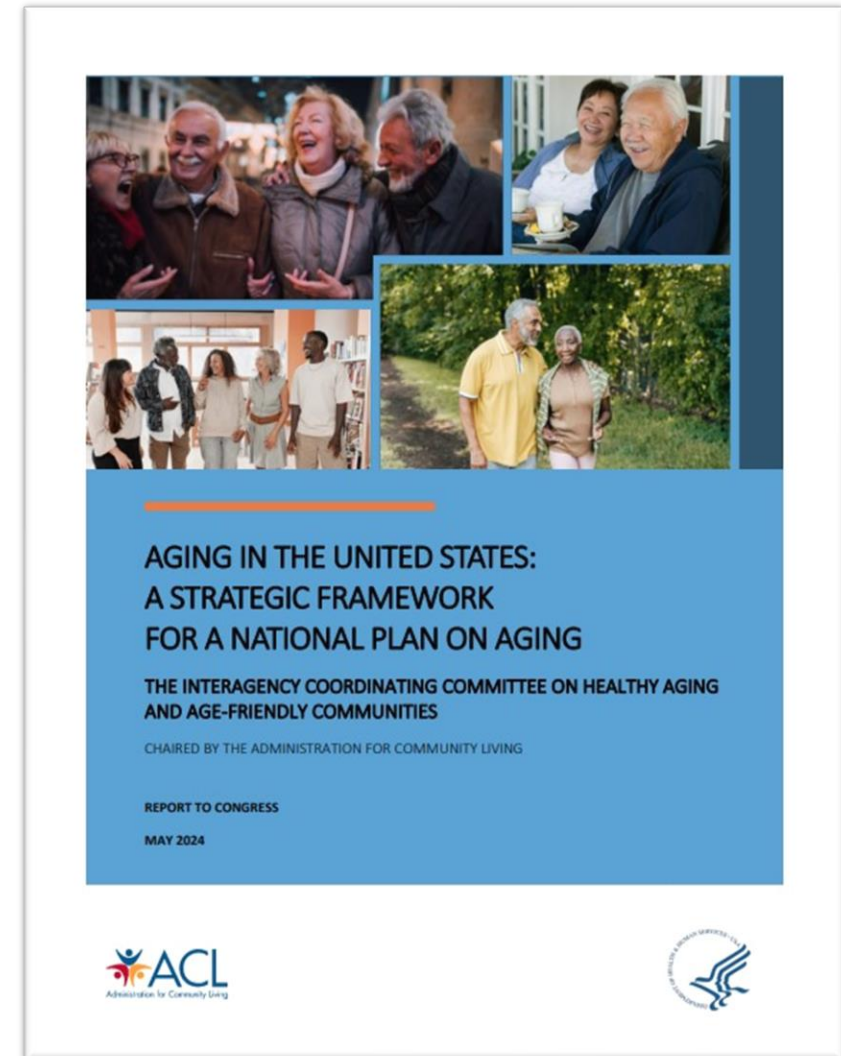
- Additional challenges: AAAs are being left to provide services to older adults sent to them from non-contracted health care entities, without pay.
- **USAging Recommendation:** We encouraged CMS to provide guidance, technical assistance and resources to incentivize adoption HRSN-related services. We also recommended CMS to collaborate with ACL and Aging Network organizations.



# **National / Federal Planning**

# Federal Efforts

- Interagency Coordinating Council on Healthy Aging and Age-Friendly Communities (ICC)
- Strategic Framework for Aging (released May 30, comments were due 9/15)
- National Plan on Aging work
- White House Conference on Aging 2025?



# Advocacy Needed!

- Older Americans Act reauthorization
- OAA regulations implementation
- National plan on aging efforts
- Engaging on state implementation of HCBS Access rule, others
- Educating any health care allies about opportunities in 2024 and 2025 Medicare Physician Fee Schedules



The logo for US Aging, with 'US' in a bold blue font and 'Aging' in a blue font with a stylized swoosh over the 'A'.

# US Aging

## Aging Policy Briefing & Capitol Hill Day

*Save the date!*

**March 31–April 1, 2025**

**WASHINGTON, DC**

**USAging**  
Answers on Aging

[usagingconference.org](https://usagingconference.org)



**CHICAGO**

**50<sup>TH</sup> ANNUAL**  
Conference and Tradeshow

**SAVE THE**  
**July 20–23, 2025**  
**DATE**



# USAging

Leaders in Aging Well at Home

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