



Leadership Council  
of Aging Organizations

June 3, 2016

The Honorable Elijah Cummings  
Chair, Platform Drafting Committee  
Democratic National Committee  
Washington, DC

Dear Representative Cummings:

On behalf of the members of the Leadership Council of Aging Organizations (LCAO), I am writing to share our recommendations for proposals we would like to see in the Democratic Platform, to strengthen and expand programs, including Social Security, Medicare, Medicaid and the Older Americans Act that enable older Americans to live independent and dignified lives.

LCAO is a coalition of 72 national nonprofit organizations concerned with the well-being of America's older population. As preparation of your party platform moves forward, we urge you to consider the recommendations in the attached document on retirement security, health and long-term services and supports, and community services. These recommendations represent the common ground among our organizations, although they are not exhaustive of the interests of LCAO members, collectively or individually.

An unprecedented demographic shift is occurring as the Baby Boomer generation ages and every day 10,000 people in the United States reach traditional retirement age. Compared with over 46 million seniors today, by 2030, 70 million people – 1 in 5 Americans – will be 65 or older. Many older Americans face economic and health challenges. Currently, nearly 90 percent of seniors have at least one chronic condition, 4.2 million adults over the age of 65 live in poverty, and nearly one in six seniors struggle with hunger. Decades of stagnant wages and the erosion of employer-sponsored retirement benefits and savings are grinding away at the economic security of millions of seniors.

Given these demographic and economic realities, we urge you to include proposals in your platform that would strengthen the financial and health security of older adults and to reject proposals that would increase costs or reduce benefits for current and future generations of older Americans.

We look forward to working with you to meet the challenges presented by our growing elderly population.

Sincerely,



Max Richtman  
Past Chair, Leadership Council of Aging Organizations

## RETIREMENT SECURITY

With defined benefit pensions disappearing, only half of Americans being offered a pension plan at their workplace, and 401(k)s not guaranteeing a secure retirement, older Americans are relying more on Social Security as their main source of their income in retirement. Therefore, we should:

1. **Expand Social Security benefits and extend program solvency** by increasing benefits across-the-board, including those who are treated unfairly by the current system, such as some paid home care providers who care for ailing family members; instituting the Consumer Price Index for the Elderly (CPI-E), which reflects actual elder spending patterns; adding a caregiver credit, which recognizes interruptions in labor force participation to provide services to family members; lifting or eliminating the payroll tax cap; and opposing privatizing Social Security or benefit cuts, including the implementation of the chained CPI. Social Security expansion should include Social Security survivor and spousal benefits and address the unfairness of the Government Pension Offset (GPO) and the Windfall Elimination Provision (WEP). Any enhancements in Social Security benefits should be exempt from income and should not count for the purpose of Supplemental Security Income (SSI) eligibility or benefit amount, so that the poorest beneficiaries would be able to benefit from these increases.
2. **Secure adequate administrative funding for the Social Security Administration (SSA)** to increase staffing and office hours to reduce wait times for applicants and beneficiaries, as well as re-institute the mailing of annual benefit statements.
3. **Update provisions for the SSI program through the SSI Restoration Act.** The SSI income disregards have not been updated since its enactment in 1972.
4. **Preserve, protect and expand defined benefit plans and improve defined contribution plans** so as to minimize risk to plan participants; educate the public on the importance of retirement savings in providing dignity in retirement; and inform the public and legislators about the important role pensions play in funding infrastructure and creating jobs and the critical contributions retirees with incomes from pension plans and Social Security make to the economy of their communities.

## HEALTH AND LONG-TERM SERVICES AND SUPPORTS (LTSS)

1. **Health Care and Long-Term Services and Supports.** We believe that access to affordable, high-quality health care and long-term services and supports is part of the American promise that no one should go broke because they get sick, develop a disability, or are at the end of life. We will defend Medicare, Medicaid, and the Affordable Care Act against harmful cuts and seek to expand these programs to better protect older adults, people with disabilities, and low-income Americans.
2. **Recognize Medicare as one of the great American success stories.** We must truly protect and modernize the program to continue to meet the needs of older people, people with disabilities and their families into the 21st Century. This means preserving Medicare's universal social insurance model, with its minimal administrative costs, rather than further

privatizing it with a voucher/premium support system. We must require complete parity in payments and benefits between the traditional Medicare program and private Medicare Advantage. Rather than scale back this successful program, we must expand it by eliminating gaps in coverage, such as dental, hearing and vision care.

3. **Combat Rising Prescription Drug Costs.** Americans pay the highest costs for prescription drugs in the world, causing older adults, people with disabilities, and families to forgo desperately needed medications, go without other basic needs, or risk bankruptcy. We are committed to fixing this problem through solutions such as allowing Medicare to negotiate drug prices, instituting an out-of-pocket cap in Medicare Part D, restoring discounts in Medicare available to state Medicaid programs, making transparent what it costs to develop breakthrough medications, and promoting research on the clinical effectiveness of comparable prescription drugs.
4. **Advanced Illness and End-of-Life Care.** People living with an advanced illness or nearing the end of life need and deserve access to a full range of high-quality health care options that honor their dignity and values and are person and family centered, well-coordinated, and integrated with community supports and services.
5. **Improve LTSS Financing.** Our nation has too long ignored the urgent need to address the emerging long-term services and supports crisis facing people with disabilities of all ages. We believe that all Americans deserve access to affordable coverage that protects against the financially ruinous costs of dementia and other conditions that require long periods of assistance with activities of daily living and instrumental activities of daily living.
6. **End the Institutional Bias in Medicaid.** Currently within the Medicaid program, states are required to provide nursing facility coverage while most home and community-based services (HCBS) are optional. It is time that we address this issue by assisting states with streamlining and rebalancing their long-term services and supports and by guaranteeing the right of people with disabilities of all ages to live in the community and lead an independent life.

## COMMUNITY SERVICES

1. **Expand Support for Home and Community-Based Services and Supports (HCBS).** Expanding access to HCBS to meet the rapidly growing need for services delivered at home and in the community will mean at least doubling federal funding for the Older Americans Act (OAA) and expansion of other discretionary aging programs that have a long-established and trusted history of delivering essential services and providing information and referral/assistance to older adults and caregivers (both family and paid). Additionally, meeting the future needs for HCBS and realizing the potential of these essential services (such as nutrition, transportation, housing and other critical wrap-around supportive services) to reduce rapidly increasing health care costs, will require both Medicare and Medicaid to support health care delivery reform efforts that adequately involve, fund and preserve entities and networks that have successfully delivered HCBS for decades.

2. **Expand Efforts to Promote Elder Justice and Prevent Elder Abuse and Financial Exploitation.** Expand recent federal efforts to prevent the elder abuse and financial exploitation of one-in-ten older adults. We believe critical strategies to accomplish this goal include reauthorizing and fully funding the Elder Justice Act, creating a dedicated stream of federal funding for Adult Protective Services, and increasing funding for the Long-Term Care Ombudsman Program. We must also expand our financial literacy and fraud prevention efforts to better prepare, educate and protect older adults.
3. **Support Caregiving.** Together, family caregivers and the paid caregiving workforce form the basis of support for aging adults and those who live with a chronic illness or disability. The vast majority of these older adults and people with disabilities want to remain at home and in the community, but face challenges in finding the support they need to do so. For the caregiver workforce, low wages, isolation, and limited opportunities for training make it harder to recruit and retain providers. Moreover, many families cannot afford long-term services and supports even when they can find a provider. Consequently, unpaid family caregivers often provide the bulk of individual services and even sacrifice their own physical, emotional, and financial security to care for a loved one.

We are committed to helping family caregivers by developing a long-term services and supports system that both expands access to home and community-based services and ensures a qualified interdisciplinary workforce that is appropriately trained and properly compensated. We believe it is critical to expand federal opportunities to support family caregivers through increasing federal funding for existing programs that help caregivers, including caregivers of people with Alzheimer’s disease and other dementias. We believe it is important to ensure that family caregivers have an explicit role in care plans and the services and supports they need to provide care; resources to alleviate financial hardships and promote retirement security; and access to flexible employment policies. We also believe it is important to encourage the creation of a volunteer “caregiver corps.”

4. **Support Socially and Economically Vulnerable Older Adults and Caregivers.** Federally-supported safety net health care and community-based programs that serve older adults and caregivers are especially critical to the most economically and socially vulnerable populations. Programs that serve older adults and caregivers should pay particular attention to ensuring that they reach the most at-risk populations including low-income and minority elders, American Indian, Alaska Native and Native Hawaiian elders, LGBT elders, Holocaust survivors, victims of abuse, and other vulnerable older adults.
5. **Increase Opportunities for Older Adults to Age with Dignity and Purpose.** With medical and technological advances, older people will be living, contributing, and thriving with longevity into their 90’s and beyond. Regardless of individual backgrounds or experience, older adults have much to contribute. To ensure that older people live with dignity and purpose, opportunities for continued work, training, and civic engagement are needed for those who need to earn wages out of economic necessity, as well as those who want to remain engaged in their communities in an intergenerational workforce or through volunteerism. Both have economic and social impacts that will strengthen our nation.