

Katie Smith Sloan, Chair

October 15, 2021

Dear Senators and Representatives,

I write as chair of the Leadership Council of Aging Organizations to express LCAO's strong support for the legislation comprising the Build Back Better Act passed by the House Budget Committee on September 25, 2021.

We urge you to support the most robust package possible as the bill is advanced, to provide the greatest benefit to older adults and the workers and family who serve them. The provisions we support are essential elements of the infrastructure that helps older adults maintain their health, well-being, and independence. Multiple national opinion polls taken over the past 6 months show extensive bi-partisan support for home based care and for including programs that benefit older adults in reconciliation.

Since 1980, LCAO has been the country's preeminent coalition representing older Americans. Comprised of 67 national nonprofit organization members, LCAO focuses on the well-being of America's older population and is committed to representing their interests in the policy-making arena. LCAO serves as a source of information about issues affecting older persons and provides leadership and vision as America meets the challenges and opportunities presented by its aging society.

We draw your attention to these areas in particular:

HCBS

COVID-19 has made even more urgent the need for home and community-based services (HCBS), which are less expensive than nursing homes, keep families together, and are strongly preferred by older adults. Yet, Medicaid coverage of HCBS is still optional for states, whereas Medicaid coverage for nursing home care is mandatory, and most states lack the capacity or funding to meet current and future HCBS needs because of major federal underinvestment. The \$190 billion for HCBS currently proposed in budget negotiations is far lower than the original \$400 billion *Build Back Better* investment proposed by President Biden. LCAO urges Congress to provide the highest possible investment in HCBS, thereby ensuring that states have the funding both to expand services and to support the workforce—both of which are key to increasing access to HCBS.

Direct Care Workforce

LCAO supports not only expanded Medicaid funding for HCBS, but also the House's proposals of designating (a) nearly \$1.5 billion in grants to improve recruitment, education, training, retention, and career advancement for the direct care workforce and (b) \$5 million to create a national technical assistance center to support direct care and family caregiving as steps in the right direction, while urging Congress to designate even more funding for these critical needs. Access to HCBS cannot be enhanced without adequate and long-overdue investment in the workforce (largely women, people of color, and/or immigrants) providing the care and services; this workforce has been underpaid and undervalued for decades, resulting in worker shortages and high turnover throughout long-term care. Significant investments in the direct care workforce are critical to improving the quality of HCBS and nursing homes, ensuring that direct care jobs are high-quality jobs with family-sustaining wages and benefits.

Medicare

We support House proposals to expand Medicare coverage to dental, vision and hearing services. In 2019, almost half of Medicare beneficiaries did not have dental coverage, and the same number did not have a dental visit within the past year, with even higher rates among those who are Black, Hispanic or have low incomes. Over 43% of Medicare beneficiaries who had trouble seeing did not have an eye exam in the past year, and routine eye exams and corrective lenses are not covered despite the association of poor vision with an increased risk of falls, depression, cognitive impairment, and limited mobility. The average out-of-pocket cost of \$2,500 for a single hearing aid and associated exam and fitting costs creates a significant barrier and Medicare does not cover testing or hearing aids for routine hearing loss, despite its link to increased risk of dementia, falls and depression.

Prescription Drugs

LCAO also supports House proposals to reduce Medicare prescription drug costs, including allowing Medicare to negotiate drug prices, limiting drug price increases to the rate of inflation and capping beneficiary out-of-cost costs (which exceed \$3,200 out of pocket for one million beneficiaries and lack an out-of-pocket spending cap). LCAO is concerned that high prescription drug prices put the health and income security of *all* aging Americans—both Medicare beneficiaries and those with other health coverage—at risk. We urge Congress to enact bold legislation to lower prescription drug prices for all Americans: enrollees in Medicare, job-based health plans, Affordable Care Act plans, and other plans.

Affordable Senior Housing

LCAO strongly supports the inclusion of funding to provide affordable, serviceconnected housing to older adults with very low incomes in the reconciliation package. In particular, we support the inclusion of \$2.4 billion for HUD's Section 202 Supportive Housing for the Elderly program. This investment will build 35,564 affordable homes with Service Coordinators, provide technical assistance to states to better align housing and services to greatly expand the ability of low-income older adults to age in community. Most older adults who need affordable housing languish for years on housing waiting lists while homelessness among older adults steadily increases. The reconciliation's bill's investments mark a sharp turn in the availability of affordable senior housing, a turn we can wait no longer to take.

Elder Justice

LCAO strongly supports the inclusion of the Elder Justice Reauthorization and Modernization Act in the reconciliation package, which would advance key solutions to the crisis of elder abuse, neglect and exploitation and would ultimately create and fund a coordinated elder justice infrastructure in the U.S. By providing significant, transformational levels of funding, this legislation would greatly enhance adult protective services and the long-term care ombudsman program and create innovative solutions for our nation's long-term care staffing crisis. It also funds programs that address social isolation and loneliness, supports medical-legal partnerships and expands the work of senior legal hotlines – all programs that are critically needed by older adults.

Older Americans Act

LCAO strongly supports the \$1.3 billion in targeted funding for Older Americans Act (OAA) programs and the aging services network. This funding provides for direct services that are critical for older adults, including home care, transportation, congregate and home-delivered meals, caregiver support, Native American services, the long-term care ombudsman program, and the Senior Community Service Employment Programs (SCSEP) to meet the job training and placement needs of unemployed low-income older workers. It additionally allows for essential investments in the aging services workforce and to improve and modernize the infrastructure that is required for providers to continue operations, such as delivery vehicles and safe and accessible buildings and senior centers. The funding further supports research, development, and technical assistance needed to advance the aging network as a whole and ensure services for older adults in the greatest economic and social need, including historically underserved populations.

Paid Leave

An estimated one in five Americans—a population of 53 million Americans— is a family caregiver. Family caregivers often struggle to balance caregiving and workplace responsibilities during normal times. The health and economic crisis resulting from the COVID-19 pandemic has exacerbated these challenges-especially for hourly employees on the job 30 hours a week or more. They have had to take time off from paid jobs to care for themselves or family members, scrambling to fill gaps in care while many older adults and people with disabilities lost access to services. This challenge was particularly difficult for women of color. More than 2.3 million women—more than 600,000 Black and 618,000 Latina—left the labor force in 2020.

LCAO supports the creation of a flexible, comprehensive, and inclusive medical, parental, and caregiver paid leave program that would strengthen our communities, as well as promote the health, well-being, and independence of older adults, individuals with disabilities, and their caregivers. It should also provide sufficient wage replacement and be responsive to caregiver needs. In addition, a paid leave program should complement, not compete with or harm, existing programs and policies.

Family Caregiver Tax Credit

LCAO urges that the family caregiver tax credit included in Build Back Better, which is consistent with the Credit for Caring Act, be included in the final budget reconciliation package. This would help provide some important assistance to family caregivers who spend on average over \$7,200 annually on caregiving expenses. The tax credit would also help family caregivers who do not live with the person they are assisting or who care for non-dependents.

Saver's Credit

The Saver's Credit is available to low- and moderate- income workers who are saving for retirement. It is effectively a federal match for retirement contributions that increases modest contribution amounts and encourages savings. LCAO supports the provision in the reconciliation package that would expand eligibility for the Saver's Credit as well as the size of the credit. It would make the credit refundable which would be deposited into the worker's retirement account.

In addition to the provisions in the Build Back Better Act approved by the Budget Committee, LCAO members strongly support including the following provisions in the final package.

Medicare

Low-income Medicare beneficiaries, particularly enrollees of color, often struggle to afford needed care and prescription drugs. Although help paying these costs is available through the Medicare Savings Programs and the Part D Low Income Subsidy, these programs have overly strict, outdated eligibility rules that leave far too many people behind. We urge Congress to update these programs in the reconciliation bill as crucial steps toward improving coverage, reducing disparities, and promoting equity.

Training for the Entire Health Care Workforce Serving Older Adults

The LCAO has long supported both the Geriatrics Workforce Enhancement Program (GWEP) and Geriatrics Academic Career Awards (GACA) which play a critical role in the workforce training infrastructure. We support increased training for family caregivers, direct care workers, and health care professionals such as physicians, nurses, social workers, pharmacists, and psychologists and the career development of our next generation of geriatrics health professionals. We support funds for these programs to be included in the reconciliation package.

SSI Update

The Supplemental Security Income (SSI) program has not been significantly updated since its creation almost 50 years ago. Millions of low-income older adults and those with disabilities rely on SSI to pay for rent, food, and other necessities. This program has been neglected for far too long, with some outdated rules being unchanged for decades. The reconciliation budget must include updates to the SSI. This is a historic opportunity to make changes that will provide critical assistance to the poorest of the poor older adults and persons with disabilities.

We thank you for your commitment to including the needs of older adults in the definition of infrastructure and reiterate our support for a robust investment in the programs that serve older adults and the workforce that makes this service possible.

Sincerely,

Katie Sut Slow

Katie Smith Sloan, Chair