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December 9, 2011

The Honorable Denny Rehberg
Chair
House Appropriations Subcommittee
on Labor/HHS/Education
U.S. House of Representatives
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
House Appropriations Subcommittee
on Labor/HHS/Education
U.S. House of Representatives
Washington, DC 20515

The Honorable Tom Harkin
Chair
Senate Appropriations Subcommittee
on Labor/HHS/Education
United States Senate
Washington, DC 20510

The Honorable Richard Shelby
Ranking Member
Senate Appropriations Subcommittee
on Labor/HHS/Education
United States Senate
Washington, DC 20510

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Nevada

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Dear Leaders of the Committee and Subcommittee:

I write today on behalf of the National Association of States United for Aging and Disabilities (NASUAD), which represents the 56 officially designated state and territorial agencies on aging and disabilities. Each of our members oversee the implementation of the Older Americans Act (OAA), and together we work to design, improve, and sustain state systems delivering home and community based services and supports for people who are older or have a disability, and their caregivers. **We ask that you strengthen and support programs that are critical to these vulnerable populations as you move forward in crafting a FY12 Labor, HHS, and Education spending bill.**

OAA

According to the U.S. Department of Health and Human Services [National Clearinghouse for Long-Term Care](#), about 70 percent of all people age 65 and older will need some type of long-term care during their lifetime. Through the provision of long-term services and supports that are designed to improve the quality of life and health outcomes for program participants, the OAA enhances the dignity, independence and choice of our nation’s most vulnerable citizens.

Notably, demand for non-Medicaid long-term services and supports, such as those financed through the OAA, is growing, while state economies remain

depressed. A January 2011 report from NASUAD, AARP and Health Management Associates (HMA) titled, [Weathering the Storm: The Impact of the Great Recession on Long-Term Services and Supports](#), documents that from FY09 to FY10, more than half of all states experienced increased demands for OAA programs, including information and referral, home-delivered meals, respite care, case management, personal care, family caregiver support, as well as transportation and homemaker services. Increased service demands are likely to continue, given the rise in economic insecurity among older adults. According to [2010 U.S. Census data](#), from 2009 to 2010, the number of seniors with incomes below 200 percent of the Federal Poverty Level (FPL) grew to 13.5 million, while the number of seniors living below 100 percent FPL increased from 3.4 million to 3.5 million over the same time period.

Troublingly, although demand for these services has increased substantially, state funding for these programs has not kept pace. While [an analysis](#) published this spring determined that states' 2011 fiscal conditions have slightly improved over last year, the report goes on to indicate that several more years of recovery will be needed before state fiscal stability returns. Given the ongoing fiscal crisis facing nearly every state, and the corresponding increase in demand on social services and safety net programs, **NASUAD urges you to maintain funding for the very initiatives on which our most vulnerable populations depend.**

Additionally, without access to OAA programs, many older, low-income adults would be forced out of their homes and communities and into more costly institutionalized settings, such as those financed by Medicaid. A [2011 survey](#) found that the cost of care among facility-based providers has steadily increased over the past six years, while rates charged by home care providers have remained relatively flat. According to the report, the 2011 national average daily rate for a semi-private room in a nursing facility was \$193, a six percent increase over 2010. In contrast, the national median daily rate for adult day health care services that provide social and other related supports in a community based setting was \$60, a zero percent increase from 2010. Accordingly, eliminating or reducing funds for programs which help to prevent or delay costly institutionalizations would only increase the financial burden on federal and state governments, while also stripping older adults and individuals with disabilities of the services and supports that promote their dignity and choice. As you work to finalize a FY12 year-end spending bill, **NASUAD encourages you to maintain funding for OAA programs, which achieve cost savings at the state and federal levels while helping our nation's most vulnerable citizens remain independent and in their homes and communities.**

In addition to preserving the OAA and its critical programs, NASUAD offers the following recommendations:

LIHEAP

The Low Income Home Energy Assistance Program (LIHEAP) contingency fund is a critical funding source for home energy needs arising from an emergency situation, such as extreme weather conditions or energy price increases. According to a [2011 survey](#) of LIHEAP-recipient households, nearly 90 percent of LIHEAP recipients are from households with at least one resident who is over

the age of 60. **NASUAD urges you not to slash LIHEAP funding, as this would endanger older adults and individuals with disabilities when they are most vulnerable to extreme conditions.**

CNCS

Programs administered by the Corporation for National and Community Service (CNCS) improve the lives and opportunities for older adults and individuals with disabilities. Through Senior Corps, the Foster Grandparent Program, the Retired and Senior Volunteer Program, and the Senior Companion Program, volunteers serve as important community resources and derive significant emotional and health benefits, which can improve their own quality of life. **NASUAD urges you to recognize the need for these important initiatives, and to finalize a debt reduction framework that maintains Senior Corps program funding levels.**

CSBG

The purpose of the Community Services Block Grant (CSBG) program is to alleviate the causes and conditions of poverty in communities. To reduce CSBG funding during the ongoing state budget crises for the sake of achieving savings at the federal level would be devastating to state CSBG programs, and to the vulnerable individuals they serve. Additionally, a lapse in service would likely result in many CSBG participants facing a gap in services, which could lead to costly hospital admissions and institutionalizations. Given the critical role of CSBG funding in providing assistance throughout the country, **NASUAD urges you to move forward with long and short term deficit reduction in a manner that does not jeopardize CSBG funding.**

SSBG

Social Services Block Grants (SSBG) are a flexible source of funding that allows states to provide a variety of services to low-income children and families, including older adults and individuals with disabilities. It is a critical source of funding for services that protect children from neglect and abuse, prevent elder abuse, provide adult and child day care and foster care placements, and in-home supports. **NASUAD urges you to continue to recognize the importance of this program to underserved populations, and we recommend continued usage and flexibility of these funds for such purposes.**

SCSEP

The Senior Community Service Employment Program (SCSEP), authorized by Title V of the OAA, is the nation's only federal workforce initiative designed to train and employ low-income, unemployed individuals aged 55 or over. In order for SCSEP to operate most effectively, the program should be administered by AoA, which is the nation's only federal agency responsible for addressing the concerns and promoting the interests of older adults and their caregivers. **NASUAD urges you to transfer SCSEP the Department of Labor to the Administration on Aging.**

SHIP

Authorized by Section 4360 of the Omnibus Budget Reconciliation Act (OBRA) of 1990, the State Health Insurance Assistance Program (SHIP) is a state-based initiative that provides accurate, understandable, and objective health insurance information to Medicare beneficiaries and their families to help these individuals understand their rights and make informed health coverage decisions. The SHIP program should be administered by AoA, the most appropriate agency to support the growing, evolving role of the SHIPs in assisting older adults, individuals with disabilities, and their caregivers in making informed health coverage decisions. **NASUAD urges you to transfer of the SHIP program from the Centers for Medicare & Medicaid Services (CMS) to the Administration on Aging.**

While NASUAD understands that the current appropriations process necessitates difficult funding choices, we hope that you will use this opportunity to protect programs that provide long-term services and supports to our most vulnerable citizens. Eliminating or decreasing funds to such programs would only increase costs over the longer-term and deprive older Americans and individuals with disabilities of their independence, dignity, and choice. **NASUAD urges you to take these vulnerable populations, and the importance of programs that allow them to remain in a place they call home, into account as you make final decisions with regard to the FY12 Labor-HHS-Education appropriations bill.**

Thank you for your consideration.

Sincerely,



Martha Roherty
Executive Director

CC:

The Honorable Daniel K. Inouye
Chairman
Senate Appropriations Committee
Washington, DC 20510

The Honorable Thad Cochran
Ranking Member
Senate Appropriations Committee
Washington, DC 20510

The Honorable Jerry Lewis
Chairman
House Appropriations Committee
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The Honorable Norm Dicks
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