OAA

# THE WHITE HOUSE

## Office of the Press Secretary

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**For Immediate Release** **July 14, 1995**

## STATEMENT BY THE PRESIDENT

Today I am pleased to mark the 30th anniversary of the Older Americans Act, an Act which has allowed millions of elderly Americans to live with dignity, safety and independence.

When President Johnson signed this bill into law 30 years ago, he characterized the best intentions of a Nation when he said:

"The Older Americans Act clearly affirms our Nation's sense of responsibility toward the well-being of all of our older citizens. But even more, the results of this act will help us to expand our opportunities for enriching the lives of all of our citizens in this country, now and in the years to come."

Indeed, we should be proud of our Nation's compact with older Americans and the public private partnership that is embodied in the Older Americans Act. This compact has included community-based services such as Meals on Wheels, transportation, ombudsman services and other efforts to prevent abuse of the elderly.

As the Congress considers reauthorization of the Older Americans Act this year, my Administration is committed to keeping the Act whole and preserving the core principles which have guided its success -- grass roots support, citizen input, bottom-up planning and coordination of services. Programs like the Title V Senior Community Service Employment Program have been instrumental in helping us all benefit from the accumulated experience and judgement of older Americans. I will fight to keep these programs strong, and to maintain the active role of the national aging network in assisting elderly Americans.

While we commemorate an important anniversary today, every American should be proud that we have greatly improved the way our people live their lives as they grow older, providing new hope for entire lifetimes of purpose and dignity. We must remember that with this kind of opportunity in a democracy goes continued responsibility. Our job today is to preserve this progress not only for our current seniors in their lifetimes, but for all generations of Americans to come.

-30-30-30-

General Info/B'ground

## OLDER AMERICANS ACT

The Older Americans Act (OAA) funds a range of home and community–based services including congregate and home–delivered meals (Meals–on–Wheels), transportation, information and referral, adult day care, and legal and employment services. **The OAA is of critical interest to senior centers since these centers are the key framework for providing OAA services.**

Reauthorization. Congress is in the midst of reauthorization of OAA. Floor action on the reauthorization bills is pending in both the House and Senate (rumors are that action is unlikely) . Advocacy groups and the Administration have several concerns with the House and Senate bills:

- Would move the National Senior Service Corps (Foster Grandparents, Senior Companion, and Retired and Volunteer Programs) to HHS' Administration on Aging from the Corporation for National Service where they are presently effectively administered and part of a larger "ageless" network of service programs.

- Weaken OAA's legal assistance for the elderly by eliminating Title VII which authorizes the long–term care ombudsman, elder abuse prevention, and legal services.

- Would block grant to states the Senior Community Service Employment Program (Title V), ignoring the exceptional record and experience of the national sponsors who currently receive funding under the program.

- Weaken existing targeting of low–income minorities, the neediest groups;

- Alters the current funding formula. The Administration has not taken a position on this contentious change which would decrease funding to several states, including New York and Maryland.

Title IV Research Programs. Congress' final FY 96 appropriations included only $2.85 million (a 90% reduction for the FY 95 level of $25.6 million) for Title IV of OAA which funds national training, technical assistance, and research activities. These programs are a great resource for the aging network, including senior centers and their research is considered critical for preparing for the "Aging of America." The Administration has proposed $11.6 million for Title IV for FY 97. The Administration on Aging just recently sent out notices to grantees informing them that additional funding this year is unlikely.

## SOCIAL SECURITY TRUST FUND

Wednesday's 1996 Trustees report concluded that -- even with no changes in current law-- the combined the Social Security Trust Fund is solvent through 2029 (one year earlier than reported last year). In 2029, the OASDI program would still be collecting tax revenues sufficient to cover about 77 percent of annual expenditures.

The Trustees said that is important to address the issue of Social Security's long-range insolvency within a reasonable period to allow time for phasing in any necessary changes and for workers to adjust their retirement plans to take account of those changes. At the same time, the Board stressed that there is ample time to discuss and evaluate alternative solutions with deliberation and care.

The Social Security Advisory Council is still deliberating. Its recommendations--expected to be a series of options rather than one recommendation--are expected this summer. Background, talking points, and Q&A on the Advisory Council are attached.

# OAA DELINEATION

#'s not current
(1995 $)

**TITLE I: DECLARATION OF OBJECTIVES; DEFINITIONS**
- Objectives of the Act

**TITLE II: ADMINISTRATION ON AGING**
- Establishment of AoA
- Functions of Assistant Secretary
- Establishes Federal Council on Aging
- General Administration of ACT

**TITLE III: GRANTS FOR STATE AND COMMUNITY PROGRAMS ON AGING**

Part A -- General Provisions:
- State Units on Aging
- Area Agencies on Aging
- Advisory Councils on Aging

Part B -- Supportive Services and Senior Centers ($306 million)
- Transportation
- Homemaker/chore
- Personal Care
- Information and Assistance
- Senior Centers

Part C -- Nutrition Program for the Elderly
- Congregate Nutrition Services ($376 million)
- Home-Delivered Nutrition Services ($94 million)
- School-Based Meals -- (Unfunded)

Part D -- In-Home Services for Frail Elderly ($9 million)
- Homemaker and home health aides
- Chore Maintenance
- Personal Care
- Minor home modification
- Respite

Part E -- Special Needs (UNFUNDED)

Part F -- Disease Prevention/Health Promotion ($17 million)
- Information at senior centers, meal sites, & home-delivered meals programs
- Health risk assessments
- Health screening (hypertension, glaucoma, cholesterol, vision, hearing, diabetes and nutrition screening)
- Prevention and reduction of alcohol, substance abuse, smoking cessation
- Physical fitness
- Prevention of depression
- Medication management
- Gerontological counseling

Part G -- Supportive Activities for Caretakers of Frail In-Home Service Recipients (UNFUNDED)
- Including victims of Alzheimer's
- How to obtain respite services

- How to participate in support groups

**TITLE IV: TRAINING, RESEARCH AND DISCRETIONARY PROJECTS AND PROGRAMS** ($26 million)
Part A -- Education and Training
Part B -- Research, Demonstrations & Other Activities

**TITLE V: COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS**

**TITLE VI: GRANTS FOR NATIVE AMERICANS** ($17 million)
Part A -- Indian Program
Part B -- Native Hawaiian Program

**TITLE VII: VULNERABLE ELDER RIGHTS PROTECTION**
Subtitle A: State Provisions
- Chapter 1 -- General State Provisions
- Chapter 2 -- State Long-Term Care Ombudsman Program ($4.5 million)
- Chapter 3 -- Elder Abuse, Neglect and Exploitation ($4.7 million)
- Chapter 4 -- Elder Rights and Legal Assistance Development
- Chapter 5 -- Outreach, Counseling, and Assistance Program ($2 million)

Subtitle B: Native American Organization Provisions

OAA



cated to States may be used to pay up to 85 percent of the cost of Title III service programs.

State agencies on aging award funds for Title III services to area agencies on aging for administration within their respective planning and service areas. The law requires each State agency to develop and publish for review and comment a formula to distribute Title III funds within the State. When the formula is published, it must include the following: a statement of assumptions and goals; application of the definitions of greatest economic and social need;[29] a numerical statement of the actual funding formula to be used; a listing of the population, economic, and social data to be used for each planning and service area; and a demonstration of how funds will be allocated to each planning and service area. The formula must be developed in consultation with area agencies and take into account the geographical distribution of older individuals within the State and the distribution among the planning and service areas of older individuals with the greatest economic and social need, with particular attention to low-income minorities. As a result of the 1992 amendments to the Act, States are required to submit their intrastate funding formulas to the Commissioner on Aging for approval.

*Allowable amounts for State and area agency administrative expenses.*—State agencies are allowed to use up to 5 percent of their services allotments, or $300,000, whichever is greater, to pay for administration of State plans. In the case of Guam, American Samoa, the U.S. Virgin Islands, the Trust Territory of the Pacific Islands, and the Commonwealth of the Northern Mariana Islands, State agencies may use the greater of 5 percent of their services allotments, or $75,000, for administration.[30]

In addition to limiting the amount for State administration, the law limits the amount of Title III funds that can be used for area plan administration. No more than 10 percent of a State agency's services allotments (after deduction of the amount to be used for State plan administration) may be used to pay for administrative expenses of area agencies.

Federal funds may be used to pay up to 75 percent of the costs of State and area agency administrative expenses.

## SUPPORTIVE SERVICES

A broad array of supportive services are authorized under Title III (part B); however, certain services are considered "priority" services. State agencies on aging are required to set a minimum percentage of supportive services funds to be spent by each area agency on the following categories of priority services:

- access (transportation, outreach, information and assistance, and case management);
- in-home services (homemaker and home health aide, visiting and telephone reassurance, chore maintenance, and supportive services for families of elderly victims of Alzheimer's and related diseases); and
- legal assistance.

Further, area agencies are required to spend an "adequate proportion" of their allotted funds for supportive services on these three service categories. The law allows State agencies to waive the requirement that area agencies

[29] See section on *Targeting of Services*, below, for definition of these terms.

[30] These allowable amounts for State plan administration are applicable as long as appropriations for Title III services (exclusive of funds for the USDA commodity program) do not exceed $800 million. If appropriations exceed $800 million, States would be allowed to use the greater of 5 percent of their services allotments, or $500,000; in the case of the territories, the greater of 5 percent of the services allotments, or $100,000. In addition, under certain circumstances, a State may use additional amounts (up to three-fourths of 1 percent of its services allotment) for administration.

expend an adequate proportion of funds on these service categories if they can demonstrate that services being furnished in their respective planning and service areas are sufficient to meet the need. In explaining the minimum percent requirement, added in the 1987 amendments to the Act, the Conferees stated:

This hardly ever happen

> If an area agency expends at least the minimum percentage set by the State, the area agency will have fulfilled the requirement to spend an adequate proportion of funds on such services. The minimum percentage is intended to be a floor, not a ceiling. Area agencies on aging are encouraged to devote additional funds to each of these service areas to meet local needs.[31]

Other services which area agencies may support with their supportive services funds include:

NO $$ for this in ages!

- acquisition, alteration, renovation, or construction of existing facil[illegible] to serve as multipurpose senior centers. (Construction of new facilities to be used as senior centers is allowable in areas where there are no other suitable structures available.) The State plan must assure [illegible] for not less than 10 years after acquisition of a center, or not less than 20 years after the completion of construction of a center, the facility will be used for the purpose intended. Funds may also be used for the operation of multipurpose senior centers; ← yes
- health education and training, welfare, information, recreational, c[illegible]seling or referral services;
- housing services, including residential repair and renovation, adaptation of homes for those with disabilities, and services designed to prevent unlawful entry into residences;
- services designed to avoid institutionalization, including client assessment through case management;
- health screening;
- preretirement and second career counseling;
- employment services such as job counseling and development, referral and placement;
- crime prevention and victim assistance programs;
- counseling regarding health and life insurance coverage;
- services for the prevention of abuse of older persons, including public education and outreach;
- services designed to enable mentally impaired older individuals to attain and maintain independent living;
- legal assistance and other counseling, such as tax and financial counseling;
- services designed to support family members and other programs providing voluntary care to older individuals in need of long-term care;
- intergenerational programs;
- information and training regarding guardianship and representative payee sponsorship; and
- any other service which is necessary for the general welfare of older persons.

AoA estimates that since 1982 about 7 to 9 million older persons per year have been served through the program. In FY 1991, about 36 percent of supportive service participants were low-income and about 17 percent were non-

[31] U.S. Congress. House. *Older Americans Act Amendments of 1987.* Conference Report to Accompany H.R. 1451. House Report No. 100-427. 100th Cong., 1st Sess. Nov. 9, 1987. Washington, GPO, 1987. p. 78-71.

# NATIONAL INSTITUTE OF SENIOR CENTERS/ NATIONAL COUNCIL ON THE AGING, INC.

## Senior Centers Reaching Maturity, Not Obsolescence

With senior centers recently celebrating their 50th Anniversary, some skeptics are suggesting that they have become obsolete; that their value and importance to the field of aging has somehow diminished over time. Not so, say senior advocates and professionals who serve those millions who attend the more than 15,000 senior centers located in communities large and small across the country.

Quite the contrary, senior centers have evolved as grass roots, neighborhood-based organizations striving to broker on behalf of an ever-changing senior citizen population. As such, senior centers:

1. Serve as primary conduits for the implementation of public policies formulated to address the needs of our aging population.
2. Integrate federal, state, community, neighborhood, and family supports by forming complementary partnerships upon which our aging society depends.
3. Approach aging as a family issue and act as family resource centers within the community.
4. Serve as existing, visible access points of entry linking seniors to community-based services.
5. Exhibit an inherent ability to shift and shape their responses to present needs.
6. Promote wellness health maintenance, personal responsibility, volunteerism and encouraged social interaction among seniors.
7. Serve diverse population of seniors; specifically reaching out to minorities, disabled individuals, the "young-old" and those in greatest social and economic need.
8. Represent the network linked by mutual goals and objectives, most utilized by senior citizens.
9. Provide non-threatening facilities which share a relationship of confidence and trust with seniors.
10. Offer a base-line infrastructure to build upon and strengthen each community's capacity to meet the challenges before us.

In summary, policy makers need to understand that senior centers are not the same as they were 50 years ago. The fact that centers have survived 50 years is a testament to their ability to adapt to a changing world. More of our nation's resources need to be directed toward expanding the impact of senior centers within our communities.

As the White House conference on Aging asks what aging services provisions should look like in the years to come, let's not make the mistake of taking senior centers for granted; or worse, foster the position that they have become less valuable, old practitioners in a new world. Let's not, in our zeal to try something new and different, discard a proven and effective tool available nationwide.

Let's instead, take advantage of our senior centers' capabilities and strive to recognize their importance to our aging population, and to our nation as a whole, as we attempt to formulate policies that will take us into the 21st Century.

*(Prepared by the National Institute of Senior Centers' Public Policy Committee. Rick Ryan, Chair, January 1995).*

# /HAT S A IULTIPURPOSE ENIOR CENTER?

N early every community has a multipurpose senior center. Over 8 million older adults participate in the approximately 9,000 senior centers throughout the ed States. The center is a hub for activities and ices for older persons, and a visible symbol of community's concern about its older residents. center has many functions—that's why a senior ter is called "multipurpose."

ne multipurpose senior center is a community lity in which older people can meet with one an- r to fulfill many of their social, physical, emo- al, and intellectual needs. It is also a focal point ervices to, and by, older persons. Center pro- ms and activities can help older persons en- ce their dignity, support their independence, i encourage their involvement in and with the nmunity.

enior centers provide access to community re- rces as well as to services and activities that ntain independence and wellness. Individuals ll generations interact and interrelate in many ts of senior center programs. Young, middle- d, and older persons form a community of mu- interests in which all concerned benefit from a nced, meaningful, and enjoyable program of vidual and group services.

## ıat Are Benefits of Participation?

lder men and women benefit through social in- ction with individuals of various ages, through cational programming, counseling, health pro- ion, employment counseling and placement, eational activities, and volunteer opportunities. ; come to senior centers for many different rea- s: to meet other people, to participate in spe- activities, or to obtain specific services to vide a seamless continuum of care. Those who e bring their talents, skills, and values. The je of program opportunities is rich and varied ugh to supply each individual with particular re- rces needed at that point to continue growth development.

## HOW DO SENIOR CENTERS BENEFIT COMMUNITY?

ACTION

**in health promotion**

- Senior centers screen thousands of older persons each year for high blood pressure and other health problems, and refer them to their physicians for follow up.

**in activities**

- Aerobics groups, such as the one in this Delaware senior center (below), are popular activities for senior center participants. Senior centers offer a range of other activities ranging from employment counseling and consumer education to trips.

MODERN MATURITY CENTER

BRUCE STROMBERG

**in community outreach**

- An older man enjoys a nutritious meal at a se center in Pennsylvania. Outreach programs identify isolated older people. Many will eve tually participate, with their peers, in progra such as nutritious meals. For others, the cent will organize help at home.

GEOFF COX

**in intergenerational programs**

- Support for families of chronically ill and disc children is provided, often through senior ce by older volunteers. Center programs also p vide such services as supervision for "latchk children during after-school hours.

Photographs by Bruce Stromberg were provided courtesy of the Philadelphia Corporation for Aging

**Among the diverse activities and services offered through multipurpose senior centers are:**

**Center Volunteering:** board participation, committee participation, policymaking, teaching classes, clerical.

**Education:** consumer classes, discussion groups, leadership development, writing courses, newsletters.

**Employment Assistance:** employment counseling, job aptitude testing, job placement, job training.

**Financial assistance:** tax aid, Social Security information, Medicare information.

**Health:** health promotion, nutritious meals, physical exams, screening, immunization; dental, nurse, and physician services.

**Information, referral, and counseling:** legal and financial, health and nutrition, housing and consumer, employment and retirement.

**Recreation:** the arts, newsletters, camping, dancing, movies, music and drama, parties and celebrations, crafts, physical fitness, sports, table games, tours and trips.

**Social/community action:** advocacy, legislative testimony, public relations, speakers' bureau.

**Special services:** hearing aid bank, lip reading classes, special counseling, talking books, therapy (physical, occupational, recreational), support groups.

**Transportation:** to and from the center; for shopping, appointments with doctors, field trips.

**Volunteering in the community:** friendly visiting, community fund drives, school aides.

This publication was produced through The National Institute of Senior Centers (NISC), a membership unit of The National Council on the Aging, Inc., and a central resource to help develop, improve, and expand the services and activities of senior centers throughout the country.

To receive further information on NISC, senior centers in general, or publications on how to establish a senior center in your own community, please write to:

The National Institute of Senior Centers
**THE NATIONAL COUNCIL ON THE AGING, INC.**
600 Maryland Avenue, SW
West Wing 100
Washington, DC 20024

For more information on your local senior center, contact:

# WHAT MULTIPURP SEN CENT

■ HELPING OLDE

STRENGTHENI G THE COMM

AoA Study - not yet released
Congregate Meals

When asked what they like most about the program, 77 percent of Title III congregate participants and 70 percent of the Title VI counterparts mentioned the other participants; 58 and 69 percent, respectively, mentioned the meals; and 30 and 23 percent mentioned supportive services. Seventy percent of Title III congregate participants and 61 percent of Title VI congregate participants take part in recreation activities provided by the meal program. Fifty percent or more of those participating in recreational activities at the meal site report that these activities are either the only source or a major source of their social activity. These responses suggest that participants are generally satisfied with the meals and that the socialization aspect of the program is also important to them.

## PROGRAM PARTICIPANTS

In principle, Title III is available to everyone age 60 and older, but its authorizing legislation requires special efforts to target the program to populations who particularly need ENP services. The evidence from the evaluation shows that the program has achieved considerable success in accomplishing this "targeting" objective.

The ENP serves highly vulnerable people with characteristics that tend to put them at increased health and nutritional risk. ENP participants tend to be older, poorer, more likely to be members of racial or ethnic minorities, and more likely to live alone, compared with the overall population in the United States age 60 and older.[4] Participants are also more likely to be in poor health, to have greater difficulty performing everyday tasks, and to have relatively high nutritional risk. These and related client characteristics are examined next.

### Demographic Characteristics

For Title III, the average congregate meal participant is 76 years old, and the average home-delivered one is 78 (Figure 5). By contrast, the average age in the overall U.S. population age 60 and older is approximately 72. This pattern suggests that the program is directing its services to people who, at least in terms of age, are most likely to need them.

INDIAN

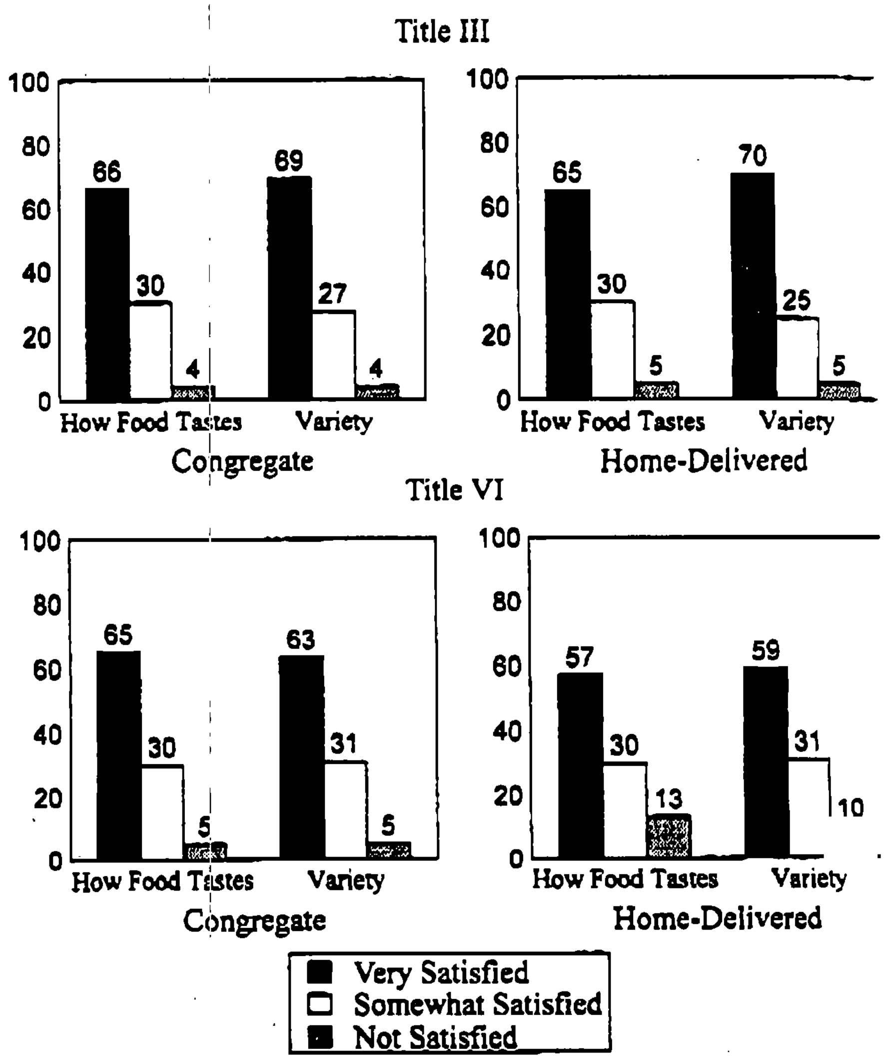
The average ages of Title VI participants--68 for congregate participants and 71 for home-delivered ones--are considerably lower than those for Title III. In part, this reflects the fact that the minimum age for eligibility in Title III is 60, but the minimum age for eligibility in Title VI is established by ITOs and may be as low as 45. In our survey, Title III participants ranged in age from 31 to 101; the range for Title VI was 23 to 103.[5]

ENP participants have significant economic and/or social needs. About one-third of Title III congregate participants and one-half of Title III home-delivered participants have incomes at or below the DHHS poverty threshold. More than one-half of Title VI meal participants have incomes at or below this level. The comparable figure for the overall population age 60 and older is 15 percent. Most of the rest are

## Satisfaction with Services

Sixty-six percent of Title III congregate participants and 65 percent of Title III home-delivered participants describe themselves as "very satisfied" with how the food tastes (Figure 4). The comparable figures for Title VI are 65 percent and 57 percent. For other questions on the food served, the numbers of "very satisfied" tend to be 60 percent or more. Most of the respondents who did not choose "very satisfied" (the highest level on the four-point scale) selected the next-highest level, indicating they were "somewhat satisfied."

**Figure 4: Most Participants Are Satisfied with Program Meals (Percentages)**



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Secretary
Administration on Aging

Washington, D.C. 20201

MAY 1 1995

**MEMORANDUM**

TO: Molly Brostrom
Domestic Policy Council

FROM: Portia Mittelman PPM
Administration on Aging

RE: Talking Points on the Older Americans Act

VIA FAX

It was good talking with you this morning. As we discussed, outlined below are a few bullets on the Older Americans Act. Hope this is helpful.

THE OLDER AMERICANS ACT

- 1995 marks the 30th Anniversary of the Older Americans Act (OAA), legislation designed to provide a range of programs offering services to older Americans, particularly those at risk of losing their independence. Services under the Act are not means-tested.

- The basic principles of the Older Americans Act emerged from the deliberations of the first White House Conference on Aging held in 1961. That forum also yielded the outline of the Medicare and Medicaid programs.

- Services provided under the OAA include: nutrition (Meals on Wheels and congregate nutrition sites); transportation; health promotion; legal assistance; insurance counseling; and elder abuse prevention.

- Programs are offered through the Aging Network, consisting of 670 Area Agencies on Aging, 57 State Units (States and Territories) on Aging, 228 Tribal Entities, and more than 27,000 service providers, and 500,000 volunteers. The Act provides a model for Federal-State-local cooperation that is in keeping with the Clinton Administration's commitment to devolution of government. States are able to fashion programs to reflect individual needs/priorities.

- While maintaining Federal guidance and oversight, the tenets of the Older Americans Act highlight State and local involvement. The grassroots nature of the Act allows programs to constantly evolve to meet specific needs. flexibility o The programs under the OAA are part of a larger fabric of home and community based services designed to ensure that older persons are able to remain in their homes, avoiding costly institutional care.

o The approach of the 21st century also provides a catalyst for reviewing OAA programs. The next century will usher in a doubling of the aging population, as well as greater diversity among seniors. Older Americans Act services will prove to be even more essential as the number of elderly persons continues to increase.

o The National Performance Review (NPR) activities have offered a unique opportunity to review the structure of the Older Americans Act, and assess the overall operation of the programs. While Older Americans Act services have proven themselves to work, and work well, there can always be room for improvement. The Administration on Aging (the entity with jurisdiction over the programs under the Act) is in the process of determining ways to strengthen the OAA, without undermining the integrity of its programs.

o Recent proposals to block-grant OAA programs (particularly nutrition services), would negatively impact on the efficiency and effectiveness of services. Without some degree of Federal oversight, States may be forced to make difficult choices that could result in certain constituencies vying with each other for reduced funding.

o The Older Americans Act functions as a solid partnership between Federal, State and local government, ensuring accountability, productivity, quality, and flexibility to service the needs of a given community.

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Molly: I am also including with this memo fax the Executive Summary of a report issued by Johns Hopkins University which maintained that the Older Americans Act should be used as a model for other Federal programs, particularly those services directed to children. I thought it might be interesting for you to quickly review. Please call me if you need additional info.

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# RETHINKING THE ORGANIZATION OF CHILDREN'S PROGRAMS: LESSONS FROM THE ELDERLY

## EXECUTIVE SUMMARY

March 1995

# RETHINKING THE ORGANIZATION OF CHILDREN'S PROGRAMS: LESSONS FROM THE ELDERLY

## Basis for the Study

Despite alarming statistics regarding the health, economic and psychosocial status and academic achievement of children and youth, the United States does not have a "system" of care for our youngest citizens. Rather, there are more than 300 separate programs that have been categorically established and implemented over the last three decades to address the health, social and education needs of children and families, creating a complex, fragmented patchwork of services and programs. Fragmentation in and of itself would not be a serious national policy issue if America's children were doing well. Unfortunately, this is not the case.

In contrast to children, the elderly in this country enjoy universal entitlement to national health insurance through Medicare, a uniform base level of income security, and an organized system of community-based health, nutritional and social services. Therefore, in this paper, we argue that the system which seems to work for grandparents ought to be available for grandchildren. We apply the models from services for the elderly to inform the national debate on health, education, and welfare reform for young people and their families.

Legislation for the elderly was chosen as a model because there are a number of fundamental similarities between the elderly and children: each is an easily identifiable population based on age criteria alone; both children and the elderly exhibit particular developmental vulnerabilities as individuals at the ends of the age spectrum, both populations are characterized by a certain level of dependency, requiring that service responses involve families and/or community caretakers, and both populations have traditionally been considered deserving of special societal protections.

This monograph analyzes the organizational structures and functions of the Older Americans Act (OAA) of 1965 to propose a model for reforms to meet the needs of children and families. The analysis includes reviews of the legislative and organizational histories of both maternal and child health services and the Older Americans Act; information gathered in key informant interviews; and a side-by-side comparison of two statutes -- the OAA and Title V of the Social Security Act.

## History and Current Context

The Nation's initial response to the plight of children in the first half of this century resulted in a unified approach through the Children's Bureau to address "all matters pertaining to the welfare of children and child life among all classes." However, federally legislated child-oriented programs implemented today represent a mix of income-based entitlement programs; quasi-entitlement programs; categorical population or disease-specific programs; age-specific entitlement programs as well as "gap filling" formula grant funded programs. As such, this current body of federal authorizing legislation for children and their implementing regulations are not coordinated. Despite ardent calls for major modifications of the Nation's policies and programs affecting child health and welfare, the "system" (or non-system) of services for children remains in disarray.

In contrast, the national program established through the Older Americans Act (OAA) legislation was designed to address in a consolidated fashion multiple aspects of the lives of the elderly. The overarching purpose of the Act was to establish a framework for a comprehensive system designed to assist older individuals in maintaining and maximizing independence by removing barriers to access and by providing for a continuum of care at the community level. While never intended to meet all needs, the OAA has provided the major legislative infrastructure for "planning of, and advocacy for, services and activities to benefit older persons."

The OAA establishes a high-level, visible national locus for information, policy development and coordination, advocacy, research, demonstration and professional training. Legislation provides the foundation for a "network on aging," linking a federal Administration on Aging, State Units on Aging, Area Agencies on Aging, citizen advisory committees, and local public and private agencies. The OAA also provides the legislative structure for a uniform consolidated program of comprehensive, community-based planning, and preventive and social services which complement the medical care financing and income support provided the elder population through Medicare and Social Security. Approximately thirty categorical services for the elderly are incorporated. A uniform set of core services is required for all communities, however, flexibility is permitted in the array of optional supportive services a locality supports with program funds. The OAA establishes a Federal Council on the Aging, and specifies program linkages and roles with respect to federal programs serving the elderly that are not implemented under its authority.

## Framework for Comparison

The side-by-side analysis of the legislative bases for community-based services for the elderly, and for children compares the best features of the OAA, and of Title V of the Social Security Act, the Maternal and Child Health Services Block Grant.

Several policy and organizational principles applicable for meeting children's needs are threaded throughout the provisions of the Older Americans Act's seven titles, including:

- a single, highly visible, national locus is assured for policy development and coordination, and for providing public advocacy for and information on the population;
- an administrative infrastructure at the national, state, and local levels wherein consolidated planning with respect to all issues of concern to the population is conducted;
- program services are universally available to the population, which is defined by age, irrespective of income status;
- community-based services funded are those which complement and enhance access to major income and health entitlements;
- a broad and flexible scope of community-based services is administratively consolidated at the state and local levels, with a uniform set of core services (eg., nutrition, supportive services and multipurpose centers, elder rights protection programs) protected federally through line item funding and statutory and regulatory assurances;
- community level information and referral resources are centralized, and services co-location is maximized;
- advocacy, and consumer/public participation in program planning and oversight is legitimized, and
- research, training and service demonstrations specific to population issues and needs are used to promote improvements in quality of care and services.

Title V of the Social Security Act is used to provide the child focus of the analysis because the legislation incorporates a number of features which we believe allow it to serve as a vehicle, or starting point, for systems reform. These include:

- permanent authorization under the Social Security Act, providing stability for administration of the policy and program infrastructure and indicating a priority for child health as part of a larger national commitment to the well-being of its citizens;
- specified responsibility for planning and reporting related to national objectives, including recognition of a broad responsibility for **all** children that extends beyond a narrowly defined programmatic focus;
- requirements for substantive state matching funds which promote development of constituencies within communities and state legislatures and which leverage funds well beyond those allocated federally;
- support for a structure of population-based, universally-oriented preventive and support services, and for highly specialized services which are targeted to particularly vulnerable subpopulations;
- specified requirements for coordination with Medicaid, especially, to ensure access, and quality of care provided through the federal insurance program for low-income children;
- promotion of a family orientation influencing the structure of service delivery such that care for children is developmentally appropriate and responsively planned; and
- inclusion of a component for research, training and demonstrations to assure quality throughout and to promote system improvements.

Comparison of the Older Americans Act and the national program for Maternal and Child Health Services reveals a number of important parallels in underlying policy principles and legislative intent. However, key differences between the two pieces of legislation point to at least four central aspects of the OAA federal organization, programs, and policy principles that may apply to a new maternal and child health organization at the federal, state, and community levels.

## Analysis: Implementation of the OAA and Title V MCH at Federal, State and Community Levels

The report includes a structured and detailed analysis of those features found in the OAA that are missing from, but highly important for, community-based services for children and families. The OAA exhibits significant advantages with respect to meaningful representation of population concerns in the upper echelons of government, constituent access to policy-making, centralized, clearly identifiable government accountability and increased access to services at the local level. Functions of and relationships among public programs, agencies, private sector providers and consumers are outlined in statute. These provisions establish the foundation for a systems approach to planning at all levels and providing vehicles for supporting community programming which relates the multiple domains of health, social services, education, and family support, which allow holistic interventions for individuals and families in need. Universally available core services facilitate understanding of the system among legislators and other policymakers, as well as taxpayers. While a uniform core of services is mandated, the OAA promotes local flexibility in how services are delivered, and in constituting the array of ancillary preventive and support services that wrap around the core. Legislated mechanisms for consumer protection and advocacy, and a prominent consumer role in local, state and federal policy formulation assure protections for the elderly not enjoyed by children in this country.

## Conclusions and Recommendations

We thus find the OAA instructive as to how health, welfare and education reform initiatives might be envisioned to create structures nationally that are linked horizontally and vertically requiring consolidated policy development, planning and accountability addressing the full scope of issues and public programs key to child and family health and well-being. Based on the analysis, we propose that the first and most fundamental step to achieving parity between children and the elderly is a major rewrite of federal legislation authorizing key health, social services, and education programs. Revisions are needed to eliminate conflicts, overlap, gaps and fragmentation, and to maximize coordination within and among systems. While progress in achieving consolidation and coordination objectives is possible at the local, and even state levels, we are convinced that federal legislation will continue to drive the system, and that significant change based on principles of equity cannot occur without this step.

Further, we believe that revisions to national legislation must occur consistent with the following principles:

1. a national policy focus and vision for healthy children and strong families, as well as governmental accountability for outcomes consistent with that vision, through creation of a free-standing statutorily authorized National Council on Children and Families;
2. structures and authorities necessary to address service access and coordination complexities, fragmentation, overlap, and barriers at all levels, and to increase efficiencies and effectiveness of the planning, data, resource allocation functions of government, implemented through federal legislation, reorganization within DHHS, and creation, in each State, of a mandated independent Single State Authority for Child and Family Policy and sub-state Children and Families Authorities;
3. a universally available uniform core of preventive and support services established through federal legislation which can be configured with local flexibility to promote service availability and access in all communities; and
4. child advocacy, and consumer participation in services and system design and oversight at all levels of government, implemented through ombudsman services, and mandated Family Advisory Councils.

In many ways these recommendations reflect a return to the national principles first enunciated by the Children's Bureau, but lost through the evolution of health and social service program development of the last three decades. This approach, however, moves beyond the tenants of the past by promoting bureaucratic efficiencies consistent with contemporary management practices which would eliminate overlap and duplication in planning, data, and prevention and support services programming. Implementation of these recommendations would allow for consolidating funds at the local level, as well as for consumer-directed flexible service design and resource allocation within communities.

This paper demonstrates how effective legislative, structural, and programmatic elements can be borrowed from one population to serve the needs of the other. As a nation we need to have the political courage to extend the attributes of a system that works for grandparents to their grandchildren.

*This report was prepared by Holly Grason, MA and Bernard Guyer, MD, MPH, Child and Adolescent Health Policy Center, The Johns Hopkins University School of Hygiene and Public Health. Development of this document was supported in part by a Cooperative Agreement (MCU 243A19) from the Maternal and Child Health Bureau (Title V, Social Security Act), Health Resources and Services Administration, Department of Health and Human Services. To request a copy of the full report,* ***Rethinking the Organization of Children's Programs: Lessons from the Elderly. Study Report****, contact the Child and Adolescent Health Policy Center, The Johns Hopkins University, Department of Maternal and Child Health, 624 North Broadway, Room 192, Baltimore MD 21205. (410)550-5443, FAX: (410)955-2303.*

## Older Americans Act

The Older Americans Act was created in 1965 by Congress to specifically meet the social services needs of older persons, in particular those who are most at risk and who are vulnerable. Over the past 30 years, the Older Americans Act has created the framework for a comprehensive State and local network of services through the vast aging network and supports activities for the elderly which did not exist before 1965. The Older Americans Act is a primary source of Federal support for the planning of, and advocacy for, services and activities to benefit older persons. It provides supportive and nutrition services for older persons (title III), including native Americans (title VI), and has major responsibilities for training, research (title IV) and job creation for low income older Americans (title V). It also provides services that serve to protect the rights of the elderly, in particular from abuse of any type (title VII added to the Act in the 1992 Amendments).

The Older Americans Act also is responsible for the establishment of the Administration on Aging within the Department of Health and Human Services and mandates that this agency, and its head, the Assistant Secretary for Aging, serve as the visible advocate for the needs of older Americans throughout the country (title II).

**Appropriations Status:**

The Older Americans Act budget for FY 1995 is $876,095. On August 4, the House approved the Labor/HHS/Appropriations bill for FY 1996 which reduced the total figure for the Older Americans Act approximately $146 million (approximately $100 million for programs administered directly by the Administration on Aging and $46 million for Title V, which is administered by the Department of Labor.) This proposal would reduce the total number of the appropriations for the programs administered by the Administration on Aging to $770,246. It would also reduce or zero out critical programs that serve the elderly -- such as meals programs (meals on wheels, or meals served at congregate sites), transportation services, elder rights protections services, such as elder abuse prevention, legal services, and ombudsman programs. These cuts would cause a severe hardship on seniors who depend upon these services to remain healthy, independent and living securely within their communities and their homes. The impact of these cuts would be devastating.

On September 13, the Senate Subcommittee on Labor/HHS/Education Appropriations approved its FY 1996 budget numbers which increased or brought back to current levels the funding of programs which had been cut by the House. These include increases for home delivered meals (Meals on Wheels) ($110,339), and restored funding for ombudsman services ($4,449) and elder abuse programs ($4,732),and some modest funding for Title IV, Research, Training and Demonstration Programs ($4,991). (Chart Attached)

The Senate Full Committee is expected to markup this legislation by Friday, September 15. This will be followed by Floor Vote and then Conference Committee action expected to go beyond the end of the fiscal year.

**Reauthorization Status:**

The Older Americans Act is scheduled to expire on September 30, 1995. The Administration has proposed a reauthorization bill, H.R. 2056, which was introduced on July 18 by Rep. Matthew G. Martinez (D-CA). It currently has no cosponsors. The Majority staff (Goodling, R-PA)/Cunningham R-CA) of the House Committee on Economic and Educational Opportunities are currently circulating, to Members of the Committee and to various members of the aging network, a staff discussion draft of a reauthorization proposal which would reauthorize the Older Americans Act for five years.

The Administration on Aging opposes the "Goodling" bill in totality and has expressed that opposition to the Committee. It is expected that the Goodling bill will be formally introduced in the very near future. It is also expected that the Committee will hold no hearings prior to going to markup on some yet to be determined date.

The Administration's proposal maintains the integrity of the Older Americans Act by keeping its seven titles intact, and by preserving its strengths and its successes. It continues to focus special attention to those seniors who are most vulnerable and in social and economic need, with particular attention to low income minorities, as defined by statute.

It promotes the development of a comprehensive and coordinated continuum of services that addresses the access and supportive services of older persons and their families. It demonstrates a commitment to flexibility to those who serve older persons, and it increases the capacity of the infrastructure to adjust to the changing definition and attitudes about aging.

H.R. 2056 was developed in coordination and cooperation with the aging network, made up of State and area agencies on aging, service providers, seniors and volunteers.

The Goodling staff discussion draft does not keep the Older Americans Act intact or preserve its integrity. It reduces the Act to 4 titles, the 4th of which is a new title which would bring the older American volunteer programs currently housed at the Corporation for National Service to the Administration on Aging It attempts to consolidate and provide flexibility but in doing so, it eliminates major components of the Act or in doing so, greatly reduces their capacity to function. Some functions currently administered under Title IV are proposed to be moved to

Title II with no funding ability. Most of the components of Title VII, the Vulnerable Elder Rights Protection section, are consolidated into the Title III and made optional to the States and area agencies on aging, with the exception of ombudsman services. However, there is language that states that a State cannot spend more than 1.5% of total Title III monies on all of these elder rights programs all together. In a minimum State, like Maine or Rhode Island, that would come to about $7000 for all elder rights protection activities.

The Goodling approach includes cost sharing as an option (as the Administration bill does) but does not exclude nutrition. This would greatly change the nature of the current successful nutrition program which right now enjoys a voluntary contribution program. The Goodling bill also changes the whole nature of the nutrition program, making it more like a block grant where it is just meals, not the other services that have historically gone along with meals delivery.

The Goodling bill eliminates all mention of targeting requirements to those in the most social and economic need and also eliminates all mention of low income minorities, except in one section that groups special populations together, such as Alzheimer's victims, those with limited english speaking ability, those with severe disabilities and rural elderly.

An analysis of both proposals is attached for further detail. Please note that for Title V of the Act, the Senior Community Service Employment Program, the Goodling bill does propose bringing this program to AoA but in a greatly changed format than it presently has operated, making it solely a State run program.

Senate reauthorization status:

It is expected that early next week Senator Mikulski (D-MD) will introduce the Administration's Older Americans Act reauthorization proposal. We have received indications that support would then follow from Senators Pryor (D-AR) and Kennedy (D-MA). The Majority staff of the Subcommittee on Aging of Labor and Human Resources has only just begun to draft their own OAA proposal, and have indicated it will not certainly be reauthorized long past the expiration date.

**Title V Status**

On September 13, Senator Barbara Mikulski proposed an amendment on the Senate floor during welfare reform debate which would strike Title V from S. 143, the Kassebaum job training block grant legislation. This amendment passed with a vote of 55 to 45 and removes the Title V program from the block grant. This would leave it as it is in its present state as part of the Older Americans Act but administered by the Department of Labor. Those speaking in favor of the amendment were Sen. Mikulksi and

Sen. Charles Grassley (R-IOWA) and against were Sens. Kassebaum and Gregg.

**Comments:**

Administration on Aging staff visited with staff of the Minority side of the House EEO Committee on September 13 to talk about the two proposed bills and to compare notes. Earlier in the day, these staff members held a meeting with representatives of major aging organizations to hear their concerns. These representatives voiced their opposition to parts or all of the Goodling proposal and were urged by the Committee staff to continue to share their thoughts on the bill. Committee staff report that they are not hearing from seniors or senior advocates in opposition to the Goodling bill. Senior organization representatives indicated that their main focus has been on appropriations and Title V, but that they would be stepping up their activities in the very near future.

The Administration on Aging continues to respond to Congressional inquiries on the Older Americans Act and to provide information as requested. In addition, staff of the Administration on Aging met with representatives of the aging network to provide an analysis of the bills.

SEP 14 '95 02:08PM HHS/AOA/ASA

| | | FY 1995 Comparable | FY 1996 Request | House Bill | Senate Bill | Senate Bill compared with FY 1995 | Senate Bill compared with FY96 Budget | Senate Bill compared with House Bill | | Man Dis |
|---|---|---|---|---|---|---|---|---|---|---|
| 44450 | ADMINISTRATION ON AGING | | | | | | | | 44450 | |
| 44500 | AGING SERVICES PROGRAMS | | | | | | | | 44500 | |
| 44550 | Grants to States: | | | | | | | | 44550 | |
| 44600 | Supportive services and centers.................... | 306,711 | 306,711 | 291,375 | 291,375 | -15,336 | -15,336 | --- | 44600 | D |
| 44650 | Ombudsman services............................... | 4,449 | 4,449 | --- | 4,449 | --- | --- | +4,449 | 44650 | D |
| 44700 | Prevention of elder abuse.......................... | 4,732 | 6,232 | --- | 4,732 | --- | -1,500 | +4,732 | 44700 | D |
| 44750 | Pension counseling................................ | 1,976 | 1,976 | --- | --- | -1,976 | -1,976 | --- | 44750 | D |
| 44800 | Preventive health.................................. | 16,982 | 16,982 | --- | 15,623 | -1,359 | -1,359 | +15,623 | 44800 | D |
| 44850 | Nutrition: | | | | | | | | 44850 | |
| 44900 | Congregate meals.................................. | 375,809 | 375,809 | 357,019 | 364,535 | -11,274 | -11,274 | +7,516 | 44900 | D |
| 44950 | Home-delivered meals.............................. | 94,065 | 94,065 | 89,362 | 110,339 | +16,274 | +16,274 | +20,977 | 44950 | D |
| 45000 | ~~Frail elderly in-home services~~........................ | 9,263 | 9,263 | 9,263 | 9,263 | --- | --- | --- | 45000 | D |
| 45050 | Grants to Indians.................................... | 16,902 | 18,402 | 16,057 | 15,550 | -1,352 | -2,852 | -507 | 45050 | D |
| 45100 | Aging research, training and special projects......... | 25,630 | 45,134 | --- | 4,991 | -20,639 | -40,143 | +4,991 | 45100 | D |
| 45150 | Federal Council on Aging.............................. | 176 | 226 | --- | --- | -176 | -226 | --- | 45150 | D |
| 45200 | White House Conference on Aging....................... | 3,000 | 500 | --- | --- | -3,000 | -500 | --- | 45200 | D |
| 45250 | Program administration................................ | 16,400 | 17,399 | 15,170 | 15,170 | -1,230 | -2,229 | --- | 45250 | D |
| 45300 | Total, Administration on Aging.................. | 876,095 | 897,148 | 778,246 | 836,027 | -40,068 | -61,121 | +57,781 | 45300 | |

Title V    396    410    350    $273m

P.6

# REAUTHORIZATION OF THE OLDER AMERICANS ACT -- 1995

## H.R. 2056 (Martinez)
## Administration Proposal

**GENERAL**

The bill is for a three-year reauthorization which retains all seven titles because of the significance each one has to the aging network and the lives of older individuals.

- Title I: Declaration of Objectives; Definitions
- Title II: Administration on Aging
- Title III: Grants for State and Community Programs on Aging
  - Part A -- General Provisions
  - Part B -- Supportive Services and Senior Centers
  - Part C -- Nutrition Services
    - Subpart 1 -- Congregate Nutrition Services
    - Subpart 2 -- Home Delivered Nutrition Services
- Title IV: Research, Development, and Demonstrations
  - Part A -- Education and Training
  - Part B -- Research, Development, and Demonstrations
  - Part C -- Centers
  - Part D -- Information Dissemination and Related Activities
- Title V: Community Service Employment for Older Americans
- Title VI: Grants for Native Americans
  - Part A -- Indian Program
  - Part B -- Native Hawaiian Program
  - Part C -- General Provisions
- Title VII: Vulnerable Elder Rights Protection Activities
  - Subtitle A -- State Provisions
    - Chapter 1 -- General State Provisions
    - Chapter 2 -- Ombudsman Programs
    - Chapter 3 -- Programs for the Prevention of Elder Abuse, Neglect, and Exploitation
    - Chapter 4 -- State Elder Rights and Legal Assistance Development Program
    - Chapter 5 -- Outreach, Counseling, and Assistance Program
  - Subtitle B -- Native American Organization Provisions
  - Subtitle C -- General Provisions

## Goodling's Staff
## Draft

**GENERAL**

This bill is for a five-year reauthorization which deletes Titles IV, V, VI, and VII and incorporates components of these titles into Titles II and III.

- Title I: Declaration of Objectives; Definitions
- Title II: Administration
- Title III: Grants for Programs on Aging
  - Subtitle A -- Grants for State and Community Programs
    - Chapter 1 -- General Provisions
    - Chapter 2 -- Supportive Services and Multipurpose Senior Centers
    - Chapter 3 -- Nutrition Services
    - Chapter 4 -- Community Service Employment for Older Americans
  - Subtitle B -- Grants for Native American Programs
  - Subtitle C -- Authorization of Appropriations
- Title IV: National Senior Volunteer Corps
  - Subtitle A -- Retired and Senior Volunteer Program
  - Subtitle B -- Foster Grandparent Program
  - Subtitle C -- Senior Companion Volunteer Program
  - Subtitle D -- General Provisions
  - Subtitle E -- Administration and Coordination
  - Subtitle F -- Authorization of Appropriations

The bill retains the "with particular attention to low-income minorities" provisions and focus. The bill also retains priority services.

The bill focuses on flexibility, consolidation and streamlining within titles, accountability, and customer orientation.

The bill retains authority for the Federal Council on Aging and the convening of a White House Conference on Aging in the Year 2005.

## TITLE I - DECLARATION OF OBJECTIVES; DEFINITIONS

The objectives in the Act were retained without change. We believe they are still appropriate for the aging network. They focus on the traditional American concept of an individual's dignity in our democratic society.

## TITLE II - ADMINISTRATION ON AGING

We have added authority for the Assistant Secretary to negotiate performance partnerships with the States for the purpose of streamlining, adding flexibility, enhancing quality, accountability and choice. We will be focusing on building an enhanced partnership with the network, one which further devolves responsibility and joins hands with the States and others throughout the network to develop solutions to the issues collectively faced by older individuals today and those to be faced by a future aging society.

Additionally, we added authority for the permanent establishment of the National Eldercare Locator. This has been a demonstration funded under Title IV which has proven to be very successful. We are transferring the funding from Title IV to Title II for the operation of the service.

The bill removes the language "with particular attention to low-income minorities" from the Act. The bill also removes priority services.

The bill focuses on streamlining, consolidating, and the general granting of more flexibility to the States. Additionally, it has similar components focused on consumer orientation and direction.

The bill contains no provisions for the Federal Council on Aging or a White House Conferenc on Aging.

## TITLE I: DECLARATION OF OBJECTIVES; DEFINITIONS

This section has not yet been drafted. Many items cannot be analyzed until the definitions have been drafted.

## TITLE II: ADMINISTRATION

This contains specification for four positions in addition to the Assistant Secretary for Aging. These positions include the areas of Native American programs, the Ombudsman program, a nutritionist, and an administrator for the volunteer service programs, but are different from current law and the Administration's bill which creates positions to oversee selected offices and programs.

The general authority previously under Title IV is incorporated here. It includes authority to make grants for the purpose of expanding the nation's knowledge; designing, testing, and promoting innovative ideas and best practices; meeting the needs for trained personnel; increasing awareness of the need to assume personal responsibility for one's own aging; conducting research and demonstrations; and the provision of training and technical assistance is incorporated here.

There is no mention of the Eldercare Locator. The provisions for a uniform data collection system (NAPIS) are retained, as well as the gathering of statistical data and consultation with other federal agencies. Additionally, the focus on the ASA as the effective and visible advocate is retained.

## TITLE III - GRANTS FOR STATE AND COMMUNITY PROGRAMS ON AGING

Title III is retained. In order to restore flexibility of State and Area Agencies on Aging to respond to differing and changing local needs, we eliminated the following categorical sub-part programs and put the authority for them under the supportive services part:

- D - In-Home Services for Frail Older Individuals
- E - Additional Assistance for Special Needs of Older Individuals
- F - Disease Prevention and Health Promotion Services
- G - Supportive Activities for Caretakers Who Provide In-Home Services to Frail Older Individuals.

This will restore the primary focus by integrating them back into the two broad categories of nutrition and supportive services while eliminating the need for separate grant allocations, reports, and funding formulas.

For Part C - Nutrition Program for the Elderly, we consolidated by eliminating the unfunded subpart for school-based meals, but granted authority for States to perform this function under the congregate nutrition services subpart. We then transferred authority from USDA to AoA for the meal reimbursement program, but modified the manner in which it is administered to lessen the administrative burdens on States and local agencies.

Consistent with the principles of performance partnerships, we have eliminated nearly one-half of the list of items which States and Area Agencies must illustrate in their plans, or which are categorized as the federal government prescribing "how to" achieve certain national goals. The goal of the reauthorization proposal was on enhancing the efficiency and effectiveness of administration at the local level.

The proposal balances the distinct interests of the partners in the aging network. Additional flexibility is granted through enhanced waiver authority. Additionally, there is recognition of and facilitation for the aging network to continue to be innovative in the design and delivery of home and community-based services. Authority is granted to permit cost-sharing for selected services and to focus on developing consumer-directed service systems.

## TITLE III: GRANTS FOR PROGRAMS ON AGING
## SUBTITLE A: GRANTS FOR STATE AND COMMUNITY PROGRAMS ON AGING

**Chapter 1 -- General Provisions**

No change in the Interstate Funding Formula or the Hold Harmless Year (1987).

The total federal share remains 85%; however, of the allotments made, such part as determined by the State, but not more than 1.5 percent may be used to carry out the statewide activities associated with the current Title VII activities (protect the rights of vulnerable older individuals; to prevent elder abuse, neglect, and exploitation; or to carry out the State long-term care ombudsman program).

The AAA administrative costs are limited to 7 percent, down from the current 10 percent.

State administrative costs are increased to 7 percent, up from 5 percent.

Administration...
designation of AAAs retained
development of plans...but only with views of recipients, individuals using senior centers, and in consultation with AAAs using best available data...publish for review and comment IFF, taking into account:
- geog. distribution
- greatest economic need
- greatest social need

with no focus or mention of low-income minorities.

**Ombudsman program...**
Retained with all the advances, protections and improvements made through the recent reauthorizations.
- No limits on the amount of funds to be utilized in the program

**Legal Services...**
Retained as a mandated priority service to be provided by States and AAAs because of the needs of vulnerable older individuals

**Elder Abuse...**
Retained as a service to be provided through the Statewide development of an Elder Rights System under Title VII, with the ability to fund specific activities at the State and local level out of Title III.

**Ombudsman program...**
- State shall provide assurances that it will carry out a program
- State may carry out directly or by contract or other arrangement with any public or nonprofit private organization
- State may designate any entity as a local ombudsman entity and an individual to represent the entity, as opposed to the programs being designated by the Office of the state Long Term Care Ombudsman
- State shall establish policies and procedures for monitoring local entities...if entities are AAAs, they are to be developed in consultation with AAAs.
- access requirements retained
- reporting system for collecting and analyzing data related to complaints, but not the specific responsibilities added in 1992 due to the poor reporting on Ombudsman activities
- State shall establish procedures for disclosure of files and records
- conflict of interest referenced, but some of the existing safeguards are deleted
- legal representation retained
- noninterference retained

**Legal Services -- optional**
"If a State elects to provide legal assistance, the plan shall contain...assurances

**Elder Abuse -- optional**
"If the state elects to provide services for the prevention of elder abuse...
the plan shall contain an assurance

**Outreach** -- Plan shall provide assurances that the state will require outreach efforts with emphasis on rural, greatest economic need, greatest social need, severe disabilities, limited English speaking, Alzheimer's, and low-income minority individuals.

**Multigenerational Services** --
Plan shall provide assurances that efforts will be made to coordinate services with other services provide multigenerational activities.

**Quality Assurance** -- plan shall have assurances that a mechanism exists for provision of quality in services

**Cost Sharing...**
An option for the States to implement for purposes of enhancing coordination. Exempts I&A, outreach, benefits counseling, case management, ombudsman, protective services, nutrition services and low-income individuals based on a threshold set by the State.

## TITLE IV - TRAINING, RESEARCH, AND DISCRETIONARY PROJECTS AND PROGRAMS

We focused on four principles:

- Simplifying and Condensing
- Restoring Discretion
- Updating and Modernizing the Language
- Reconstructing and Balancing the Functions

As a result we eliminated the specificity and categorized functions into the following broad areas:

- Education and Training
- Research, Development and Demonstrations
- Centers
- Information Dissemination and Related Activities

## TITLE V - COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS

We retained separate authority for the Senior Community Service Employment Program, but transferred the administration of it from the Department of Labor to the Administration on Aging.

**Cost Sharing -- Optional**
Exempts -- I&A, outreach, benefits counseling, case management, ombudsman, protective services, low-income threshold set by the State... It provides for sliding fee scales based on income, and income to be determined by self-declaration. It should be noted that nutrition services were not excluded.

**SUPPORTIVE SERVICES AND MULTIPURPOSE SENIOR CENTERS --Chapter 2**
consolidates all under one part...

**NUTRITION SERVICES...Chapter 3**
consolidated, but still references separately, congregate, home-delivered, and adult day care settings. Changes the current "nutrition services" program to solely a "meals" program without references to nutrition education, nutrition screening, nutrition counseling, etc. In essence, it removes the health-related aspects of the nutrition services program.

Consistent with the Martinez bill, it transfers the administration of the USDA NPE program to AoA and retains the appropriation in the Agriculture account; however, it limits the amount to 24% of the Title III nutrition services allocation ($110 million versus the current $151 million). Additionally, this allocation would be subject to the Intrastate Funding Formula, thereby, resulting in massive disruption of funds to the States during the transition period. There is no provision for these funds to be used in the Native American Program.

**Chapter 4 Community Service Employment**
Previously, Title V of the Act administered by DOL. Consistent with the Administration's bill, it would transfer administration of the program from DOL to AoA, but this draft would make additional changes. It would change the current National Contractor/State allocations and program to solely a State program.

Allotments for Community Service Employment:
- For FY97, 75% to States based on share of FY1996 funds received
- For FY98, 50% to States based on share of FY1996 funds received
- For FY99, 25% to States based on share of FY1996 funds received

## TITLE VI - GRANTS FOR NATIVE AMERICANS

We retained separate authority for the program without making changes to the statute. Enhancements for Native Americans include authority to receive disaster assistance, the removal of barriers for coordination with Title III, and access to the funds from USDA's NPE program.

## TITLE VII - VULNERABLE ELDER RIGHTS PROTECTION

We retained separate authority for this title to highlight its significance and the importance of focusing on protecting the rights of vulnerable older individuals who reside in the community and in institutional settings.

The remainder in the above years, and beginning in FY2000, each state gets not less than 1/2 of 1% or $100,000, whichever is greater, with the balance based on the product of the number of people 55 and older and per capita income.

## SUBTITLE B -- NATIVE AMERICAN PROGRAMS ON AGING

There is no provision for the establishment of an Office for American Indian, Alaskan Native and Native Hawaiian Programs here or in Title II. Additionally, there is the elimination of all references to training and technical assistance under the current Title IV for Native American programming.

There are no definitions for Native American in the draft. There are questions related to whether or not any tribal organization would be eligible, or only tribal organizations of Federally recognized tribes.

Native Hawaiians are omitted in a couple of sections.

## TITLE IV -- NATIONAL SENIOR VOLUNTEER CORPS

This is a new section added to the Act. The previous authority rested with the Corporation for National Service.

# GUIDING PRINCIPLES

## for the

## REAUTHORIZATION OF THE OLDER AMERICANS ACT

1. Prepare the Older Americans Act, its network, and our country for the 21st century and the future of aging, a time when there will be a doubling of the aging population and greater diversity;

2. Increase the capacity of the infrastructure to adjust to the changing definition and attitudes about aging;

3. Promote and advance the vision and legacy of the reinvented AoA;

4. Demonstrate a commitment to flexibility to those who serve older persons;

5. Draw upon the strengths of the "aging network" and expand its potential and capacity;

6. Enhance the ability of the network to administer our programs efficiently and effectively and to create seamless service systems;

7. Preserve the dignity, independence and security of the customers we serve: older Americans and their families;

8. Focus special attention to those seniors who are most vulnerable and in social and economic need, "with particular attention to low-income minorities" as defined by statute;

9. Promote the development of a comprehensive and coordinated continuum of services that addresses the access and supportive services of older persons and their families;

10. Focus particular attention to the delivery of services to American Indians, Alaskan Natives and Native Hawaiians.

# GUIDING PRINCIPLES - PAGE 2

11. Enhance the capacity of the aging network for an expanded role in the provision of home and community-based services and the changing health care delivery system for seniors and persons with disabilities;

12. Pursue areas that will make a tangible and visible difference in the lives of those we serve;

13. Demonstrate the need to and the importance of reaching out to non-traditional aging partners and of including all generations and stakeholders in the formulation of aging policy;

14. Incorporate the recommendations from the White House Conference on Aging of 1995 and the Federal Council on Aging;

15. Streamline and improve the management, accountability, and coordination of the programs that are authorized and administered by the Administration on Aging;

16. Enhance the traditional advocacy components of the Act, including through the Ombudsman program, and facilitate the development of elder rights systems to protect the rights of the vulnerable;

17. Assure an opportunity to empower older persons to exercise individual choice and personal responsibility regarding service provision;

18. Assure maintenance of bottoms-up planning and citizen input regarding service delivery design and provision;

19. Enhance the partnership relationship which has existed among the components of the aging network, and shift the focus on performance outcomes;

20. Enhance the opportunity for seniors to participate in and contribute to society their talents, wisdom and skills.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Secretary
Administration on Aging

Washington, D.C. 20201

# FAX TRANSMISSION

Date: 9-14

To: Molly

Fax Number:

FROM:

Department of Health and Human Services
Office of the Assistant Secretary for Aging

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Comments: Also Bob indicates that almost all post-WHCOA's are now focusing on OLDER AM. ACT

Number of Pages (including cover sheet): ____

July 9, 1996

Mr. Horace B. Deets
Chair
Leadership Council of
Aging Organizations
601 E Street, N.W.
Washington, D.C. 20049

Dear Horace:

Thank you for writing to me regarding the Older Americans Act. I appreciate knowing the Council's views on the reauthorization of this important law.

My Administration remains committed to preserving the Act and the core principles that guide it -- grassroots support, citizen involvement, bottom-up planning, and coordination of services. As Congress examines this important issue, I will continue to fight to ensure that our nation keeps its compact with older Americans now and in the years to come.

I have shared your letter with my staff, and I send my best wishes.

Sincerely,

BILL CLINTON

BC/SEM/JFB/DWB/pw-ws (Corres. #3005765)
(6.deets.h)

cc w/inc to Molly Brostrom, ODP

172689

# LEADERSHIP COUNCIL of AGING ORGANIZATIONS

*Horace B. Deets, Chairman*

June 14, 1996

The President
The White House
Washington, DC 20500

Dear Mr. President:

The Leadership Council of Aging Organizations (LCAO), a coalition of 42 leading aging organizations concerned with the well-being of America's older population, has serious concerns about certain provisions in the reauthorization of the Older Americans Act (OAA) as proposed by the Senate in S. 1643 and by the House in H.R. 2570. We believe that these provisions will have an adverse impact on communities and consumers across the nation. Further, these provisions do not reflect the fine-tuning recommendations made by over 2,000 bipartisan participants of the 1995 White House Conference on Aging.

Since 1965, the OAA has successfully enabled millions of older adults to remain independent in their own homes and communities and has protected the rights of older persons living in long-term care facilities. The Act provides a wide range of home and community-based services including congregate and home-delivered meals, transportation, information and referral, advocacy assistance, adult day care, visiting and telephone reassurance, homemaker services, and legal and employment services. The OAA has provided a framework for millions of hours of volunteer service by seniors in the community at large.

LCAO supports targeted services to older Americans with the greatest economic and social needs (including aged persons in rural areas and the very frail), with particular attention to the needs of low-income elderly minority individuals. Both H.R. 2570 and S. 1643 weaken the existing targeting language that focuses particular attention on low-income older minorities, the most economically deprived racial and ethnic group in the aged population. The targeting language in both these bills must be strengthened substantially to assure that the more intense and special needs of the minority aged will be fulfilled. Ideally, H.R. 2570 and S. 1643 should retain the existing targeting language in the Older Americans Act for low-income older minorities.

*601 E Street, N.W., Washington, DC 20049 • (202) 434-3720 • FAX: (202) 434-3714*

LCAO supports a separate authorization of at least $26 million to provide training, research and demonstration programs in any final bill. Since 1965, these programs have been a critical component of the Older Americans Act, keeping the Act vital and responsive to the rapidly changing needs of a growing older population. The activities supported by these programs have helped expand our knowledge about the problems and needs of America's elderly, design and test innovative service ideas, and ensure a trained workforce to carry out the Act's programs.

LCAO opposes moving the programs of the National Senior Service Corps (Foster Grandparent Program, Senior Companion Program and the Retired and Senior Volunteer Program) as proposed in the House bill. The senior volunteer programs are presently part of a larger "ageless" network of service programs administered in an effective manner by the Corporation for National Service. The White House Conference on Aging endorsed keeping the Corporation as the lead agency in promoting senior service.

LCAO also is concerned that the current congressional proposals weaken the Act's emphasis on legal assistance for older persons. These services have provided legal counseling on consumer fraud, elder abuse, housing, health insurance, pensions and other income programs. LCAO urges the Congress to ensure continuation of these vital services.

LCAO supports the continuation of the successful national sponsor-state government partnership for administering the OAA Title V Senior Community Service Employment Program (SCSEP). Both H.R. 2570 and S. 1643 would block grant this program to the states. These measures ignore the exceptional record and long-standing experience of national sponsors in developing the SCSEP from a popular demonstration activity to arguably the most effective employment, training and services program for older Americans in our nation. Both national and state government sponsors have an extraordinarily good record in serving older women (more than 70 percent of all enrollees are women 55 years of age or older) and minorities (approximately 40 percent of all enrollees are minorities). All participants have incomes below 125 percent of the poverty threshold, and about 80 percent of the enrollees have incomes below the poverty line. Title V provides a dignified and an effective means to enable low-income seniors to improve their economic well being while delivering vital and much needed services in their communities. SCSEP should continue as a freestanding program in the Older Americans Act.

Member organizations of the LCAO have supported the current OAA legislation providing for voluntary contributions by participants in the congregate meals program. That voluntary program has worked well.

The Council supports the extension of such voluntary contributions to additional OAA funded services, but opposes authority to the states to impose mandatory cost sharing on any program.

LCAO urges the Congress to amend the House and Senate OAA reauthorization bills to conform to the concerns outlined above. The Act has enjoyed 30 years of bipartisan support, which we hope can be continued. Without these changes, these bills are unacceptable to the LCAO. Within this framework the LCAO looks forward to working with the Congress, the Administration and other national organizations and coalitions to assure that the needs of America's older persons and their families continue to be met creatively, responsively and efficiently through the Older Americans Act.

Sincerely,

Horace

Horace B. Deets
Chair

The following Leadership Council of Aging Organizations have signed-on to this letter:

American Association of Retired Persons
American Society on Aging
Association for Gerontology and Human Development in
  Historically Black Colleges and Universities
Associacion Nacional pro Personas Mayores
B'nai B'rith Center for Senior Housing and Services
Gray Panthers
National Asian Pacific Center on Aging
National Association of Foster Grandparent Program Directors
National Association of Nutrition and Aging Services Program
National Association of Retired Federal Employees
National Association of Retired and Senior Volunteer Program Directors, Inc.
National Association of Senior Companion Project Directors
National Caucus and Center on Black Aged, Inc.
National Committee to Preserve Social Security and Medicare
National Council of Senior Citizens
National Council on the Aging, Inc.
National Senior Citizens Law Center
National Senior Service Corps Directors Associations

95-32 EPW
December 21, 1994

# CRS Report for Congress

Congressional Research Service • The Library of Congress

## Older Americans Act: 104th Congress Issues

Carol O'Shaughnessy
Specialist in Social Legislation
Education and Public Welfare Division

there might be an updated one. I'll check


### SUMMARY

Authorizations of appropriations for programs under the Older Americans Act expire at the end of FY1995. Funded at $1.4 billion in FY1995, the Act is the major vehicle for the organization and delivery of social services to the elderly. A proposal to consolidate the Act's nutrition program for the elderly into a block grant along with other Federal food assistance programs is contained in the Personal Responsibility Act (part of the House Republican leadership's *Contract with America*). This proposal may affect the timing of the reauthorization and extent of review of the Act. Other issues that may be reviewed include timing of reauthorization; policy on prohibition of mandatory fees for services; effectiveness of the long-term care ombudsman program; regulations on targeting services to older persons with greatest economic and social need; the role of State and area agencies on aging in community-based long-term care; and public-private partnerships.


### BACKGROUND

The Older Americans Act encompasses multiple programs, including congregate and home-delivered nutrition services; a wide array of supportive services; community service employment (a subsidized job program for low-income persons aged 55 and over); training research, and demonstration activities in the field of aging; grants for native Americans for supportive and nutrition services; and elder rights protection activities.

Total FY1995 funding is $1.4 billion, of which 66% is devoted to grants to States for nutrition and supportive services under title III, and 29% is devoted to the community service employment program under title V. Title III provides funding to 57 State agencies on aging and 670 area agencies on aging for nutrition and supportive services for persons aged 60 and older. Title V supports 68,000 community service employment positions for low-income persons aged 55 and over.

### 104th CONGRESS ISSUES

***Timing of reauthorization.*** Authorizations of appropriations for the Older Americans Act expire in FY1995. The last reauthorization legislation was signed into law on Sept. 30, 1992 (P.L. 102-375). The Act's reauthorization may receive heightened interest in

1995 due to the occurrence of the White House Conference on Aging which is expected to draw 2,000 delegates to Washington in May.

The Administration is considering sending a proposal to Congress to simply extend authorization of appropriations under the Act for 1 year. An extension has been discussed for a number of reasons. The Administration and aging service representatives point out that recommendations of the White House Conference on Aging should be considered when Congress reviews the Act; its recommendations are expected to be available in the summer of 1995. In addition, results of a national evaluation of the nutrition program for the elderly are expected in July 1995. The Administration and others have pointed out that results of this evaluation should be assessed when considering legislative changes. Finally, some aging services representatives have indicated that not enough time has occurred since the last reauthorization to assess the impact of the 1992 law on State and area agencies on aging and that the Administration on Aging (AoA) has not yet finalized regulations that would implement certain provisions of that law. On the other hand, some aging service advocates have indicated that the Act should be reauthorized by the end of the fiscal year. NO

*Review of the elderly nutrition program.* Timing of review of the Act, as well as the extent of issues to be reviewed, may be affected by a proposal regarding the Act's nutrition program for the elderly that is included in the proposed Personal Responsibility Act of 1995 (part of the House Republican leadership's *Contract with America).* That proposal would repeal the Older Americans Act congregate and home-delivered meals programs, administered by the Administration on Aging/Department of Health and Human Services (DHHS/AoA), and the cash of cash-in-lieu of commodities program for the elderly, administered by the U.S. Department of Agriculture (USDA). Both programs are authorized under title III of the Act. The proposal would incorporate these programs into a $35.6 billion State block grant for food assistance. Other programs that are proposed for inclusion in the block grant are food stamps, child nutrition programs, food assistance programs for women, infants and children (WIC), and virtually all other food assistance programs.

The title III nutrition program is the largest of the Older Americans Act's programs. Funded at $620 million in FY1995, it represents 43% of the Act's total funds and 65 percent of title III funds. This amount includes $376 million for congregate nutrition services, $94 million for home-delivered nutrition services, and $150 million for USDA cash or cash-in-lieu of commodities. Funding for congregate and home-delivered nutrition services is allocated to States by DHHS/AoA based on each State's share of the total population of persons aged 60 years and over. USDA provides commodities or cash-in-lieu of commodities, in conjunction with these programs, to States based on the number of meals served under the DHHS/AoA grant program.

Under the proposed Personal Responsibility Act, there are no requirements as to what proportion of the block grant funds would be used for nutrition services for the elderly. Therefore, States would decide how much to devote to these services. An older person's eligibility would be based on the Bureau of Labor Statistics (BLS) lower living standard income level, which in 1994, ranges from $7,590 to $9,890 for a one person household according to region of the country. (These amounts are approximately 103% to 134% of the poverty level.) Under current law, means tests are prohibited, although older persons are encouraged to contribute toward the costs of services.

If the nutrition program were to be included in a food assistance block grant, Congress would need to assess the impact such action would have on other programs under the Act. Programs remaining under title III would be the supportive services and centers program ($307 million); disease prevention and health promotion activities ($17 million); and in-home services for the frail elderly ($9 million). Together, these programs represent 23% of the Act's total funds and 35% of title III funds. In addition, the implications such action would have on State and area agencies on aging responsibilities for administration of supportive and nutrition services would need to be assessed, such as planning and coordination of nutrition services under the proposed block grant with other services for the elderly.

Demand for nutrition services has received national attention in the press recently. A front-page *Wall Street Journal* article (Nov. 8, 1994) focused attention on waiting lists of elderly persons for the program in various parts of the country. As part of its review of the nutrition program and the House Republican leadership's *Contract with America* proposal, Congress may wish to assess utilization, quality, and costs of the nutrition services. These and other issues are being reviewed as part of the national evaluation of the program that was required by the 1992 law.

*Cost sharing for services.* One of the more controversial issues in past reviews of the Act has been whether the Act should allow mandatory cost sharing for certain social services. Under current law, mandatory fees are prohibited, but nutrition and supportive services providers are allowed to solicit *voluntary* contributions from older persons toward the costs of services. Older persons may not be denied a service because they will not or cannot make a contribution.

In its recommendations for the last reauthorization, the Bush Administration proposed that States be given the option to permit or require providers of nutrition or supportive services to charge fees for services, based on a person's ability to pay. Under this proposal, States would have been prohibited from charging fees to persons whose income is below 200% of the poverty level. Another bill introduced in the 102nd Congress by Representative Goodling (H.R. 1692) would have required State agencies on aging to establish a sliding fee schedule for title III services. The bill exempted persons with income below the poverty level from paying for the cost of services.

State and area agencies on aging have been in favor of a policy that would allow them to impose cost sharing for certain services, arguing, in part, that such a policy would eliminate barriers to coordination with other State-funded services programs that do require cost sharing, and would improve targeting of services to those most in need. Some representatives of aging services programs, such as those representing minority/ethnic elderly, have been opposed to cost sharing, arguing, in part, that a mandatory cost sharing policy would discourage participation by low-income and minority older persons and would create a welfare stigma. In the last two reauthorizations of the Act, Congress considered, but ultimately rejected, proposals to change the current voluntary contributions policy.

A 1989 General Accounting Office (GAO) report found that 36 States employ mandatory cost sharing of various kinds for aging social services programs that are funded by States. Cost sharing is generally applied to more expensive services such as home care and adult day care.

*Review of the long-term care ombudsman program.* Observers have pointed out that the long-term care ombudsman program is understaffed and underfunded to carry out its broad and complex responsibilities of investigating and resolving complaints of the over 2 million elderly residents of nursing homes and board and care facilities. Complaints investigated by ombudsman may relate to action, inaction, or decisions of long-term care providers or other agencies that adversely affect the health, safety, welfare or rights of residents. In FY1993, about $37 million in Federal and State funding was devoted to support of this program, with about 37% from non-Federal sources.

The long-term care ombudsman program may receive heightened interest during the 104th Congress as a result of a forthcoming congressionally mandated assessment of the program and recent proposed AoA rulemaking. The 1992 amendments required AoA to conduct an assessment of the program. Results of this assessment, being conducted by the Institute of Medicine (IOM), are expected to be released in January 1995.

Proposed regulations implementing provisions of the 1992 law were published in the *Federal Register* on Nov. 15, 1994. This is the first time since the program was created in 1978 that AoA has published regulations governing the program. These regulations address issues related to administration and management of the program. The proposal has been criticized by State agencies on aging for undermining their authority to provide adequate supervision of operation of the program, and for extending responsibilities of the program beyond the scope envisioned by the law.

*Targeting services to those most in need.* A recurring issue has been the extent to which State and area agencies are effective in targeting services to older persons with the greatest social and economic need, especially low income minority older persons. In the past, there have been concerns about methods used to target, especially the intrastate funding formula. The 1992 law required the Assistant Secretary on Aging to approve each State's intrastate funding formula -- one of the methods used to direct funds to those areas of States which have the greatest proportions of older persons with greatest need.

A notice of proposed rulemaking setting forth the criteria for the Assistant Secretary's approval of intrastate funding formulas was issued by AoA on Mar. 17, 1994. These criteria state that as long as planning and service areas (geographic areas used for planning purposes under title III of the Act) with high concentrations of low-income minority older persons receive no less funding under a State's proposed formula than they would under application of a State's current formula, and as long as such planning and services areas receive no less than they would have if only two factors were used -- over 60 years and below the poverty level -- the Assistant Secretary is required to approve the formula.

The proposed rules generated over 2,000 comments; AoA has not issued final rules. Among the comments on the regulations being assessed by AoA are from the Department of Justice (DoJ). DoJ is concerned that AoA's proposed criteria would not meet requirements of title VI of the Civil Rights Act of 1964. DoJ has indicated that the regulations must require that formulas include a specific minority factor and should include guidance as to how various formula factors should be weighted.

*Role of State and area agencies in community-based long-term care.* Many State and area agencies on aging have made great strides over the last 15 years to develop home and community-based long-term care services for the frail elderly. These activities have been in response to the limited Federal funding for such services. States have used a combination of Older Americans Act, Medicaid, and Social Services Block Grant funds, as well as substantial State funds, to develop these services..

Efforts in the 103rd Congress to create a grant program for home and community-based services for persons with severe disabilities was linked to national health care reform which ultimately failed. Because any major new expansion of Federal financing for home and community-based services may be unlikely in the near future, the 104th Congress may wish to review ways to eliminate Federal barriers to the delivery and coordination of these services by States.

*Public-private partnerships*. In recent years, some State and area agencies have developed a variety of cooperative arrangements with the private, for-profit sector. Such arrangements have typically focused on development of workplace eldercare programs. Private employers, recognizing the needs of employees who are caring for older family members, have enlisted the assistance of State and area agencies in developing a range of such programs. A 1993 GAO review found that only a small proportion of area agencies had entered into public-private elder care partnerships by 1992; that the partnerships were limited in scope; and that they had not produced revenues that could be used for aging services.

The 1992 reauthorization included a number of provisions requiring State and area agencies to disclose the nature of arrangements they have developed with the private, for profit corporations, and to assure that such arrangements do not conflict with the public purpose mission of the title III program. These provisions were in response for requests by some aging agencies for legislative clarity regarding whether or not Federal policy explicitly permitted or encouraged area agencies to develop such arrangements with the private, sector. Congress may wish to review the current status of public-private partnerships to assess whether or not there has been growth in these arrangements and whether further legislative action is necessary.

*Review of the research, training, and demonstration program*. AoA has been concerned about the number of congressional mandates for various research, demonstration, and training initiatives that were imposed on this program during the last reauthorization and has pointed to the difficulties of meeting the congressional mandates without additional funding. Congress may wish to review the relationship between the title IV mandates and funding. The program is funded at $27 million in FY1995.

For further information, see: CRS Report for Congress No. 93-400 EPW, *Older Americans Act: Brief History of Legislation and Funding*, Apr. 8, 1993; CRS Report for Congress No. 93-329 EPW, *Older Americans Act Amendments of 1992*, Mar. 18, 1993; CRS Report for Congress No. 94-607 EPW, *Older Americans Act FY1995 Budget: Fact Sheet*, Dec. 5, 1994.

# FAX COVER

Date/Time:

## Income Maintenance Branch

Executive Office of the President
Office of Management and Budget
Washington, DC 20503

**TO:** Molly Brostorm

**FROM:** Naomi Tinklepaugh

**Fax Destination**

**Organization:** DPC

**Fax Number:** 456-7028

**Number of Attached Pages:** *Cover* + 8

**Notes:** Keep in mind that this document hasn't been updated since last week. Feel free to call, if you have any questions.

Naomi

Income Maintenance Fax Number: 202/395-0851
Voice Confirmation: 202/395-4686

Overview of the Reauthorization Legislation for the Administration on Aging within HHS

I. Historically: why was this legislation passed and what does it do?

II. Overview of the reauthorization legislation

1. Reauthorization

The bill would extend for three years, through FY1998, authorizations for programs under the Older Americans Act of 1965 administered by HHS (the last authorization was for fiscal 1992, 1993, 1994, and 1995).

2. Performance measures incorporated into the legislation

Major components

A. The Assistant Secretary, in consultation with the States, would be required to establish a core set of performance measures by September 1996.

Objectives would be results-oriented and designed to include performance indicators, quantifiable targets, and target dates; and progress toward meeting objectives would be measurable on the basis of comparable data available for all States.

B. Incentive awards for effective performance would be permitted and up to 10% of funds could be reserved for such awards (up to $95 million, assuming that the administration of the Nutrition Program for the Elderly (currently administered by Food and Consumer Services within the Agriculture Department) is transferred to AOA).

C. Each State could use up to 5% of their grant to monitor/evaluate their performance based on the performance measures established by the Assistant Secretary (up to between $43-48 million, assuming that the administration of the Nutrition Program for the Elderly (currently administered by Food and Consumer Services within the Agriculture Department) is transferred to AOA).

Additional components

D. States would be required to submit performance partnership proposals that include, for example, a list of objectives selected by the State, rational for the selection, and the strategy for meeting the objectives. States would be required to establish Advisory Councils to review and comment on proposed agreements and to evaluate and report on State performance under the agreement.

E. <u>Assistant Secretary would be required to assess each States performance</u> under each agreement <u>annually</u> on the basis of reports submitted by the State, and on-site reviews to be conducted at least once every five years.

F. <u>A number of requirements would be eliminated from State Plans</u> (Area Plans would be treated similarly) due to the performance partnership initiatives, such as, appropriate administrative methods, assurances concerning program integrity, hiring preferences, and inservice training opportunities for agency and provider personnel.

However, State Plans (Area Plans would be treated similarly) would still contain a number of requirements that may not be necessary due to the performance partnership initiatives incorporated into the legislation, such as, intra-state funding requirements, evaluations and public hearings, and reports.

3. Programs for the elderly consolidated within AOA

A. Programs within current law consolidated within the reauthorization

1. <u>Nutrition programs</u>: Subpart 3 (School-based Meals for Volunteer Older Individuals and Multigenerational Programs, which funds have never been appropriated for by Congress) of Part C (Nutrition Service) of Title III would be incorporated into Subpart 1 (Congregate Nutrition Services) of Part C (Nutrition Service) of Title III.

2. <u>Service Programs</u>: Parts D (In-Home Services for Frail Older Individuals), E (Additional Assistance for Special Needs of Older Individuals), F (Disease Prevention and Health Promotion Services), and G (Supportive Activities for Caretakers Who Provide In-Home Services to Frail Older Individuals) of Part C (Nutrition Service) of Title III would be incorporated in Part B (Supportive Services and Senior Centers) of Title III.

B. Programs in other agencies consolidated within the reauthorization (REGO II)

1. <u>Title V</u> (Community Senior Employment of Older Americans (CSEOA)) within the Labor Department would be transferred to AOA, the match would be increased from 10-16%, and its funding would be cut by $40 million, which would be phased in between FY97and FY2002.

2. Nutrition Program for the Elderly currently administered by Food and Consumer Services within the Agriculture Department would be transferred to AOA (we are awaiting Glickman's approval, though his staff supports the transfer), the program would be renamed "Nutrition Services Incentive Program," its funding formula would be revised, and the transfer would increase AOA's funding by $151 million.

4. Title IV is rewritten and reorganized (includes no policy changes)

Title IV currently includes Part A (Education and Training), Part B (Research, Demonstration, and Other Activities), and Part C (General Provisions). The reauthorization further divides Title IV to clarify what is included: Part A (Education and Training), Part B (Research, Development, and Demonstrations), Part C (Centers), Part D (Information, Dissemination, and Related Activities), and Part E (General Provisions).

5. White House Conference on Aging to be convened by 2005, rather than 2001

This provision simply requires that the President convene the White House Conference on Aging no later than December 31, 2005 rather than 2001 as stated in current law, since the Conference is to occur every ten years and was recently convened May 2-5, 1995.

III. OIRA's review of the reauthorization

1. Performance partnership reporting should replace all State and Area Plan reporting requirements

OIRA recommends the reporting requirements that ought to be eliminated include, for example: (1) the State Plan reporting requirements that remain intact, such as, intra-state funding requirements, evaluations and public hearings, and reports; and (2) a provision in current law which requires that the Assistant Secretary collect basic service delivery data (despite the fact that this data would be collected through the performance partnership agreements).

2. Include in the legislation only one provision which requires that certain populations be given special consideration and insert this provision in the Performance Partnership Section of Title II (Administration on Aging)

OIRA recommends incorporating into the provision which requires that certain populations be given special consideration a description of the groups that this ought to apply to that already exists in Section 306 (a)(5)(B)(i)(I-IV) of current law. The list includes older individuals: (1) in rural areas; (2) with the greatest economic need (with particular attention to low-income minorities); (3) with the greatest social need (with particular attention to low-income minorities); (4) with severe disabilities; (5)

with limited English-speaking ability; and (6) with the Alzheimer disease or related disorders.

3. Eliminate the provision which requires that the Assistant Secretary design "uniform data collection procedures" for State agency use (which serves as the basis for AOA's National Aging Program Information System (NAPIS)), since NAPIS will be rolled into the performance partnership initiatives incorporated into the reauthorization

IV. Recommendations regarding specific problems within the reauthorization

1. National Eldercare Locator Service (Sec. 201, p. 27)

This provision would require the Assistant Secretary to develop and operate a National Eldercare Locator Service (an 800-telephone referral service for seniors). The provision creates "permanent" statutory authority for a telephone referral service, financed through an annual set-aside of up to $3 million from amounts appropriated for State grant programs under Title III.

A National Eldercare Locator Service has been in existence nearly five years, financed by AOA's discretionary funds in Title IV, since current law exhorts the Assistant Secretary to establish such a service. The total number of calls the telephone referral service has received over the last five years include: (1) 1,520 in 1991; (2) 15,449 in 1992; (3) 44,411 in 1993; (4) 49,981 in 1994; and (5) between 60-66,000 in 1995, according to projections. The average unit price for the 800-telephone line charges comes to $3.76, which means that in fiscal 1995 the line charge could reach approximately $239,922 (which does not include the administrative, material, outreach, and public relations expenses).

Recommend the funding for this program remain as is and not be specifically mandated in statute.

2. State option for cost sharing (Sec. 214, p. 30)

This provision would provide the States with the authority to (a) income-test "expensive in-home services and adult day care" (personal care, homemaker-type services (bathing, grooming, assistance with meal preparation, light housekeeping, etc.)) and (b) charge clients a sliding fee above a certain income level specified by each State (low-income individuals would be exempt).

1989 GAO Study on States Applying Cost Sharing to In-Home Services

Cost sharing is becoming increasingly commonplace in state and area agencies on aging. There is some cost sharing in 36 of the 51 states surveyed by GAO in 1988. Of the 545 state and area agencies that responded to the GAO survey, 162 indicted they had already adopted cost sharing to some extent. Most implemented cost sharing in 1985 or later. Another 22 respondents indicated they planned to soon implement it. Although cost sharing can not be applied to services funded by current law, the agencies have adopted a varied array of cost sharing programs for selected services funded through other governmental and private funding sources, including social service block grants and Medicaid.

State and area agencies are more likely to apply cost sharing to high cost-per-client services and less likely to apply it to low cost-per-client services, access services, and services traditionally supported by volunteers. A higher cost service, such as adult day care, may cost the agency $23 per day for a single client, while a lower cost service, such as a home-delivered meal, may cost $2.68.

Agencies surveyed by GAO indicated they adopted cost sharing primarily to provide more services to eligible persons and serve more people overall. Although 70 percent or more of the respondents indicated that this occurred at least to some extent, less than a third said the effect occurred to a great or very great extent. The majority of clients in cost-sharing programs pay no fee because their incomes are below the minimum level at which sliding fees are levied for relatively expensive services.

The 1989 GAO study recommended: (1) establishing mandatory charges for in-home services for the elderly funded under Title III; while incorporating built-in protections, such as (2) excluding from cost sharing services already strongly supported by voluntary contributions; (3) adding measures to ensure that the very low-income receive free services; and (4) limiting fees to a reasonable proportion of income for fee-paying clients.

Given that the purpose of Title III is "... the development and implementation of comprehensive and coordinated systems to serve older individuals" with special consideration given to the most socially and economically needy, cost sharing is not necessarily at odds with the overall mission of current law.

<u>Recommend</u> extending state flexibility regarding cost sharing to nutrition programs included in the current law for those above the poverty level.

3. Disaster Relief (Sec. 217, p. 33)

This provision would provide the Assistant Secretary with the authority to distribute disaster relief funding on a "presumptive needs" basis, rather than on a reimbursement basis in response to Presidentially-declared disasters. In addition, the provision would extend these funds to tribal organizations.

<u>Recommend</u> deleting the section, but retaining the requirement that the disaster relief funding continue to be distributed on a reimbursement basis.

4. Nutrition Services Incentive Program (Sec. 218, p. 34)

This provision would give AOA the authority to administer the Nutrition Program for the Elderly (NPE), currently administered by Food and Consumer Services within the Agriculture Department (this is one of AOA's original Rego II proposals, but not an Agriculture Department proposal).

In addition, the reauthorization would change the program name and how the program distributes its funding. The provision would replace Section 311 (Availability of Surplus Commodities, which enables the Agriculture Department to provide either commodities or cash to contract recipients that provide nutrition services) with what AOA would refer to as the "Nutrition Services Incentive Program," which would be administered by AOA, though its funding would continue to be provided through the Agriculture appropriations committee.

The provision would change how meals are reimbursed in order to create an incentive for recipients to deliver more meals. Currently, the Agriculture Department reimburses contract recipients on a per meal basis. These contract recipients are provided with an initial reimbursement at the beginning of the year, and are then reimbursed quarterly based on revised estimates of the number of meals they actually provide. AOA would provide contract recipients with a percentage of the total amount of funding allotted for the program based on the following: the percentage of meals the contract recipients provided the year before as a percent of the total number of meals provided by all contract recipient of the grants distributed by the Agriculture Department. The provision would set aside not more than 3% for tribes (this is slightly more than the average amount they have been reimbursed for over the last couple of years based on the number of meals they have served).

Recommend (1) NPE be transferred from the Agriculture Department to AOA and that the funding be transferred to AOA's appropriations committee (Agriculture Department/HHS have checked with the majority staff on the House and Senate appropriations committees and they have endorsed the proposed transfer; they have not yet heard from the minority staff); and (2) funding distribution formula be revised to ensure a more equitable distribution of funds because the formula proposed would give the larger and wealthier contract recipients an advantage since they would have the capacity to distribute a greater number of meals and could, therefore, be awarded a larger percentage of the program funding.

5. Consolidation of authorities for nutrition services (School-Based Meals for Volunteer Older Individuals and Multigenerational Programs, Subpart 3 of Part C (Nutrition Service) of Title III) (Sec. 221, p.39)

This provision would consolidate the authority for this program in the Congregate Nutrition Services Program, Subpart 1 of Part C (Nutrition Service) of Title III. The idea is to give States greater flexibility and to simplify the application, selection of provider, and reporting requirements. Interestingly, however, since the program was established by the 1992 amendments, funds have never been appropriated for the program by Congress.

Recommend dropping as it has never been funded.

6. Waivers of certain requirements for State programs (Sec. 219, p. 35)

This provision would provide the Assistant Secretary with the authority to provide States with waivers for specific provisions and implementing regulations within current law. Waivers could apply to: (1) statewideness; (2) any State or Area Plan requirement; (3) restrictions on the amount that can be transferred between programs under Part B (Supportive Services and Senior Centers) and Part C (Nutrition Service) of Title III; or between programs under Subpart 1 (Congregate Nutrition Services) and Subpart 2 (Home-Delivered Nutrition Services) of Part C (Nutrition Service) of Title III; or (4) maintenance of effort (more specifically, in the legislation it is phrased as "all or any part of the reduction in allotment required with respect to a State which reduces expenditures under its State Plan").

To qualify for a waiver, a State must demonstrate to the satisfaction of the Assistant Secretary that (1) approval of the State legislature has been obtained or is not necessary; (2) area agencies have been consulted; (3) the waiver proposal has been subject to public review and comment within the State; and (4) benefits of the waiver are likely to outweigh negative consequences, or particular circumstances in the State otherwise justify the waiver.

Recommend eliminating the provision that would permit the Assistant Secretary to waiver maintenance of effort.

7. Performance Partnership (Sec. 101-106, p. 3-27)

This provision would require that AOA enter into performance partnerships with State agencies on aging and federally recognized tribes that either administer or fund programs that fall under Title III or VII.

The major performance measures incorporated into the reauthorization do the following: (1) require that the Assistant Secretary, in consultation with the States, establish a core set of performance measures; (2) authorize incentive awards for effective performance and permit up to 10% of funds to be reserved for such awards (up to $95 million, assuming that the administration of the Nutrition Program for the Elderly (currently administered by Food and Consumer Services within the Agriculture Department) is transferred to AOA); (3) permit each State to use up to 5% of their grant to monitor/evaluate their performance based on the performance measures established by the Assistant Secretary (up to $43-48 million, assuming that the administration of the Nutrition Program for the Elderly (currently administered by Food and Consumer Services within the Agriculture Department) is transferred to AOA).

Recommend (1) permitting the States to use only up to 2% of their grants monitoring/evaluating their performance based on the performance measures established by the Assistant Secretary (up to $17-19 million); and (2) requiring that States granted incentive awards use the funds to cover service expenses as opposed to administrative expenses.

# ADHERENCE TO KEY PRINCIPLES

# IN THE

# REAUTHORIZATION OF THE

# OLDER AMERICANS ACT

- **PROTECTING THE VULNERABLE**

  - **PRIORITY SERVICES--TITLE III** -- Retention of the requirement in area plans for "priority services" for the purpose of maintaining the emphasis and funding for legal services for the elderly is essential. The Act is the second largest public resource of funding for legal services for the elderly. The removal of the priority services status will result in the diminution and reduced availability of legal services for frail low-income older individuals with no other means of seeking redress for wrongs and the assertion of and access to rights, benefits and protections under the law. Apart from the direct result of fewer dollars being allocated for these services at the State and local level, will be the public policy message that these services are not critical or important to the goal of maintaining older people's dignity, independence and ability to remain in their own homes and communities.

  - **TITLE VII – VULNERABLE ELDER RIGHTS PROTECTION ACTIVITIES** – Also essential is the retention of a separate title for Elder Rights Protection for Vulnerable Older Individuals which includes appropriations and requirements for Long-term Care Ombudsman programs; the prevention of elder abuse, neglect, and exploitation; elder rights and legal assistance development; and outreach, counseling, and assistance. This title was created in the 1992 Reauthorization of the Act because of the need to fully focus on the development, at the State level, of an integrated system of elder rights protections. The primary purpose was to focus attention and funding on the predominant issues facing vulnerable older individuals who are without the means, know how and information to access services and entities with the responsibility and ability to act on their behalf. This title established the framework for States to develop systems which would coordinate services designed to protect the rights of vulnerable older individuals residing in their own homes, communities and in institutional settings. The elimination of a separate title in the Act for the development of such a system will at best result in the maintenance of a fragmented collage of services without a central point for older individuals, their families and caregivers to access. The more predictable result, especially when coupled with a reduction in funding and priority service status, is that there will be a severe reduction in actual service availability.

- <u>PROTECTING THOSE IN GREATEST NEED</u>
  - **REMOVAL OF "PARTICULAR ATTENTION TO LOW-INCOME MINORITIES" TARGETING LANGUAGE - TITLE III** – The 1992 Amendments to the Act included provisions to strengthen the ability to target funds to those older individuals who were in greatest economic need and greatest social need with particular attention to low-income minority older individuals. Absent these provisions, services will return to a previous era when the most in need who have experienced a lifetime of denied access and benefits in our society will again receive little attention and inequitable service. Historically, low-income minority populations have not received services or access to services in an equitable manner despite language in the Act to focus services on those in greatest social and economic need. Absent the additional language to focus on low-income minorities, this segment of the older population will again not receive an adequate level of services.

- <u>DEMONSTRATING AN OBLIGATION AND COMMITMENT TO SOVEREIGN NATIONS</u>
  - **TITLE VI – ELIMINATION OF A SEPARATE TITLE FOR NATIVE AMERICAN PROGRAMS** – The action of eliminating the current Title VI in the Act and subsuming the authority for carrying out those functions under Title III, traditionally known as a title dedicated to State programs, indicates a lack of sensitivity and respect for the sovereign nature of Native American Tribes. It is viewed as a step toward making Tribes subject to the governance of States. Given the separate administrative structures which exist for addressing State and Tribal programming, it appears such an action in the name of streamlining is without merit or substance, and is not utilitarian. In actuality, it serves no useful purpose and achieves no positive goal administratively. Yet it may destroy the relationship and trust which has been achieved in the administration of the program.

- <u>PREPARING FOR AN AGING SOCIETY</u>
  - **TITLE IV – ELIMINATION OF A SEPARATE TITLE FOR RESEARCH, DEMONSTRATIONS AND TRAINING** – The elimination of a distinct and separate Title IV and its related funding severely jeopardizes our ability to address the needs of older Americans as we prepare for the demographic imperatives which will take place. Title IV has assisted in testing and developing the majority of Older Americans Act programs and services upon which older persons and their families rely to maintain their independence and dignity, including:
    - the area agency on aging concept;
    - home and community-based long-term care services;
    - congregate and home-delivered meals;

- new approaches and strategies to better serve frail, rural, and low-income, and minority elders;
- long-term care ombudsman to help protect older persons from abuse and exploitation;
- adult day care, including the well-known On Lok model; and
- information and referral systems to connect older persons and their families to the services they need.

At a time when we will experience the greatest numbers of older individuals in history and diminishing public resources and systems, more than ever, we need to focus on testing and developing new approaches which will address the issues of service delivery and care, as well as increasing the focus on individual responsibility for adequately preparing for one's own aging. Title IV has historically provided the resources to test and then promote the most effective and efficient systems for addressing the needs of an aging population and society.

In the private sector, it is the companies which invest wisely in research and development, and then incorporate new ideas into their current product line, that succeed and make significant profits. Through Title IV, AoA has emulated the private sector with an applied research, demonstration, and development strategy. These efforts have enabled AoA to develop, test, and incorporate new ideas and applied research at the local level.

- **ELIMINATING THE FEDERAL COUNCIL ON AGING -- TITLE II --** The elimination of the Federal Council on Aging (FCOA) with advisory responsibilities to the President, Congress and the Assistant Secretary for Aging on matters relating to older individuals will jeopardize effective input into planning and preparation for the future of aging in this country.

- **ELIMINATING THE AUTHORITY FOR A WHITE HOUSE CONFERENCE ON AGING --** The elimination of authority for a White House Conference on Aging at the turn of the next century ignores the need to focus the collective resources of this country on the public policy issues related to older individuals and the issues related to an aging society.

- **MANDATORY COST-SHARING IN NUTRITION -- TITLE III**
The nutrition program in the Act has served as one of the cornerstone services because of its ability to address a host of issues ranging from socialization (thereby addressing issues of depression) to maintaining good nutritional status (thereby addressing issues related to the prevention of higher health care costs). The program is a very popular and visible one in communities throughout our country. Its popularity has traditionally been due its distinctiveness from a "welfare" program and the sense of ownership shared by individual older people and communities. One of the components which has fostered this popularity and sense of ownership has been the ability to participate simply by virtue of being

sixty years old, and the ability to voluntarily contribute without any sense of intruding into the privacy of the participants. As a result, contributions have consistently been high, with $171 million being collected in FY 1993.

To permit States the option to require mandatory cost-sharing as a condition to receiving and participating in the service would drastically change the combination of components which have resulted in the program's success. Such a proposal would inject into this program the "welfare" components which participants have consistently rejected. Additionally, because low-income individuals would be precluded from paying under a mandatory cost-sharing plan, it is probable that fewer funds would be collected than are currently received through the voluntary, non-intrusive contribution system -- a result contrary to the goal of increasing support and funds for the program.

◆ **CHANGING THE NATURE OF THE SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM – TITLE V**
To maintain focus on a national community, it is important to focus on all components within the community. With regard to the Senior Community Service Employment Program (SCSEP) a longstanding structure involving States and National Contractors has existed. Because of the experiences of States and National Contractors, each is able to address distinct interests and target populations of eligible participants and develop differing employment prospects and training opportunities. It is important to maintain the diversity which exists in both in order to secure training opportunities and employment prospects for low-income seniors. The application and planning process for States will be streamlined by transferring the program from the Department of Labor to the Administration on Aging.

◆ **DISRUPTING THE NETWORK AND SUPPORT SYSTEM FOR OLDER AMERICAN VOLUNTEER SERVICES**
The Older American Volunteer Programs currently are administered as a part of a broad and comprehensive system of volunteer programs administered by the Corporation for National Service. These volunteer programs are already fully integrated with similar programs and enjoy the support of staff and resources focused solely on similar services and programs. The goals of achieving administrative simplicity, streamlining and fostering enhanced coordination would best be achieved by retaining the program with other volunteer and community service programs which are administered by the Corporation.

◆ **INCREASING FEDERAL ADMINISTRATIVE LAYERS IN THE DISTRIBUTION OF COMMODITIES**
The distribution of commodities for States under the Act has been through a direct relationship with the United States Department of Agriculture (USDA). While the transfer to AoA of the cash currently used for the reimbursement of

meals served in a State would effect a streamlined process for States, the injection of AoA into the commodity process would not. H.R. 2570 merely makes AoA a middleman in the process and creates an additional federal administrative layer which does not currently exist. This seems counter to other proposals in both H.R. 2570 and H.R. 2056 to reduce the number of administrative layers States must confront.

Maya

# NCOA PUBLIC POLICY UPDATE

November 6, 1995

## ♦♦♦ OLDER AMERICANS ACT CALL TO ACTION ♦♦♦

**The House Economic and Educational Opportunities Subcommittee on Early Child Hood, Youth and Families is set to marked up the Older Americans Act, HR 2570 November 9, 1995. It is very important that you contact members of the subcommittee today to let them know your concerns.**

**We Oppose:**

- Block Grant
- Means testing
- Elimination of Advocacy
- Elimination of Targeting and Priority Services
- Combining Congregate and Home Delivered Meals
- Elimination of Health Promotion
- Elimination of Nutrition Education
- Elimination of Title IV, Research and Training
- Elimination of Title VII, Vulnerable Elder Rights
- Merging Title V and Title VI into Title III
- Adding to OAA the USDA Commodities program and CACFP with out adequate funding.

(see attachment for more details)

**TELL CONGRESS:**

**"DO NOT LET CONGRESS WEAKEN THE OLDER AMERICANS ACT!"**

**"HR 2570 IS UNACCEPTABLE IN ITS CURRENT FORM!"**

**Call the switch board and ask for your member of Congress**

CALL TODAY: 202/224-3121

House Early Childhood, Youth and Families subcommittee:

| Republican Members | Democratic Members |
|---|---|
| Duke Cunningham, CA | Dale Kildee, MI |
| William Goodling, PA | George Miller, CA |
| Steve Gunderson, WI | Pat Williams, MT |
| Michael Castle, DE | Donald Payne, NJ |
| Sam Johnson, TX | Patsy Mink, HI |
| Jim Greenwood, PA | Eliot Engel, NY |
| Frank Riggs, CA | Robert Scott, VA |
| Dave Weldon, FL | Carlos Romero-Barcelo, PR |
| Mark Souder, IN | |
| David McIntosh, IN | |

# KEY PROVISIONS IN HR 2570

- HR 2570 removes the advocacy functions throughout the OAA. NCOA supports advocacy in the OAA.

- HR 2570 removes all targeting language. The lack of targeting weakens the ability of special needs groups to receive funding.

- HR 2570 combined congregate, home delivered and adult day care nutrition into one program. NCOA has always supported the congregate and home-delivered programs as separate line items. Once you combine all nutrition services, a state may or may not provide either congregate meals or home-delivered meals. It will be much easier to cut meal programs.

- HR 2570 brings the USDA commodity program to AoA, however the current funding will be diminished. Moving the commodity program over with reduced funding will hurt the meals program. The per meal reimbursement should remain and not be subjected to the funding formula.

- HR 2570 eliminates language on nutrition education and screening. NCOA feels it is very important that these remain in the act and that the "Nutrition" component is not reduced solely to a meals program.

- HR 2570 would move the adult day care portion of CACFP to AoA but without all of its funding. The CACFP program, currently run by the Department of Agriculture, is a means-tested program. CACFP unlike the OAA is not restricted by age. In addition, "consolidation" of this program without bringing along its currently guaranteed funding will decimate the program.

- HR 2570 incorporates Title IV under Title II--with no funding sources--in effect zeros out Title IV. Title IV has played an important role in the field; it is where crucial demonstration models--Family Friends, Elder Care Locator, and many others--have been funded.

- HR 2570 moves Title V to AoA and block grants the program to the states and moves it to Title III. NCOA supports keeping Title V as a separate title, not merged into Title III. We favor maintaining both national and state sponsors. There must be performance standards and accountability in place.

- HR 2570 incorporates Title VI into Title III. NCOA supports Title VI as a separate program, not as part of Title III. Historically, Native Americans and Native Hawaiians have not been adequately served by the existing network. There needs to be adequate funding for Title VI.

- HR 2570 eliminates Title VII. NCOA supports Title VII programs and does not want them incorporated into Title II with no funding.

# ADVOCACY ALERT

*A Service of the National Association of Area Agencies on Aging*

## HOUSE SUBCOMMITTEE MARK-UP ON OLDER AMERICANS ACT REAUTHORIZATION
**Thursday, November 9**

Congressman Cunningham (R-CA) introduced an OAA Reauthorization bill last week, HR 2570. Co-sponsors are Representatives: Goodling (R-PA); Gunderson (R-WI); Castle (R-DE); Sam Johnson (R-TX); Greenwood (R-PA); Riggs (R-CA); Weldon (R-FL); Souder (R-IN); McIntosh (R-IN); Ballenger (R-NC), and Graham (SC). This includes all the Republican members of the Subcommittee.

Cindy Farson provided testimony on behalf of N4A at a hearing last week. Committee questions of the panel focussed on local flexibility, targeting to low-income minorities, the ombudsman program, and the senior community employment program.

The bill will be marked-up in the Subcommittee this Thursday. Staff has indicated that the bill is expected to be marked-up by the full Economic and Educational Opportunites Committee next week.

**SUMMARY OF HR 2570**

**Title I - Purpose and Definitions**
Purpose of the Act is changed to focus more on the aging network role in home and community-based services, a significant departure from the broad objectives in the current statute.

**Title II - Administration**
Consolidates language from Title IV giving the Assistant Secretary for Aging the discretion to fund research and discretionary projects, but with no funding. This essentially eliminates Title IV.

**Title III - Grants for Programs on Aging**

**Subtitle A- Consolidation of Subtitles/Titles**

**Nutrition Services** - Consolidates congregate and home-delivered meals. AAAs are required to provide documentation that the balance of need between congregate and home-delivered meals was considered in developing allocations.
**USDA** - Moves to AoA. Would be included in state funding formulas instead of per meal remibursement. Transfer of funds or administrative charges are not allowed.
**Adult Day Care Meals** - Moves to AoA. It is unclear how different age eligibility would be handled.
**Supportive Services** - Consolidates III-B, and D, E, F, and G.
**Transfer Between Nutrition and Supportive Services** - Limited to 25%, with the option for a state waiver for an additional 25% in transfer flexibility.

**Ombudsman and Elder Abuse Programs** - Title VII eliminated. Some language is moved to Supportive Services in Title III. Many of the protections for vulnerable elderly in the current Title VII are eliminated.

**Community Service Employment** - Transfers Senior and Community Services Employment from Department of Labor to AoA. Funds would go to states to be allocated through a bidding process to local agencies, starting in FY '98. A transition period in FY '97 would phase-in funding to the states and "hold-harmless" current enrollees and local grantees.

**Subtitle B - Grants for Native American Programs on Aging** - Retains set-aside for tribal governments, but a separate title is eliminated.

**Subtitle C - Authorization of Appropriations**
5-year reauthorization. Appropriations levels match the House Labor/HHS/ Education Appropriations bill.

**New Title IV - National Senior Volunteer Corps**
Moves programs to the Administration on Aging.

**KEY PROVISIONS/ISSUES**

**State and Local "Flexibility"**

Priority Services are eliminated.
Minimum funding levels are eliminated.
Federal requirements for Area Plans are significantly cut-back.
Advocacy role of AAAs within their communities and establishment of advisory councils retained.

**Administrative Percent/Matching Funds**

AAA administrative percent reduced from 10% to 8.5%, up from 7% in the draft bill.
State administrative percent increased from 5% to 7% for the additional responsibilities of administering community services employment.
States can elect to supplement AAA administration from its administrative funds.
Local match decreased from 25% to 15% for administration and increased from 10% to 15% for services.

**Cost-Sharing**

Requires states to make the determination on whether or not to require cost-sharing in consultation with AAAs.
Allows states to require or permit AAAs to require cost sharing.
Exempts I & A, outreach, benefits counseling, case management, ombudsman, and other protective services from cost-sharing.
Exempts low-income individuals below a threshold set by the state.
Provides that income will be determined by self declaration.

**Selected Service Provisions**

The requirement for AAAs to obtain a waiver for I&A, case management, and outreach is deleted.
States are required to carry out a state long-term care ombudsman program, but expenses are limited to what was spent on statewide ombudsman programs in FY '95.
Allows states to permit AAAs to use vouchers, but only if the AAA is unable to provide such service by contract with a service provider.

**Targeting/Funding Formula**

Priority to greatest economic and social need is retained.
Targeting to low-income minority seniors is deleted.
Low-income minorities are one of the groups given special mention in the outreach section.
States are given authority to develop intrastate funding formulas with no sign-off from AoA.

**AAA Designation Issues**

Due process for AAAs de-designation has been weakened by delegating authority to the states to develop due process procedures after consultation with AAAs.
Several "qualifications" for PSA designation, including population of 100,000 or more and county right of first refusal are deleted.

# Title IV Research and Development: History of Making a Difference

## Background

The Older Americans Act (OAA) is unique among Federal programs in its ability to be a catalyst for new and innovative approaches in meeting the local needs of older persons and their families.

In the private sector, it is the companies which invest wisely in research and development, and then incorporate new ideas into their current product line, that succeed and make significant profits. Through its Title IV program, the Administration on Aging (AoA) has been one of the rare Federal agencies that has had the ability to emulate the private sector with an applied research, demonstration, and development strategy. These efforts have enabled AoA to develop, test, and incorporate new ideas and applied research at the local level and to provide "consultants" to the States and Area Agencies on Aging.

Title IV has been the testing ground for nutrition programs, home health services, legal services, transportation, respite care, adult day care and many new services which were funded in order to determine how effectively they would promote and protect the independence, rights, and dignity of older Americans in their communities.

## Early Accomplishments

Title IV funding has assisted in testing or developing the majority of Older Americans Act programs and services upon which older persons and their families rely to maintain their independence and dignity, including:

- ✓ The area agency on aging concept;
- ✓ Home and community-based long-term care services;
- ✓ Congregate and home-delivered meals;
- ✓ New approaches and strategies to better serve frail, rural, low-income, and minority elders;
- ✓ Nursing home ombudsmen to help protect older persons
- ✓ from abuse and exploitation in nursing homes and in the community;
- ✓ Adult day care, including the well known On Lok model;
- ✓ Information and referral systems to connect older persons and their families to the services they need;

This report will highlight more recent accomplishments (1985-present) achieved through Title IV in the areas of long-term care/home and community-based services, elder abuse, legal services hotlines, and disaster assistance.

# Long-Term Care/ Home and Community-Based Services

Title IV has provided an essential and flexible source of funds to local communities and States to develop their long-term care systems. These competitive grants have been utilized for planning and implementing systems of home and community-based services, including home-delivered meals, personal assistance, and respite care, that help older individuals maintain their independence.

✓ **State Infrastructure Development** – During the 1980's, Title IV grants helped several States including Colorado, Hawaii, Oregon, and Wisconsin develop cutting edge home and community-based service systems for the frail elderly. In addition, in 25 States the Long-Term Care Channeling Program provided a substantial component of planning for home and community based care as part of an overall long-term care system. In many cases, Title IV was virtually the only source available to fund the early design and planning stages of these systems.

✓ **Technical Assistance To States** – In FY 1995, AoA created the National Mentors Programs in Aging to assist States in learning about successful experiences from one other. States with demonstrated proficiency in the operation of home and community-based care systems will be organized as a corps of mentors for States who want to acquire greater expertise.

✓ **Coalition Building** – Through Title IV, AoA has funded the development of numerous community and regional coalitions to address the needs of at-risk older citizens. By involving churches, businesses, and other organizations, these coalitions have forged new partnerships, yielding tangible benefits such as additional volunteers and expanded resources for elderly individuals in their communities.

✓ **Financing Innovation** – Twenty model projects in comprehensive long-term care at the State and local level rely on Title IV funding. These projects range from innovative efforts to develop coordinated service systems for the elderly and individuals with disabilities to improving consumer access to home and community-based services.

✓ **Eldercare Locator** – On a national level, Title IV supports the, an effort to help local and long distance caregivers find the information they need. By calling a toll-free number, family members are directed to the appropriate source of information about services for older persons in every locality in the United States.

## Elder Abuse Prevention

Public awareness and understanding of the problems of elder abuse were virtually nonexistent in the late 1970's and early 1980's when AoA, through Title IV, undertook a series of groundbreaking research and demonstration projects on the subject. While some grants were used to gather and assess the knowledge and data on elder abuse, three demonstration projects explored what types of services were being used to combat elder abuse and how these services were being organized:

- ✓ AoA developed in the mid-1980's a reliable and valid "index" of elder abuse that continues to be the standard tool used by professionals responsible for investigating and substantiating reports of elder abuse, neglect, and exploitation. Currently, Title IV funding supports a national study to measure accurately the incidence of elder abuse.
- ✓ More recently, in cooperation with the Department of Justice, AoA has been working with the support of the National Sheriffs' Association to provide training to expand community crime prevention programs of cooperation among older persons, law enforcement officers, and agin service providers.
- ✓ The Administration on Aging recently provided continuation funding for demonstration projects that bring together the aging and domestic violence communities in an effort to more effectively address domestic violence that impacts on older women.

## Legal Services Hotlines

AoA began funding Statewide Legal Assistance Hotlines as a cost-effective way of meeting the legal needs of older Americans. Most legal services hotlines rely heavily on trained volunteers to provide advice concerning wills, guardianship, and other legal issues affecting the elderly.

- ✓ With AoA assistance, Statewide Legal Hotlines have been established in **Arizona, northern California, the District of Columbia, Florida, Maine, Michigan, New Mexico, Ohio, Pennsylvania, Puerto Rico, and Texas.**
- ✓ An estimated 65,000 older persons called in to the Statewide Legal Hotlines with legal questions and problems in FY 1994, the latest period for which data are available.
- ✓ An evaluation of Legal Hotlines operations revealed that Legal Hotlines and corresponding referral services resolved 81% of callers' legal questions and 50% of their legal problems.

## Disaster Funding and Services

In recent years, the Nation has experienced a number of disasters, many at a catastrophic level. Hundreds of thousands of older persons have been greatly impacted by these disasters.

Through its Title IV program, the Administration on Aging has engaged in an initiative to strengthen the capacity of the aging network to respond more efficiently and effectively to the local needs of older persons during times of crisis. Unless they can receive timely assistance through the aging network, many older persons are often less likely and able to seek assistance.

### Recent Title IV Funding for Disaster Relief

✓ 1992 – $200,000 for disaster relief to older persons in **Florida** following Hurricane Andrew.

✓ 1993 – $463,295 to assist persons affected by Hurricanes Andrew, Iniki, Typhoon Omar, and the Midwest floods. Awards were made to **Florida, Georgia, Hawaii, Wisconsin, Illinois, Iowa, Kansas, Missouri, North & South Dakota, Nebraska, Ohio, Minnesota, Oklahoma, & Guam.**

✓ 1994 – $387,035 to assist with the devastating effects of the Northridge Earthquake and Hurricane Alberto. States receiving awards were **California, Florida, Georgia, and Alabama.** Conservative estimates indicate that over one- half million older persons were helped during this time to recover from the effects of these disasters.

✓ 1995 – $425,623 to help assist in disasters for the Oklahoma City bombing, floods, and tornadoes. States receiving assistance were **Oklahoma, California, Texas, Louisiana, Illinois, Alabama, Florida, and Missouri.**

### Timely Assistance

Disaster funding from the Supplemental Appropriations process generally takes anywhere from 6 to 18 months to be awarded. However, under the Title IV program, AoA has been successful in awarding disaster funds to local communities where it is needed within 48 hours after Presidentially declared disasters. With this expeditious process, states are able to immediately target special disaster assistance to older persons.

### Examples of Disaster Services Provided by the Aging Network

✓ Identifying & assisting older persons to assess their losses;
✓ Providing case management to locate appropriate services;
✓ Assisting with relocation and temporary housing;
✓ Meal services, day care, transportation & in-home services;
✓ Legal services to assist with claims filing; and
✓ Chore services to assist with clean-up and minor repairs.

## Conclusion

Without Title IV research and demonstration project funding, the key components of today's aging network would never have developed. Instead, we now know that we can keep older persons in their own homes much longer than we ever thought — saving Federal dollars and protecting the dignity and rights of vulnerable elders.

Title IV funding has played a unique role in the development of services to older persons and their families in that it has been the only vehicle within the Older Americans Act, or the Federal Government, which provides:

- ✓ the Assistant Secretary for Aging with the resources to expand the knowledge base on the problems and needs of America's older population and to evaluate OAA programs;
- ✓ a source of funds in the field of aging to design and test innovative ideas, both in terms of technical assistance and service delivery;
- ✓ the tools to assist States and local communities to prepare for an aging society;
- ✓ the ability to improve the effectiveness, efficiency, and quality of OAA programs and services;
- ✓ the leveraging of state, local, and private funds for aging services, research, and education; and
- ✓ the ability to help maintain an adequately trained workforce serving older Americans.

**For more information, please contact:**
Brian Lutz (202) 401-4541
Office of the Assistant Secretary for Aging
Room 309-F, Hubert H. Humphrey Building
200 Independence Avenue, S.W.
Washington, D.C. 20201

Older Americans Act

# Older Americans Act Title IV Funding in Selected States: Fiscal Years 1990 - 1994

The following chart highlights for selected states the OAA Title IV funding for fiscal years 1990 - 1994 to public and non-profit agencies at the state and community levels to conduct training, research, education, demonstration and evaluation activities in aging. Also included are funds provided through this OAA Title IV discretionary program for disaster assistance for older persons in these states.

| Title IV Funding for Selected States | |
|---|---|
| State | FY 1990 - FY 1994 |
| Arkansas | $440,546 |
| California | $12,611,624 |
| Delaware | $841,620 |
| Florida | $17,791,387 |
| Hawaii | $2,334,971 |
| Illinois | $3,145,949 |
| Iowa | $2,040,459 |
| Louisiana | $1,491,706 |
| Maine | $930,000 |
| Maryland | $1,523,747 |
| Massachusetts | $2,495,994 |
| Michigan | $2,874,208 |
| Mississippi | $672,901 |
| Missouri | $7,479,934 |
| Nevada | $616,136 |
| New Hampshire | $863,900 |
| Ohio | $1,116,201 |
| Oregon | $1,266,457 |
| Pennsylvania | $3,325,580 |
| South Carolina | $575,924 |
| Vermont | $1,217,997 |
| Washington | $1,575,672 |
| West Virginia | $869,699 |
| Wisconsin | $1,283,252 |

# REAUTHORIZATION OF T OLDER AMERICA ACT – 1995

| Current Law | H.R. 2056 (Martinez)<br>S.1447 (Mikulski/Pryor/Kennedy)<br>Administration Proposal | H.R. 2570 (Cunningham)<br>Majority Proposal | S. Draft (Gregg)<br>Majority Proposal |
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| **GENERAL**<br>The Older Americans Act amended in 1992 is authorized for three-years and contains seven distinct and significant titles.<br>•Title I: Declaration of Objectives; Definitions<br>•Title II: Administration on Aging<br>•Title III: Grants for State and Community Programs on Aging<br>- Part A -- General Provisions<br>- Part B -- Supportive Services and Senior Centers<br>- Part C -- Nutrition Services<br>- Subpart 1 -- Congregate Nutrition Services<br>- Subpart 2 -- Home Delivered Nutrition Services<br>- Part D -- In home Services for Frail<br>- Part E -- Additional Assistance for Special Needs<br>- Part F -- Disease Prevention and Health Promotion<br>- Part G -- Supportive Activities for Caretakers<br>•Title IV: Research, Development, and Demonstrations<br>- Part A -- Education and Training<br>- Part B -- Research, Development, and Demo's<br>- Part C -- Centers<br>- Part D -- Information Dissemination and Related Activities<br>•Title V: Community Service Employment for Older Americans<br>•Title VI: Grants for Native Americans<br>- Part A -- Indian Program<br>- Part B -- Native Hawaiian Program<br>- Part C -- General Provisions | **GENERAL**<br>The bill is for a three-year reauthorization which retains all seven titles because of the significance each one has to the aging network and the lives of older individuals.<br>•Title I: Declaration of Objectives; Definitions<br>•Title II: Administration on Aging<br>•Title III: Grants for State and Community Programs on Aging<br>- Part A -- General Provisions<br>- Part B -- Supportive Services and Senior Centers<br>- Part C -- Nutrition Services<br>- Subpart 1 -- Congregate Nutrition Services<br>- Subpart 2 -- Home Delivered Nutrition Services<br>•Title IV: Research, Development, and Demonstrations<br>- Part A -- Education and Training<br>- Part B -- Research, Development, and Demonstrations<br>- Part C -- Centers<br>- Part D -- Information Dissemination and Related Activities<br>•Title V: Community Service Employment for Older Americans<br>•Title VI: Grants for Native Americans<br>- Part A -- Indian Program<br>- Part B -- Native Hawaiian Program<br>- Part C -- General Provisions | **GENERAL**<br>This bill is for a five-year reauthorization which deletes Titles IV, V, VI, and VII and incorporates components of these titles into Titles II and III.<br>•Title I: Declaration of Objectives; Definitions<br>•Title II: Administration<br>•Title III: Grants for Programs on Aging<br>- Subtitle A -- Grants for State and Community Programs<br>- Chapter 1 -- General Provisions<br>- Chapter 2 -- Supportive Services and Multipurpose Senior Centers<br>- Chapter 3 -- Nutrition Services<br>- Chapter 4 -- Community Service ~~Employment for Older Americans~~<br>- Subtitle B -- Grants for Native American Programs<br>- Subtitle C -- Authorization of Appropriations<br>•Title IV: National Senior Volunteer Service Corps<br>- Subtitle A -- Retired and Senior Volunteer Program<br>- Subtitle B -- Foster Grandparent Program<br>- Subtitle C -- Senior Companion Volunteer Program<br>- Subtitle D -- General Provisions<br>- Subtitle E -- Administration and Coordination<br>- Subtitle F -- Authorization of Appropriations | **GENERAL**<br>This bill is for a five-year reauthorization which deletes Titles II, IV, V, and VII; changes Title VI to Title IV; and incorporates components of deleted titles into the remaining ones.<br>•Title I: General Provisions<br>- Subtitle A -- Core Objectives and Definitions<br>- Subtitle B -- Administration<br>- Subtitle C -- Funding<br>•Title II: State Programs on Aging<br>- Subtitle A -- General Provisions<br>- Subtitle B -- State Long-Term Care Ombudsman Program<br>- Subtitle C -- Senior Community Service Employment Program<br>- Subtitle D -- Disease Prevention and Health Promotion<br>•Title III: Local Programs on Aging<br>- Subtitle A -- General Provisions<br>- Subtitle B -- Supportive Services and Senior Centers<br>- Subtitle C -- Nutrition Services<br>•Title IV: Native American Programs on Aging |

no low-income targeting
ess'ly no state contractors (option to states)
intrastate funding
moves Sr Service Volunteers

REAUTHORIZATION OF THE OL[illegible] AMERICANS ACT – 1995

| Current Law | H.R. 2056 (Martinez) S.1447 (Mikulski/Pryor/Kennedy) Administration Proposal | H.R. 2570 (Cunningham) Majority Proposal | S. Draft (Gregg) Majority Proposal |
|---|---|---|---|
| •Title VII: Vulnerable Elder Rights Protection Activities<br>- Subtitle A -- State Provisions<br>- Chapter 1 -- General State Provisions<br>- Chapter 2 -- Ombudsman Programs<br>- Chapter 3 -- Programs for the Prevention of Elder Abuse, Neglect, and Exploitation<br>- Chapter 4 -- State Elder Rights and Legal Assistance Development Program<br>- Chapter 5 -- Outreach, Counseling, and Assistance Program<br>- Subtitle B -- Native American Organization Provisions<br>- Subtitle C -- General Provisions | •Title VII: Vulnerable Elder Rights Protection Activities<br>- Subtitle A -- State Provisions<br>- Chapter 1 -- General State Provisions<br>- Chapter 2 -- Ombudsman Programs<br>- Chapter 3 -- Programs for the Prevention of Elder Abuse, Neglect, and Exploitation<br>- Chapter 4 -- State Elder Rights and Legal Assistance Development Program<br>- Chapter 5 -- Outreach, Counseling, and Assistance Program<br>- Subtitle B -- Native American Organization Provisions<br>- Subtitle C -- General Provisions | | |
| The Act, last amended in 1992, has established in its thirty years, the aging network of State and Area Agencies on Aging, tribes and service [illegible]iders, and has focused on the development [illegible] implementation of comprehensive and [illegible]ated home and community-based service delivery systems. It contains a number of key principles and objectives. | The bill retains the "with particular attention to low-income minorities" provisions and focus. The bill also retains priority services, thereby maintaining an emphasis on access, in-home, and legal assistance. | The bill eliminates broad social policy objectives that have been the foundation of the Act for 30 years. The bill also removes the language "with particular attention to low-income minorities" from the Act, but provides a services preference for greatest economic and social need. The bill also removes priority services, including legal assistance. | The bill eliminates broad social policy objectives that have been the foundation of the Act for 30 years. The bill retains the "with particular attention to low-income minorities" provisions and focus. Priority services have been removed, but legal assistance is retained as a mandatory service. |
| The Act focuses on the development of comprehensive and coordinated home and community-based service delivery systems, senior centers, and local focal points of service delivery. | The bill focuses on flexibility, consolidation and streamlining within titles, enhancing accountability, and customer orientation. | The bill focuses on streamlining, consolidating, and the general granting of more flexibility to the States. Additionally, it has similar components focused on consumer orientation and direction. | The bill focuses on streamlining, consolidating, and the general granting of more flexibility to the States. |
| Section 202 (a) of the (Technical Amendments of) Older Americans Act of 1993 states that not later [illegible] May 31, 1995, the President shall convene the White House Conference on Aging in order to develop recommendations for additional research [illegible] action in the field of aging which will further policy set forth in subsection (b).<br>Section 204 establishes a Federal Council on Aging to advise and assist the President and Assistant Secretary on matters relating to the special needs of older individuals. | The bill retains authority for the Federal Council on Aging and the convening of a White House Conference on Aging in the Year 2005, thereby continuing the emphasis needed on preparing the nation for the impact of an aging society. | The bill contains no provisions for the Federal Council on Aging or a White House Conference on Aging. | The bill contains no provisions for the Federal Council on Aging or a White House Conference on Aging. |

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| **TITLE I - DECLARATION OF OBJECTIVES; DEFINITIONS**<br><br>The Act contains 10 objectives that address the inherent dignity of older people, and the duty and responsibility of the governments of the United | **TITLE I - DECLARATION OF OBJECTIVES; DEFINITIONS**<br><br>The objectives in the Act were retained without change, based on the belief that they are still appropriate for the aging network. They focus on the traditional American concept of an individual's dignity in our democratic society. | **TITLE I: DECLARATION OF OBJECTIVES; DEFINITIONS**<br><br>This section attempts to clarify the purpose for the Act, and include all definitions. Community Service Employment Act definitions remain in section 3 and section 505.<br><br>The amended purpose is to encourage State agencies and area agencies to concentrate resources in order to develop greater capacity and foster the development and implementation of comprehensive and coordinated systems to serve older individuals by entering into cooperative arrangements for the planning and provision of ~~supportive services, nutrition services,~~ multipurpose senior centers, community services, and volunteer services to maintain independence and dignity in: a home environment, remove social barriers, provide a continuum of care, secure the opportunity for managed in-home and community-based long-term care services, ensure protection against abuse and neglect, promote employment opportunities, and empower older individuals to contribute to their communities through volunteer services. The ten universal objectives of the Act have been dropped.<br><br>There is no purpose statement regarding Native American programming.<br><br>The definitions, except for Community Service Employment, have been increased from 44 to 51. The definitions are now aligned with the proposed amendments, but also omit any reference to minority or ethnic status. | **TITLE I: GENERAL PROVISIONS**<br><br>Subtitle A: Core Objectives & Definitions<br><br>This section eliminates social policy objectives, and establishes a statement of purpose and core objectives focused on the development of comprehensive and coordinated service delivery systems. The objectives have been narrowed to include maintaining independence; removing social and personal barriers; promoting a continuum of care for the vulnerable; fostering managed community based care; ensuring protection against abuse and neglect; and promoting employment opportunities.<br><br>All definitions have been relocated to Title I. |

## REAUTHORIZATION OF THE OL R AMERICANS ACT – 1995

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| **TITLE II - ADMINISTRATION ON AGING**<br><br>The Act establishes the Administration on Aging; the appointment of the Assistant Secretary for Aging, an office for oversight of Native American and Alaskan programs, as well as a position for Ombudsman services, and a person to oversee nutrition services. The many and several functions of the Assistant Secretary are spelled out. Other sections describe federal agency consultation, The Federal Council on Aging, administration of the Act, evaluations, reports, joint funding of projects, advance funding, application of other federal laws, contracting and grant authority, nutrition education, and authorization of appropriations. Title II requires high-level Ombudsman Program Officer and Office of Ombudsman Programs at , with specified duties [Sec. 201(d)], funding of the National Ombudsman Resource Center at no less than the Center was funded in FY 1990 [Sec. 202(21)]; and AoA ombudsman report to Congress and others [Sec. 207(b)]. | **TITLE II - ADMINISTRATION ON AGING**<br><br>The bill adds authority for the Assistant Secretary to negotiate performance partnerships with the States for the purpose of streamlining, adding flexibility, enhancing quality, accountability and choice. This authority focuses on building an enhanced partnership with the network, one which further devolves responsibility and joins hands with the States and others throughout the network to develop solutions to the issues collectively faced by older individuals today and those to be faced by a future aging society.<br><br>Additionally, the bill adds authority for the permanent establishment of the National Eldercare Locator. This has been a demonstration funded under Title IV which has proven to be very successful. The bill transfers the funding from Title IV to Title II for the operation of the service. | **TITLE II: ADMINISTRATION**<br><br>This bill contains specification for four positions in addition to the Assistant Secretary for Aging (ASA). These positions include the areas of Native American programs, the Ombudsman program, a nutritionist, and an administrator for the volunteer service programs, but are different from current law and the Administration's bill which creates positions to oversee selected offices and programs. Ex.: Ombudsman position is changed from program policy and operations role to "an individual who shall serve as an effective and visible ombudsman...."; Director of the Native American Office changed from an effective and visible advocate to an individual responsible for "monitoring" Native American programs and activities.<br><br>The general authority previously under Title IV is incorporated here. It includes authority to make grants for the purpose of expanding the nation's knowledge; designing, testing, and promoting innovative ideas and best practices; meeting the needs for trained personnel; increasing awareness of the need to assume personal responsibility for one's own aging; conducting research and demonstrations; and the provision of training and technical assistance is incorporated here, but no authority for funding and conducting evaluations.<br><br>Removes requirements that AoA fund a National Ombudsman Resource Center, a National Center on Elder Abuse, and a National Aging Information Center.<br><br>There is no mention of the Eldercare Locator, but an amendment offered by Cong. Kildee will permit the continuation of this service. The provisions for a uniform data collection system (SPR component of the NAPIS) are retained, as well as the gathering of statistical data and consultation with other federal agencies; but AoA ombudsman reporting requirements (NORS component of the NAPIS) are removed. | **Subtitle B: Administration**<br><br>This section establishes language that continues an Assistant Secretary as head of the agency, and references the designation of employees to carry out the responsibilities for ombudsman, nutrition, Native American, and employment services.<br><br>The authority, in broad terms, to fund training, applied research, demonstrations of innovative approaches and best practices, and related discretionary projects and programs (currently Title IV) now lies here as part of the functions of the Assistant Secretary. In addition, specific authority is provided for continuing the Eldercare Locator and the National Center on Elder Abuse. The previous list of duties is narrowed to eight. The duties and powers include advocacy, technical assistance, Federal agency consultation, and data collection, including specific ombudsman data collection, and information on community resources.<br><br>This section provides for the reservation of funds for purposes of making disaster assistance available to States, and Tribes.<br><br>**Subtitle C: Funding**<br><br>This section sets out funding for the following grants to states: long-term care ombudsman programs, Senior Community Service Employment Program (SCSEP), Disease Prevention and Health Promotion, supportive services and senior centers, nutrition services, additional funds for nutrition based on the availability of appropriations, and grants for Native American programs.<br><br>A special ombudsman allotment is included (replacing current Title VII, Chapter 2 funds). States are also permitted to use "such amount (of supportive services funds) as the State agency determines to be adequate for conducting an effective ombudsman program," mirroring the practice under current law. |

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| | | | The bill changes the Interstate Funding Formula by phasing out the 1987 hold harmless provisions of the current Act so that by FY 2001, funds are allotted based on population. It does retain the minimum funding level of 1/2 of 1%.<br><br>The Federal share would remain at not more than 85%. State Plan administration is limited to 5% or $500,000 whichever is greater, and Area Plan administration is such amount as the State agency determines, but not more than 10%. |

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| <u>**TITLE III- GRANTS FOR STATE AND COMMUNITY PROGRAMS ON AGING**</u><br><br>Title III authorizes funds to State and area ; for a broad array of in-home and supportive services. The Act under Sec. 341(a) authorizes states to provide in-home services to frail older individuals, including in-home supportive services for older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction, and to the families of such victims. Under Sec. 361(a), states are authorized to provide disease prevention and health promotion services and information. Supportive activities for caretakers who provide in-home services to older individuals (including older individuals who are victims of Alzheimer's disease or related disorders with neurological and organic brain dysfunction) is authorized under Sec. 381. All of services are also authorized under Part B - Supportive Services and Senior Centers. States funds to area agencies on aging under an intrastate funding formula. Part F, unlike other title III service components, requires state agencies to give funding priority to areas of the state that are medically under served and where are large concentrations of economically / older individuals.<br><br>The Act sets forth numerous requirements to be in area plans and enumerates assurances to be in the state plan as a condition for receiving funds. | <u>**TITLE III - GRANTS FOR STATE AND COMMUNITY PROGRAMS ON AGING**</u><br><br>Title III is retained. In order to restore flexibility of State and Area Agencies on Aging to respond to differing and changing local needs, the bill eliminates the following categorical sub-part programs and put the authority for them under the supportive services part:<br><br>• **D - In-Home Services for Frail Older Individuals**<br>• **E - Additional Assistance for Special Needs of Older Individuals**<br>• **F - Disease Prevention and Health Promotion Services**<br>• **G - <u>Supportive Activities for Caretakers</u> Who Provide In-Home Services to Frail Older Individuals.**<br><br>This will restore the primary focus by integrating them back into the two broad categories of nutrition and supportive services while eliminating the need for separate grant allocations, reports, and funding formulas.<br><br>Consistent with the principles of performance partnerships, the bill eliminates nearly one-half of the list of items which States and Area Agencies must illustrate in their plans, or which are categorized as the federal government prescribing "how to" achieve certain national goals. The goal of the reauthorization proposal is on enhancing the efficiency and effectiveness of administration at the local level.<br><br>The proposal balances the distinct interests of the partners in the aging network. Additional flexibility is granted through enhanced waiver authority. Additionally, there is recognition of and facilitation for the aging network to continue to be innovative in the design and delivery of home and community-based services. Authority is granted to permit cost-sharing for selected services and to focus on developing consumer-directed service systems. | <u>**TITLE III: GRANTS FOR PROGRAMS ON AGING**</u><br><u>**SUBTITLE A: GRANTS FOR STATE AND COMMUNITY PROGRAMS ON AGING**</u><br><br>Amounts appropriated for fiscal years 1997 through 2001 shall be allotted by the Assistant Secretary among States as follows: the product of such amount appropriated for a fiscal year and the base percentage rate for a fiscal year shall be allotted among the States proportionately based on their respective shares of funds appropriated for fiscal year 1996 allotted to States to carry out titles III and VII of the OAA. The balance of such amount appropriated shall be allotted among the States proportionately based on the population of individuals 60 years of age or older in the States. The base percentage rates for fiscal years 1997 through 2000 are 80 percent, 60 percent, 40 percent, and 20 percent respectively. In year 2001 the appropriated amount shall be allotted among the States proportionately based on the population of individuals 60 years of age or older in the States. The hold harmless year is eliminated, but an allowance is made for minimum states.<br><br>The total federal share remains 85%. State administrative costs are increased to 7 percent or $800,000, up from 5 percent. The AAA administrative costs are limited to such amount as determined by the State, but not more than the current 10 percent.<br><br>States shall in consultation with AAAs, using the best available data, develop and publish for review and comment an Intrastate Funding Formula (IFF), taking into account:<br>- the geographical distribution of older individuals in the State;<br>- those with greatest economic need; and<br>- those with greatest social need.<br><br>There is no focus on or mention of low-income minorities. In addition, the bill deletes AoA's involvement in the process. | <u>**TITLE II: STATE PROGRAMS ON AGING**</u><br><u>Subtitle A: General Provisions</u><br>This section would streamline State plan requirements permitting State greater flexibility to choose which services to emphasize in order to meet State and local needs. Information and assistance services are to be a primary responsibility of the State agency and provided in sufficient numbers to ensure that all older individuals who are not furnished adequate information and assistance will have reasonably convenient access to such services.<br><br>While continuing the prohibition against the direct provision of services and the exemptions contained in current law, the bill permits the direct provision of information and assistance, case management and outreach services.<br><br>Legal services is retained as a required service. The prevention of elder abuse is an elective service, but with a specific percentage to be spent if determined by the State. Outreach efforts are required for individuals residing in rural areas, those in greatest economic need, those in greatest social need, those with severe disabilities, limited English-speaking, Alzheimer's disease, and low-income minorities. Particular attention must be given to those with severe disabilities.<br><br><u>Subtitle B: State LTC Ombudsman Program</u><br>This section would require each State to continue operating a long-term care Ombudsman program, retaining most provision in the current Sec. 712.<br><br><u>Subtitle C: SCSEP</u><br>This section would establish a State-administered SCSEP. The Assistant Secretary shall make grants to eligible State and tribal organizations. Direct funding to national organizations would be eliminated. States can contract with public or private nonprofit entities to operate their programs; however, 85% of program funds must be used for wages and fringe benefits. The Federal share would be 85% and the non-Federal share would equal 15%. |

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| | | Community Service Employment appropriations will be reserved for Indian tribal organizations, not to exceed 1.3 percent, and a maximum of 7 percent may be used for administration. The balance of such amount appropriated shall be allotted among the States proportionately based on the population of individuals 60 years of age or older in the States. The base percentage rates for fiscal years 1997 through 1999 are 75 percent, 50 percent, and 25 percent respectively. In year 2000 the appropriated amount shall be allotted among the States proportionately based on the population of individuals 55 years of age or older in the States. However hold harmless still applies, and amounts allotted shall be reduced proportionately as necessary to increase other allotments to achieve the hold harmless. | <u>Subtitle D: Disease Prevention/Health Promotion</u><br>This section retains separate authority for Disease Prevention and Health Promotion activities. It provides that in distributing the funds, priority shall be given to agencies serving areas that are medically underserved, and in which there are large numbers of older individuals with greatest economic need who are in need of such services, but does not seem to require a separate funding formula, as does the current Act.<br><br><u>TITLE III: LOCAL PROGRAMS ON AGING</u><br><br><u>Subtitle A: General Provisions</u><br>This section would streamline Federal requirements for AAAs. Although the bill seeks to allow greater flexibility, AAA plans would continue to take into consideration low-income individuals, those in greatest economic and social need, as well as older Indians. The area plan would be required to promote independent living through home and community-based care, as well as provide for the establishment and maintenance of information and assistance. The plan would also assure that specific objectives are set for service to those in greatest economic and social need, and those residing in rural areas. Outreach, evaluations, technical assistance, case management, and cost sharing would be assurances under the plan.<br><br>This bill retains the basic requirements of current law related to the provision of case management, but adds one additional category of permissible agencies: "a community-based organization with a documented history of providing services under the Act that obtains a waiver." |

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| | | | <u>Subtitle B: Supportive Services & Senior Centers</u><br>This section would streamline requirements by providing maximum discretion for AAAs to pick from among 20 specific types of supportive services.<br><br>Supportive services include almost all the previous ones including transportation, health, information and assistance, assistance to obtain adequate housing, avoid institutionalization, legal assistance, physical exercise, disease prevention and health promotion, health promotion, in-home services for the frail, and one notable new service: receive section 202 applications under the Housing Act. |

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| **Ombudsman program ...**<br>Permits state agencies to use any amount of Title III-B money necessary to conduct an effective ombudsman program [Section 304(d)(1)(B)] and contains minimum ombudsman funding requirements for State and Area agencies [Sections 306(a)(11) and 307(a)(21)].<br><br>Builds on ombudsman provisions in previous reauthorizations;<br>contains provisions which strengthen the authority of the ombudsman and increase the ability of the statewide program to effectively speak on behalf of and represent the needs/interests of vulnerable residents of nursing homes and similar adult care facilities, including:<br>- requirement for full-time State Ombudsman and Office of the Ombudsman;<br><br>- list of functions, including ombudsman duties to recommend changes in laws, regulations, policies actions pertaining to health, safety, welfare rights of residents and similar provisions, including providing information to agencies and legislators;<br><br>- State Ombudsman responsibility to designate local ombudsman entities (programs), duties of local entities, and eligibility requirements for local entities;<br><br>- procedures for access to facilities, residents and records;<br><br>- specific ombudsman reporting requirements, including requirement that an ombudsman report be submitted to the state licensing agency and other federal and state entities, including AoA, specific description and analysis requirements for the report;<br><br>- detailed provisions regarding conflict-of-interest;<br><br>- disclosure, consultation, administration, liability and noninterference requirements; and | **Ombudsman program...**<br>Retained with all the advances, protections and improvements made through the recent reauthorizations.<br>- No limits on the amount of funds to be utilized in the program<br>- Maintenance of effort requirements retained | **Ombudsman program — (also see Title II)**<br>Deletes current Section 712 provisions:<br>- definitions, including resident, ombudsman, local ombudsman entity, program, and representative<br>- requirements for full-time State Ombudsman and State Office of the Ombudsman -- gives the State agency responsibility for all functions, including investigation and resolution of complaints, which current law assigns to the State Ombudsman and Office of the Ombudsman;<br>- ombudsman duties to recommend changes in laws, regulations, policies and actions pertaining to health, safety, welfare and rights of residents and similar provisions, including providing information to agencies and legislators, contained in the current section on administration, which is deleted;<br>- eligibility requirements for local ombudsman entities (programs);<br>- specific conflict-of-interest requirements (although a general COI provision is retained);<br>- requirement that the Ombudsman or the State submit an ombudsman report to the State licensing agency and other Federal and State entities, including AoA, and specific description and analysis requirements for the report contained in current section on administration, which is deleted; - requirement that state establish training standards and that ombudsmen be trained.<br>Deletes minimum State & AAA funding requirements<br>Contains the following general requirements:<br>- State shall provide assurances that it will carry out a program<br>- State may carry out directly or by contract or other arrangement with any public or nonprofit private organization<br>- State may designate any entity as a local ombudsman entity and an individual to represent the entity, as opposed to the programs being designated by Office of State LTC Ombudsman<br>- State shall establish policies and procedures for monitoring local entities...if entities are AAAs, they are to be developed in consultation with AAAs. | **Ombudsman program...**<br>Deleted a separate title for vulnerable elder rights protection, but retained the basic provisions of the LTC Ombudsman Program with the advances, protections, and improvements made through the recent reauthorizations.<br>- No floor or cap on the amount of funds States or AAAs may utilize in the program. |

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| **Legal Services...**<br>AAAs are required to expend an adequate amount, unless they ask for and receive a waiver on their assurance that an adequate amount of funds are available and expended from other s. | **Legal Services...**<br>Retained as a mandated priority service to be provided by States and AAAs because of the needs of vulnerable older individuals. | **Legal Services – optional**<br>"If a State elects to provide legal assistance"... the plan shall contain assurances | **Legal Services...**<br>Retained as a mandated service to be provided by States and AAAs because of the needs of vulnerable older individuals. |
| **Elder Abuse...**<br>be provided through the Statewide development of a comprehensive and coordinated Elder Abuse program under Chapter 3 of Title VII, with the ability to fund specific activities at the State and local level out of Title III. | **Elder Abuse...**<br>Retained as a service to be provided through the Statewide development of an Elder Rights System under Title VII, with the ability to fund specific activities at the State and local level out of Title III. | **Elder Abuse – optional**<br>"If the State elects to provide services for the prevention of elder abuse"... the plan shall contain assurances. | **Elder Abuse – optional**<br>"Whenever the State desires to provide services for the prevention of elder abuse"... the plan shall contain assurances. In addition, the bill requires the funds to be passed through to AAAs. |
| **Outreach** -- Required in both State and area and includes older minority individuals. | **Outreach** -- Retained provisions for outreach which covered older minority individuals. | **Outreach** -- Plan shall provide assurances that the State will require outreach efforts that will identify individuals eligible for assistance and inform them of the availability of such assistance. For this function, there is an emphasis on certain types of older individuals: rural, greatest economic need, greatest social need, severe disabilities, limited English speaking, Alzheimer's, and low-income minority individuals. | **Outreach** -- Plan shall provide assurances that the State will require outreach efforts that will identify individuals eligible for assistance and inform them of the availability of such assistance. For this function, there is an emphasis on certain types of older individuals: rural, greatest economic need, greatest social need, severe disabilities, limited English speaking, Alzheimer's, and low-income minority individuals. |
| **Benefits Counseling**<br>Under Title VII, Chapter 5, there is a program to provide outreach, counseling, and assistance for insurance, public benefits, and pensions with an e ked funding stream | **Benefits Counseling**<br>Retained the same as the current Act. | **Benefits Counseling**<br>A related service is authorized under Title III as other counseling services and assistance, including: tax counseling and assistance, financial counseling, and counseling regarding appropriate health and life coverage [Chapter 2,(a)(5)(A)]. | **Benefits Counseling**<br>A related service is authorized under Title III as other counseling services and assistance, including: tax counseling and assistance, financial counseling, counseling regarding appropriate health and life coverage, as well as counseling related to public and private insurance. |
| **Multigenerational Services & Quality ance**<br>Encouraged and expected as part of providing comprehensive and coordinated service delivery systems. | **Multigenerational Services & Quality Assurance**<br>Retained in concept but not required. | **Multigenerational Services & Quality Assurance**<br>Plan shall provide assurances that efforts will be made to coordinate services with other services that provide Multigenerational activities and that a mechanism exists for the provision of quality in services. | **Multigenerational Services & Quality Assurance** Plan shall provide assurances that efforts will be made to coordinate services with other services that provide Multigenerational activities and that a mechanism exists for the provision of quality in services. |

## REAUTHORIZATION OF THE OLDER AMERICANS ACT --

| Current Law | H.R. 2056 (Martinez)<br>S.1447 (Mikulski/Pryor/Kennedy)<br>Administration Proposal | H.R. 2570 (Cunningham)<br>Majority Proposal | S. Draft (Gregg)<br>Majority Proposal |
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| **Cost Sharing...**<br>Eligibility for programs and services authorized under Title III of the Act is established on an individual basis with age being the sole criterion. Section 102(38) defines the term "older individual" as an individual who is 60 years of age or older. The purpose of Title III of the Act is "...the development and implementation of comprehensive and coordinated systems to serve older individuals [section 301(a)(1)]. Thus, all persons 60 years of age or older are eligible to pate in Title III programs and services.<br>The Act does, however, require state and area agencies to develop state and area plans based on needs assessments which take into account the needs of those older persons in greatest social and economic need with particular attention to low-in minority individuals. The Act and current regulations require that recipients be given an opportunity to contribute voluntarily to offset the cost of a service received. The level of contributions in nutrition services programs is substantial, $171 million as against a total of $470 million in OAA funds. | **Cost Sharing...**<br>The bill permits as an option for the States to implement for purposes of enhancing coordination. It exempts I&A, outreach, benefits counseling, case management, ombudsman, protective services, nutrition services and low-income individuals based on a threshold set by the State. | **Cost Sharing -- Optional**<br>Exempts -- I&A, outreach, benefits counseling, case management, ombudsman, protective services, low-income threshold set by the State...<br>It provides for sliding fee scales based on income, and income to be determined by self-declaration. It should be noted that nutrition services were not excluded. Voluntary Contributions are also permissible. | **Cost Sharing -- Optional**<br>Exempts -- I&A, outreach, benefits counseling, case management, ombudsman, protective services, low-income threshold set by the State...<br>It provides for sliding fee scales based on income, and income to be determined by self-declaration. Confidentiality is to be maintained, and no older individual is to be denied service because of inability to pay. Also, there must be consultation with AAAs and service providers.<br><br>It should be noted that nutrition services were not exempted.<br><br>Voluntary contributions are also permissible, and must be used to increase or expand access to services. The use of cost sharing funds is not addressed. |
| **Consumer-directed Services**<br>In the OAA there is not explicit authorization for the use of independent providers, including members, and the use of cash or vouchers for payment of these providers by the customer. | **Consumer-directed Services --Optional**<br>The bill also provides authority for the usage of cash or vouchers for the purpose of enhancing consumer-directed service provision. | **Consumer-directed Services -- Optional**<br>The bill provides an option for the state to allow use of vouchers, except that for nutrition services this option is restricted to instances where the area agency can not provide the service through contract with a service provider. | **Consumer-directed Services**<br>There does not appear to be any explicit authorization for the use of independent providers, including family members, or the use of cash or vouchers for payment of such providers by the customer. |
| <u>Supportive Services and Multipurpose Senior Centers</u><br><br>Divided requirements over various interconnected parts from A-G. | <u>Supportive Services and Multipurpose Senior Centers</u><br><br>Consolidated parts A-G and maintained title VII. | <u>Chapter 2 -- Supportive Services and Multipurpose Senior Centers</u><br>Consolidates all of the existing subparts and Title VII services under one part... | <u>Subtitle B -- Supportive Services & Senior Centers</u><br>Consolidates all of the existing subparts and Title VII services under four parts... |

| REAUTHORIZATION OF THE OLDER AMERICANS ACT – 1995 | | | |
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| **Current Law** | **H.R. 2056 (Martinez)<br>S.1447 (Mikulski/Pryor/Kennedy)<br>Administration Proposal** | **H.R. 2570 (Cunningham)<br>Majority Proposal** | **S. Draft (Gregg)<br>Majority Proposal** |
| **Transfers...**<br>Provides waiver authority of up to 30 percent (and a phased down additional amount of 10%) transfers between congregate and home delivered meal programs, and a phased down amount of up to 20 percent between supportive nutrition programs (with an additional 8% option upon application). | **Transfers...**<br>The bill retains the authority for transfers of up to 30% between congregate and home-delivered meal programs, and for up to 20% between supportive services and nutrition programs. In addition, it provides waiver authority if these caps are too restrictive in a given State. | **Transfers...**<br>This bill sets a 25% limitation on transfers between supportive services and nutrition services. Upon application, the Assistant Secretary may grant a waiver of an additional 25%. | **Transfers...**<br>This bill sets a 25% limitation on transfers between supportive services and nutrition services. Upon application, the Assistant Secretary may grant a waiver of an additional 25%. |
| **Waivers...**<br>Provides waiver authority for mandatory services, use of State plan administration funds to increase plan ceilings and services, and transfers between Parts B and C upon application. | **Waivers...**<br>The bill grants authority to grant waivers in the areas of statewide uniformity; state and area plan requirements; restrictions on transfers; and the maintenance of effort levels down to the minimum match required under a State plan. | **Waivers...**<br>General waiver authority does not appear to be granted. | **Waivers...**<br>General waiver authority does not appear to be granted. |
| **Part C – Nutrition Services...**<br>Section 311 requires the Secretary of Agriculture to provide support in the form of commodities or cash-in-lieu of commodities to a recipient of a grant or contract to be used for nutrition services in compliance with the provisions of Title III of the Older Americans Act. This support is ided on a per-meal reimbursement basis as the Nutrition Program for the Elderly and is administered by the Food and Consumer Services of the United States Department of Agriculture (USDA) through State and Territory distributing agencies as well as Tribes. | **Part C – Nutrition Services...**<br>The bill consolidates by eliminating the unfunded Subpart for school-based meals, but grants authority for States to perform this function under the congregate nutrition services subpart. It then transfers authority from USDA to AoA for the meal reimbursement program, but modifies the manner in which it is to be administered to lessen the administrative burdens on States and local agencies. The bill retains the connection with the number of meals provided and minimizes any disruptiveness in allocations to States. It exempts the transferred funds from funding formulas and administrative costs, and maintains its availability to the Native American Program. | **<u>Chapter 3 – Nutrition Services</u>**<br>The subparts are consolidated, but the bill still references separately meals in congregate, home-delivered, and adult day care settings. Consistent with the Martinez bill, it transfers the administration of the USDA NPE program to AoA and retains the appropriation in the Agriculture Committee's account at the level of 33% of the Chapter 3 Nutrition appropriation. The funds appear to be subject to the interstate funding formula, the intrastate funding formula, and administrative costs. Additionally, it doesn't appear to be based on the number of meals. Services to Native American programs are now covered.<br>Questions continue to exist regarding the requirements and eligible individuals for meals in adult day care settings and whether or not a transfer of the adult portion of the Child and Adult Care Food Program (CACFP) was intended, but it does delete the Adult portion of the CACFP from the School Lunch Act. | **<u>Subtitle C – Nutrition Services</u>**<br>The subparts are consolidated, but the bill still references separately meals in congregate and home-delivered settings. Consistent with the Martinez bill, it transfers the administration of the USDA NPE program to AoA and retains the appropriation in the Agriculture Committee's account at the level of 33% of the subtitle C Nutrition Services appropriation. The funds will be allotted on a per-meal rate using a methodology similar to the methodology used in the Administration proposal. 98.9% of funds are allotted to States; 1.1% of funds are allotted to Tribes. With these funds, a State or Tribe may choose to enter into an agreement with USDA to purchase commodities. The additional nutrition funds from USDA would become subject to match requirements, but would not be allowed to be used to cover administrative costs, or be transferred. |

## REAUTHORIZATION OF THE OLDER AMERICANS ACT – 1995

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| **TITLE IV - TRAINING, RESEARCH, AND DISCRETIONARY PROJECTS AND PROGRAMS**<br><br>Title IV has evolved over time into an array of specific items and areas for funding, without a degree of balance or an appropriate level of discretion for maintaining the ability to address current issues in the field of aging. | **TITLE IV - TRAINING, RESEARCH, AND DISCRETIONARY PROJECTS AND PROGRAMS**<br><br>The restructuring is based on four principles:<br>• Simplifying and Condensing<br>• Restoring Discretion<br>• Updating and Modernizing the Language<br>• Reconstructing and Balancing the Functions<br><br>As a result the bill eliminates the specificity and categorized functions into the following broad areas:<br>• Education and Training<br>• Research, Development and Demonstrations<br>• Centers<br>• Information Dissemination and Related Activities | **TITLE IV - TRAINING, RESEARCH, AND DISCRETIONARY PROJECTS AND PROGRAMS**<br><br>This title was eliminated in this draft. Broad authority to conduct training, research and discretionary projects and programs was placed in Title II Administration, but no funding was provided. | **TITLE IV - TRAINING, RESEARCH, AND DISCRETIONARY PROJECTS AND PROGRAMS**<br><br>This title was eliminated in this draft. Broad and flexible authority to conduct training, research, demonstrations, and related discretionary projects and programs was placed in a new Title I, specifically under the Section covering "Functions of the Assistant Secretary." This section also specifically authorizes the Eldercare Locator and the National Center on Elder Abuse. The authorization of appropriations to carry out such discretionary projects and programs, plus the Locator and the Center, reads "such sums as may be necessary," thus making this key determination an issue to be settled by the annual appropriations process. |
| **TITLE V - COMMUNITY SERVICE OYMENT FOR OLDER AMERICANS**<br><br>Sec. 502. (a) In order to foster and promote useful part-time opportunities in community service activities for unemployed low-income persons who are fifty-five years old or older and who have poor employment prospects, the Secretary of Labor (hereinafter in this title referred to as the "Secretary") is authorized to establish an older American community service employment program. | **TITLE V - COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS**<br><br>The bill retains separate authority for the Senior Community Service Employment Program, but transfers the administration of it from the Department of Labor to the Administration on Aging. | **Chapter 4 – Community Service Employment**<br><br>Previously, Title V of the Act was administered by DOL. Consistent with the Administration's bill, it would transfer administration of the program from DOL to AoA, but this draft would make additional changes. It would change the current National Contractor/State allocations and program to solely a State program, but provides the State with the option to directly run the program or contract with a public or nonprofit private organization to do so. | **Subtitle C – Senior Community Service Employment Program**<br><br>Previously, Title V of the Act was administered by DOL. Consistent with the Administration's bill, it would transfer administration of the program from DOL to AoA, but this draft would make additional changes. It would change the current National Contractor/State allocations and program to solely a State program, but provides the State with the option to directly run the program or contract with a public or nonprofit private organization to do so. |
| **TITLE VI - GRANTS FOR NATIVE AMERICANS**<br><br>Under title III of the Older Americas Act (Act) eligibility is granted to those older persons 60+, whereas under title VI, each tribe has the option to decide who is considered elderly, and thereby eligible to receive services. The 1992 amendments to the Act emphasized in various sections the need to promote coordination between titles III and VI. | **TITLE VI - GRANTS FOR NATIVE AMERICANS**<br><br>The bill retains separate authority for the program without making changes to the statute. Enhancements for Native Americans include authority to receive disaster assistance, the removal of barriers for coordination with Title III, and access to the funds from USDA's NPE program. | **SUBTITLE B – NATIVE AMERICAN PROGRAMS ON AGING**<br><br>There is no provision for the establishment of an Office for American Indian, Alaskan Native and Native Hawaiian Programs here or in Title II. Additionally, there is the elimination of all references to training and technical assistance under the current Title IV for Native American programming. | **TITLE IV - GRANTS FOR NATIVE AMERICANS**<br><br>The bill retains separate authority for the program. Enhancements of Native Americans include authority to receive disaster assistance, and access to the funds from USDA's NPE program. |

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| **TITLE VII - VULNERABLE ELDER RIGHTS PROTECTION**<br><br>Provides separate authority for States to develop Elder Rights Protection Systems focused on protecting the rights of vulnerable older individuals who reside in the community and in institutional settings. It includes the provision of LTC Ombudsman services; Legal Assistance Development; Elder Abuse, Neglect, and Exploitation Prevention; and Outreach, Counseling and Assistance. | **TITLE VII - VULNERABLE ELDER RIGHTS PROTECTION**<br><br>The bill retains separate authority for States under this title to highlight its significance and the importance of focusing on protecting the rights of vulnerable older individuals who reside in the community and in institutional settings. | **TITLE VII - VULNERABLE ELDER RIGHTS PROTECTION**<br><br>Dropped and consolidated, in part under Title III. | **TITLE VII - VULNERABLE ELDER RIGHTS PROTECTION**<br><br>Dropped and consolidated, in part, under Titles II & III. |
| **NATIONAL SENIOR VOLUNTEER CORPS**<br><br>Does not exist as part of current OAA. | **NATIONAL SENIOR VOLUNTEER CORPS**<br><br>Not a part of the Bill. | **TITLE IV – NATIONAL SENIOR VOLUNTEER CORPS**<br><br>This is a new section added to the Act. The previous authority rested with the Corporation for National Service. | **NATIONAL SENIOR VOLUNTEER CORPS**<br><br>Not a part of the Bill. |
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Administration on Aging

Aging Services Programs

The conference agreement includes $829,393,000, instead of $801,232,000 as proposed by the House and $831,027,000 as proposed by the Senate.

The agreement eliminates as separate line items the ombudsman program and the prevention of elder abuse program. Funds for these programs are earmarked in the bill within the supportive services and centers line item at the fiscal year 1995 level.

The agreement includes a legislative provision as proposed by the Senate that would prevent any State from having its administrative costs under title III of the Older Americans Act reduced by more than five percent below the fiscal year 1995 level. The House had no similar provision.

The conference agreement includes three specific funding levels identified in Senate report 104-145 with respect to the aging research program.