



# WASHINGTON UPDATE

## Let's start with the good news:

JUNE 2017

The Senate Special Committee on Aging recently held two hearings on aging and communities: "Aging Without Community: The Consequences of Isolation and Loneliness" and "Aging With Community: Building Connections that Last a Lifetime." Both hearings are available online at [www.aging.senate.gov](http://www.aging.senate.gov).

## And now for the other news:

### The President's Budget Proposal

On May 22, the full version of the President's FY 2018 budget proposal was released. In its entirety, it is a budget that proposes the deepest cuts in domestic programs in more than a generation, according to news accounts.

Among the programs serving older adults and people with disabilities that would be eliminated under this proposal are the Senior Community Services Employment Program (SCSEP), Senior Corps (the part of the Corporation for National and Community Service (CNCS) that serves seniors), the Social Services Block Grant (SSBG), the Community Services Block Grant (CSBG), the Community Development Block Grant (CDBG), the Low-Income Home Energy Assistance Program (LIHEAP), and the Medicare State Health Insurance Assistance Program (SHIP).

**Some of the larger "safety net" programs taking the deepest cuts** are SNAP (the Supplemental Nutrition Assistance Program, aka food stamps) and Medicaid. These programs serve millions of older adults and people with disabilities. 17% of Medicaid enrollees are "dual eligibles" enrolled in both Medicare and Medicaid and could face large reductions in Medicaid benefits, particularly to home and community-based services. 23% of SNAP beneficiaries are households with older adults or people with disabilities.

**If these cuts are made, they would have a devastating impact on the older adults and families served by Benjamin Rose Institute on Aging** and organizations serving seniors across Northeast Ohio and the entire country. The Senior Companion Program, of which we are the local administrator, would be eliminated, along with its sister programs, RSVP (locally Greater Cleveland Volunteers) and the Foster Grandparent Program (locally East End Neighborhood House). Our home and community-based services have adjusted to continuous funding cuts over the past several years, and these proposed new cuts would further impact already stretched budgets. And while OAA Home-Delivered Meal funds remain static, the need for meals continues to grow. Most critically, one of the largest funding sources for the Rose Centers for Aging Well is the Community Development Block Grant, which is slated for elimination.

Congressional leaders in the Senate and the House of Representatives have announced that they would like to have a 12-bill appropriations omnibus ready to pass before the August recess. This means time is of the essence with advocacy efforts.

The chart on the following page provides specific funding levels for major programs of interest. For reference, we have included the FY17 Continuing Resolution levels as well.

### Please join us in our efforts to help older adults remain independent in the community.

If you do share our concerns, there are some steps you can take, but you need to take them soon.

Contact your Congressional representatives of both parties and their leadership offices and let them know you believe the proposed budget cuts to vital services and programs for older adults and caregivers will harm real people living in our communities.

To find your legislators, visit [www.house.gov](http://www.house.gov) and [www.senate.gov](http://www.senate.gov).

Program	FY17 CR	FY17 Final	FY18 Proposed
OAA IIIB HCBS	\$347.7 million	\$350.2 million	\$347.7 million
OAA Congregate	\$448 million	\$450 million	\$447 million
OAA Home-Delivered	\$226 million	\$227 million	\$226 million
NSIP	\$160 million	\$160 million	\$160 million
OAA Nutrition Total	~\$835 million	~\$838 million	~\$833 million
SCSEP	\$434.4 million	\$400 million	0
OAA VI Native Americans Nutrition	\$31.1 million	\$31.2 million	\$31.1 million
Elder Justice Initiative	\$8 million	\$10 million	\$8 million
Senior Corps	\$202.1 million	\$202.1 million	0
SHIPs (Health Insurance Assisters)	\$52.1 million	\$47.1 million	0
Aging and Disability Resource Centers	\$6.1 million	\$6.1 million	\$6.1 million
Aging Network Support activities (includes Eldercare Locator)	\$9.9 million	\$9.9 million	\$9.9 million
Comm. Mental Health services Block Grant	\$532 million	\$562 million	\$415 million
LIHEAP	\$3.39 billion	\$3.39 billion	0
Comm. Services Block Grant (CSBG)	\$715 million	\$715 million	0
Comm. Development Block Grant (CDBG)	\$3.06 billion	\$3.06 billion	0
Social Services Block Grant (SSBG)	\$1.7 billion	\$1.7 billion	0
Commodity Suppl. Food Program (CSFP)	\$222.2 million	\$235.1 million	\$238 million
Senior Farmers Market Nutrition Program	\$20.6 million	\$18.5 million	\$20.6 million
SNAP	\$80.8 billion	\$78.4 billion	\$73.6 billion
Section 202 Housing	\$432.7 million	\$502.4 million	\$510 million

## American Health Care Act

On May 4, the House of Representatives passed the revised American Health Care Act (AHCA) by a vote of 217-213. Twenty Republicans and all Democrats voted against the bill. The bill is now being considered by the Senate. This is expected to be a longer process, as the Senate has decided to write its own bill, possibly taking some provisions from the House bill but incorporating its own as well.

Some of the provisions in the House bill which could harm older adults:

- Increasing age ratings to allow insurance companies to charge older adults (those below age 65) higher premiums; instituting tax credits that might not make up for the difference in these premiums (according to AARP, Kaiser, Avalere, other sources).
  - Allowing states to apply for waivers to waive essential health benefits, increase premiums for those with pre-existing conditions, and allow annual and lifetime caps on coverage amounts.
  - Ending the Prevention and Public Health Fund, which has provided funding for programs for Alzheimer's disease, falls prevention and elder abuse.
  - Ending Medicaid expansion by 2020. 32 states have expanded Medicaid, covering 11 million new enrollees, including many people between the ages of 55-64.
  - Per capita caps for Medicaid would be initiated, which could result in major service reductions over time, including impacts on home and community-based services (HCBS) for older adults and people with disabilities. HCBS spending makes up over 53% of all long-term services and supports (LTSS) spending in Medicaid, at \$80.6 billion in FY14, and continues to increase at a rapid pace. Total LTSS spending was about \$152 billion in FY14, a 4% increase in just one year. These spending increases may quickly outpace per capita cap spending growth, which would leave the burden on already overstretched state budgets.
- If the President's budget proposal and the AHCA legislation were to both pass, the combined cuts to Medicaid would total more than \$1.4 billion dollars over 10 years.**

The House bill (AHCA) has also been "scored" by the Congressional Budget Office (CBO), which showed that it would cause approximately 23 million more people to be uninsured over the next decade if it became law. The score also forecast that the bill would cut the deficit by \$119 billion over the next 10 years, mostly because it cuts Medicaid and private insurance subsidies.

As we go to press, the US Senate has yet to act on either of these measures. As the Senate writes its bill, now is the time to advocate against policies that could harm older adults.