Aging services are an essential part of the nation's health infrastructure. There are 52 million people over 65 now, a population expected to double by 2040. Meanwhile, research shows that half of us will need formal long-term care and services as we age, in addition to the care we receive from our families and friends. It's essential that we build a strong foundation to ensure those services are available to our rapidly aging population.

Right now, we don’t have the infrastructure for aging services that we need—and the systems we do have are crumbling. The COVID-19 pandemic made clear the tragic human consequences that can happen when our systems are weak. It is no longer acceptable that our system largely ignores a set of services that half of Americans will need at some point in our lives.

LeadingAge’s Blueprint for a Better Aging Infrastructure is a series of recommendations that address the economic, social and racial inequities older Americans face by expanding access to long-term care at home and in our communities; by increasing affordable housing for older adults; and by investing in the physical and technological infrastructure of aging services—including high-speed broadband access. It also addresses the fundamental need to better support and grow our aging services workforce.

BUILD A LARGER, STRONGER AGING SERVICES WORKFORCE

The plan addresses acute shortages in the current aging services workforce, and ensures that enough high-quality care workers can be recruited to fill the jobs needed to serve a growing older population.

- Permanently increase the federal match (FMAP) by 10% for both home and community based and nursing home services.
- Strengthen federal investments in competency-based training programs, offer career pathways to advancement opportunities, and provide support for loan forgiveness programs, especially in rural or underserved communities.
- Provide adequate funding and programs to train additional geriatric nurses and physicians and establish programs and initiatives that train COVID-19 frontline staff to address fatigue and mental health challenges.
- Enact the Palliative Care and Hospice Education and Training Act (PCHETA) which would allow more training of specialized workforce to support those with serious illness.
- Make meaningful changes to immigration policies to support hiring foreign-born workers at all levels and positions in aging services. Ensure that workers hired under these programs are protected from exploitation and have a path to citizenship if they so choose.

LeadingAge also supports a living wage, determined by locality, for all aging services workers across the continuum of care, with providers fully reimbursed to cover wages and benefits.
SUPPORT CARE IN THE HOME AND COMMUNITY

Funding and program support for service and care at home and in the community must be expanded, allowing more older Americans to get the help they need to grow older wherever they call home.

- Ensure full access to Medicaid home and community based services (HCBS) by reclassifying these benefits as mandatory, and doing so in a geographically equitable way.
- Provide incentives to states to eliminate waiting lists, with generous matching and pay for performance metrics.
- Help states develop and improve capacity to provide HCBS, consistent with Senator Casey’s framework outlined in 2020.
- Expand access to integrated models of care like PACE (Programs of All-Inclusive Care for the Elderly) by making it easier for PACE organizations to expand service areas, increase enrollment, and serve additional populations.
- Make permanent Money Follows the Person and HCBS spousal impoverishment protections.
- Provide expanded support for programs under the Older Americans Act.
- Invest in programs to design, revamp, and build accessible physical spaces, such as day centers used for adult day services, PACE organizations and senior centers.
- Add an in-home respite level of care in hospice; this would also provide more jobs.
- Establish pilots that allow for community-based advanced illness services, to provide an extra layer for support to patients with serious illness prior to hospice eligibility.
- Modify the home health benefit to include more personal care, technology, and other necessary services to provide a higher level of care in the home for those who want it.
- Maintain COVID-19 telehealth flexibilities into the future, and expand them to include appropriate reimbursement for Medicare home health and PACE providers.
- Make sure that providers of care in the home and community are eligible to receive technological infrastructure investments such as those offered by the Federal Communications Commission (FCC) and other sources.

EXPAND AND IMPROVE AFFORDABLE SENIOR HOUSING

The plan increases the stock of affordable senior housing, along with age-friendly retrofits to existing housing, and support for broadband internet access critical to providing telehealth and fighting social isolation.

- Expand the supply of affordable senior housing by investing $2.5 billion in the U.S. Department of Housing and Urban Development (HUD)'s Section 202 program to build approximately 54,000 homes.
- Provide a $1 billion pool of capital funds under an Age Friendly Retrofit program for HUD-assisted senior housing and the homes within them, to guarantee physical accessibility, make room for health and wellness activities, and improve air ventilation systems.
- Ensure equity in internet access by defining broadband as a subsidized utility. Invest $5 billion to enable equal access to the health/telehealth, economic, and social connectedness benefits of the internet.
STRENGTHEN NURSING HOMES AND OTHER CONGREGATE LIVING COMMUNITIES

Congregate living communities and nursing homes would be modernized with physical improvements to provide more private rooms and person-centered care, stepped-up staffing and improved quality standards and mechanisms to improve care.

- Maintain and improve outdated physical structures, ensuring private rooms and person-centered care.
- Improve clinical care by requiring 24 hour RN coverage, mandating a 30 day minimum supply of PPE required, and improving the role of infection preventionists; all tied to increased reimbursement to cover the costs.
- Improve staffing ratios in nursing homes with enhanced FMAP funding, and a requirement that increases in funding be passed through to workers' wages and benefits.
- Direct the Centers for Medicare & Medicaid Services (CMS) to modify the nursing home regulatory framework consistent with recommendations from the National Academies of Sciences, Engineering and Medicine's forthcoming report.
- Mandate improvements in the survey process that enable the best resident care and rapidly turn around chronic poor performing nursing homes.
- Establish a publicly reported customer satisfaction measure.
- Enhance FMAP across the board for nursing homes and HCBS settings.
- Establish federal guidelines for state allowable cost definitions.

REFORM LONG-TERM CARE SYSTEM AND FINANCING

It's time for Congress to establish an affordable, meaningful set of policies to finance long-term care for those who need it.

ENSURE A COMEBACK FROM COVID

The plan will allow hard-hit providers to rebound from the massive financial costs of the pandemic, while protecting residents and staff from continued outbreaks of the virus.

- Establish a $6 billion “Hardest Hit” Provider Relief Fund for aging and long-term care providers to ensure that aging and long-term care providers continue to be available to deliver services to our aging population.
- Ensure that the cost of required testing and personal protective equipment to keep staff and residents, patients, and clients safe are fully covered.
- Expand the number of Service Coordinators and the availability of internet in affordable senior housing communities.
- Invest in a nationwide broadband infrastructure to sustain COVID-19 related telehealth flexibilities and other technological additions that help provide more accessibility to high quality

LeadingAge looks forward to working with Congress and the Administration to make these aging services infrastructure investments, which will echo throughout the economy by saving on health care costs, creating jobs and promoting economic development.