

BLUEPRINT FOR A BETTER AGING INFRASTRUCTURE

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 many 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, older adults don't have the aging services infrastructure that we need—and the systems we do have are stressed. 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; increasing affordable housing for older adults; investing in the physical and technological infrastructure of aging services—including high-speed broadband access; and addressing 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.

- 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 the 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.
- Create training and establish grants in the Department of Labor to recruit, retain, or provide advancement opportunities to direct care workers across the continuum of aging services.

- Ensure that aging services occupational training opportunities are addressed within the national apprenticeship system, and nonprofit aging services providers are reflected on the national and state-level apprenticeship advisory committees.
- Support permanent authorization of grants that provide education and training to low-income individuals for occupations in the health care field that are essential to the LTSS workforce. Ensure key support services like child care, and career coaching to provide a supportive pathway to a career are also provided.

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 services 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.

How to spend the President's proposed \$400 billion dollars on home and community-based services (HCBS)

- Provide additional funding to state Medicaid HCBS programs allocated by population needs (number of people with 2+ ADL needs and low incomes).
- Provide a long-term increase to the federal share of Medicaid HCBS spending for the purposes of bolstering the HCBS workforce and to ensure adequate provider reimbursement rates.
- Double investment in Older Americans Act programs, with dedicated increases for OAA supportive services.
- Explore the feasibility of providing HCBS to residents of HUD-assisted units and communities, through HUD, Older Americans Act, Medicaid, or other dollars.
- Create and deploy a new survey instrument to better quantify ADL/IADL needs in the United States.
- Provide incentives for states to develop/expand the PACE model of care.
- Dedicate funding to develop and test new models of care, including emergent/short-term care needs for older adults and people with disabilities.

Other critical supports for care in the home and community

- 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.
- Help states develop and improve capacity to provide HCBS.
- Make permanent Money Follows the Person and HCBS spousal impoverishment protections.
- 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 to provide increased support to family caregivers.
- 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.
- Enhance 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, gets a Service Coordinator into every affordable senior housing community, provides needed age-friendly retrofits to existing housing, and supports broadband internet access critical to providing telehealth and fighting social isolation.

- **Invest** at least \$2.5 billion in HUD's Section 202 Supportive Housing for the Elderly program to build 27,000 affordable senior homes. This \$2.5 billion proposal is consistent with the 116th Congress's S. 2951, H.R. 5187, H.R. 2, the House-passed Moving Forward Act, and President Biden's infrastructure proposal to invest \$2 billion to create new homes with the Section 202 program.
- **More Service Coordinators.** Invest \$1 billion for 3,867 three-year Service Coordinator contracts for the HUD-assisted senior communities currently without one. Only half of HUD-assisted senior housing has a Service Coordinator, the linchpin between residents and home and community-based services (HCBS).
- **Provide internet access in affordable housing** to ensure the more than 2.2 million older adults in federally-subsidized affordable housing buildings have basic internet access. We urge any package to include the Broadband Justice Act, H.R. 1904, which authorizes broadband as a utility and provides funding for wiring, installation, and service fees for all HUD, USDA, and Housing Credit homes.
- **Establish a capital pool for age-friendly retrofits** to meet building design needs in the HUD-subsidized housing stock. LeadingAge supports a \$1 billion pool of capital funds, administered by HUD under a new Age-Friendly Retrofit Program, to help current and future older adult households live in independent housing for as long as they choose to do so. Funds can be used for COVID-responsive ventilation systems, to make more federally-subsidized units fully accessible to meet existing and future needs, and to create and/or modernize physical spaces for services.

STRENGTHEN NURSING HOMES AND OTHER CONGREGATE LIVING COMMUNITIES

Congregate living communities and nursing homes should 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, providing low interest loans, grants, and other financial incentives.
- Improve clinical care by requiring 24-hour RN coverage, mandating maintaining a 30-day minimum supply of PPE, and improving the role of infection preventionists; increase reimbursement to cover these costs because they are not included in current Medicare and Medicaid payment formulas.
- Improve staffing ratios in nursing homes with enhanced FMAP funding that can be used to increase 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, including revising current limits on in-house nurse aid training.
- Eliminate outdated Medicare policies such as the 3-day stay/observation stay requirement for Part A nursing home coverage, which unnecessarily forces beneficiaries to pay out of pocket when they otherwise are eligible for SNF benefits.
- Establish a publicly reported customer satisfaction measure.
- Enhance FMAP across the board for nursing homes and other congregate settings.

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.

- Support an equitable public-private catastrophic long-term care financing plan, such as the WISH Act.
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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 by government funding.
- 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 care and services.

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.