DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR COMMUNITY LIVING

House Committee on Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies

Hearing on the FY 2016 President's Budget Thursday, February 26, 2015 10 a.m.

PRINCIPAL WITNESS:

Kathy Greenlee Administrator of ACL and Assistant Secretary for Aging Chairman Cole, Ranking Member DeLauro, and Members of the Subcommittee:

Thank you for this opportunity. I am here today on behalf of a diverse group of people. I represent the 85-year-old who lives in the home where she and her late husband raised their family. She doesn't drive anymore, so she needs help getting to the doctor's office and to the grocery store. She eats her main meal for the day at the local senior center. Twice a week, she walks to the library down the street to read to a preschool group, and her neighbors are grateful for the eye she keeps on the kids waiting for the school bus at the end of her driveway.

I also am here on behalf of the 25-year-old who is building a new life after an IED in Afghanistan took away his balance and short-term memory, along with his ability to sleep through the night. With the help of his wife and the chance to receive some services at home, he is learning new ways to achieve his and their dreams and be an active dad to their two children.

And I am here for the 19-year-old with Down syndrome who is about to graduate from high school. She has abilities doctors told her parents she would never have, thanks to dedicated teachers and inclusive schools, parents who set challenging goals and helped her achieve them, and her own determination. Just like her friends without disabilities, she is looking forward to going to college, finding a job, getting out on her own, and starting the next chapter of her life.

And ultimately, I represent most of us here in this room. At some point in our lives, most of us will need assistance with at least one of the functions that enable us to maintain our independence, or we will help care for a loved one who needs that help. Many of us will do both, and some of us will give care and receive care at the same time.

The Administration for Community Living was created around one fundamental idea – that older Americans and people with disabilities should be able to live independently and participate fully in their communities. ACL works with other federal agencies, states, tribes, and

communities to preserve that basic right by streamlining and increasing access to the services and supports that make community living possible.

This has never been more important. By 2020, there will be more than 77 million people over the age of 60, and as many as two-thirds of them will at some point need assistance with dressing, showering, or similar tasks. In addition, nearly 57 million people live with disabilities in non-institutional settings, and about 20 percent of them need assistance with daily living tasks.

During my career I have met countless older adults, people with disabilities and family members. I know that people enjoy a better quality of life when they are able to live in a home of their choosing, with people they love, rather than in an institutional setting. As it happens, community living also makes financial sense. The average cost of a shared room in a skilled nursing facility is almost \$75,000 per year. Large public residential facilities for people with disabilities cost three times that. When people are unable to pay these costs themselves, Medicaid is the primary payer. In contrast, the average Medicaid waiver for home- and community-based services is just under \$27,000 per year. Additionally, ACL provides supportive services that can help people completely avoid or delay these more expensive services and remain in their homes – which is clearly the right thing to do.

ACL's FY 2016 budget request of \$2.096 billion would enable us to work with states and other partners toward this goal through four key areas: increasing access to services and supports, sharing information, protecting consumers, and investing in quality and innovation to ensure program effectiveness. In addition, the budget request will enable investment in much-needed infrastructure to support ACL's significantly expanded mission.

Increased access to services and supports

First, ACL would make home- and community-based services and supports available to

more people. For example, the \$42.8 million increase for senior nutrition programs, together with state and local funding, will help provide 213 million meals to over 2 million older adults and help halt recent declines in services. A CL also is requesting an additional \$38.5 million to help states provide over 28 million hours of support to older adults needing assistance with daily activities; more than 23 million rides to doctors, pharmacies, grocery stores and other critical activities; and nearly 8 million hours of adult day services. The \$5 million increase requested for Centers for Independent Living, which provide assistance to nearly 226,000 people with disabilities of all ages, will enable the Centers to implement new requirements of the Workforce Innovation and Opportunity Act to help more people with disabilities leave nursing homes and other institutions, and assist youth with disabilities to transition from high school into adult life.

ACL will invest in supporting family caregivers, who provide the vast majority of assistance to both older adults and people with disabilities across the country. A 2014 Rand Corporation study found care provided by families and friends of older adults has an estimated annual value of \$522 billion, while the cost of providing care to a son or daughter with a significant disability is estimated to range between \$20,000-\$60,000 per year, often for many decades. These costs often are transferred to government-funded solutions when families become overwhelmed by the strain of providing this support. The Family Support Initiative would direct \$15 million to helping families to reduce stress, improve emotional well-being, develop support skills, and plan for the future; and would include efforts that help families balance work and caregiving responsibilities or assist with the dual demands of caring for older parents while raising children or supporting a family member with a disability.

Improved information sharing

Second, and closely related, ACL would expand assistance to connect people to

information about available programs and services and how to access them. ACL will invest an additional \$13.9 million in Aging and Disability Resource Centers, which work with states to develop better systems of information; provide one-on-one, person-centered counseling; and streamline access to resources. For example, in partnership with the Department of Veterans Affairs, ADRCs have been helping provide veterans of all ages the services and supports they select, based on the needs that are most important to them, to enable them to move out of nursing facilities back home, or to remain at home with supports.

Consumer protections for older adults and individuals with disabilities

Third, we will expand protections for our populations at most risk. More than 10 percent of older adults are abused, neglected, or exploited annually, and people with disabilities are four to ten times more likely to be abused than peers without disabilities. With the additional \$21 million requested this year, ACL will advance our efforts to provide federal leadership to states for the existing Adult Protective Services system, including investments in innovation and research and infrastructure development for data measurement that will help achieve a more comprehensive system throughout the nation for helping adult victims of abuse – including older adults and individuals with disabilities – and preventing abuse before it happens.

Evidence-based models and innovation

Finally, ACL will develop and improve evidence-based models and ensure best practices are shared across communities. For example, ACL proposes to devote \$20 million to modernize its nutrition programs, which are critical to helping older Americans be healthy and preventing the need for costly medical interventions. This investment will provide competitive grants to translate research into evidence-based models for delivering services at the community level, ensuring the continued quality of these programs and helping them prepare to meet the changing

demands of seniors as the baby boom generation ages – for example, serving clients who will expect to interact with service providers over the web and via mobile apps.

Infrastructure investment

The transfer of the Rehabilitation Act and Assistive Technology Act programs from the Department of Education to ACL created a whole that is greater than the sum of its parts, and the combined organization will better serve older adults and people with disabilities. However, the increase in responsibility at ACL due to this and other factors created infrastructure costs that require increased administrative support to fully and effectively run these programs. This request will ensure a seamless continuation of these programs, and prevent disruptions to programs under the Older Americans Act, the Developmental Disabilities Act, and other legislation.

In summary, as Administrator of ACL, I have had the opportunity to see firsthand the advancement of new technologies, exciting innovations and an entrepreneurial spirit in helping to support families, older adults, veterans and people with disabilities. I have been encouraged by the collaborative spirit of our federal, tribal, state and local partners, and together, we are making a real difference in helping ensure all people, regardless of age or ability, have the right to make their own decisions and fully participate in their communities. However, we are at a critical juncture. The populations we serve are growing, and without careful investment and planning, the need for services will outstrip resources to provide them. We must continue to work together to ensure that older Americans and people with disabilities have access to the long-term supports they need, and are valued as contributing members of our integrated communities. Investing in these services and supports can help more Americans live at home and avoid more costly alternatives. This budget will allow ACL to continue to make and improve upon those investments. Thank you again for the opportunity to discuss ACL's budget with you today.