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Older Americans Act: 2020 Reauthorization

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SUMMARY

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Older Americans Act: 2020 Reauthorization

First enacted in 1965, the Older Americans Act (OAA) was created in response to concern by policymakers about a lack of community social services for older individuals. Since then, the OAA has been reauthorized and amended numerous times. Before 2020, the last OAA reauthorization occurred in 2016, when the Older Americans Act Reauthorization Act of 2016 (P.L. 114-144) was enacted, which extended the act's authorizations of appropriations through FY2019 (authorizations of appropriations for most OAA programs had expired after September 30, 2019). OAA-authorized activities continued to receive annual discretionary appropriations for FY2020.

The OAA supports a wide range of social services and programs for individuals aged 60 years or older. These programs and services include supportive services and funding for senior centers, congregate nutrition services (i.e., meals served at group sites such as senior centers, community centers, schools, churches, and senior housing complexes), home-delivered nutrition services (sometimes informally referred to as "meals on wheels"), family caregiver support, community service employment, the Long-Term Care Ombudsman Program, and services to prevent the abuse, neglect, and exploitation of older persons. Except for the programs and activities authorized under Title V, Community Service Employment for Older Americans (CSEOA), all other programs and activities are administered by the Administration on Aging (AOA) in the Administration for Community Living (ACL) within the Department of Health and Human Services (HHS). Title V activities are administered by the Department of Labor's (DOL's) Employment and Training Administration.

In the 116th Congress, both the House and the Senate passed legislation to reauthorize the OAA for a five-year period. On October 28, 2019, the House passed H.R. 4334, the Dignity in Aging Act of 2019. The Senate then took up H.R. 4334 and passed the bill with an amendment on March 3, 2020, renaming the legislation as the Supporting Older Americans Act of 2020. Following Senate action, the House passed H.R. 4334, as amended by the Senate, on March 11, 2020. On March 25, President Donald J. Trump signed P.L. 116-131 (H.R. 4334), the Supporting Older Americans Act of 2020, which amends the OAA to authorize appropriations for OAA programs for FY2020 through FY2024, among other changes to the act. Key amendments to the OAA included in the Supporting Older Americans Act of 2020 that may be of interest to policymakers and stakeholders concern

- specific disease prevention and health promotion activities, such as fall-related injuries and social isolation;
- modifications to nutrition services programs to call attention to malnutrition;
- changes to the National Family Caregiver Support Program to include caregiver assessments;
- best practices and technical assistance;
- changes to the Title III statutory funding formula for certain programs; and
- dedicated funding for a supportive services program for Native Americans under Title VI.

This report provides an analysis of P.L. 116-131, the Supporting Older Americans Act of 2020, and discusses key reauthorization amendments. It also presents a brief summary of the act's historical development and a section-by-section summary of the provisions contained in P.L. 116-131. **Appendix A** provides additional information about deadlines and effective dates for implementing provisions under P.L. 116-131; and **Appendix B** lists the authorizations of appropriations under the act.

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Introduction

Originally enacted in 1965, the Older Americans Act (OAA) supports a wide range of social services and programs for individuals aged 60 years or older.[1] These programs and services include home-delivered nutrition services, congregate nutrition services,[2] supportive services such as transportation and home care services, family caregiver support, community service employment, the Long-Term Care Ombudsman Program, and services to prevent the abuse, neglect, and exploitation of older persons. Except for programs and activities authorized under Title V, Community Service Employment for Older Americans (CSEOA), all programs and activities are administered by the Administration on Aging (AOA) in the Administration for Community Living (ACL) within the Department of Health and Human Services (HHS). Title V activities are administered by the Department of Labor's (DOL's) Employment and Training Administration.

The OAA has been reauthorized and amended numerous times. Most recently, on March 25, 2020, P.L. 116-131, the Supporting Older Americans Act of 2020, was enacted into law. Among other changes to the act, P.L. 116-131 authorizes appropriations for OAA programs for FY2020 through FY2024.[3] Prior to the FY2020 reauthorization, the last OAA reauthorization occurred in 2016, when the Older Americans Act Reauthorization Act of 2016 (P.L. 114-144) was enacted. P.L. 114-144 extended the OAA's authorizations of appropriations through FY2019 (authorizations of appropriations for most OAA programs had expired after September 30, 2019). OAA-authorized activities continued to receive annual discretionary appropriations for FY2020.

This report provides a legislative timeline for reauthorization, as well as an analysis of key reauthorization issues. This is followed by a brief summary of the OAA's historical development. Next, it provides a section-by-section summary of P.L. 116-131, the Supporting Older Americans Act of 2020. **Appendix A** provides additional information about deadlines, reporting requirements, expiring provisions, and other effective dates for implementing provisions under P.L. 116-131. **Appendix B** lists the authorizations of appropriations under the act.[4]

As used in this report, the term *Secretary* refers to the Secretary of Health and Human Services (HHS) and the term *Assistant Secretary* refers to the Assistant Secretary for Aging. Abbreviations mostly commonly used in this report are listed below.

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[1] OAA defines *older individual* as an individual who is 60 years of age or older (42 U.S.C. 3002(40)). However, under OAA Title V, Community Service Employment for Older Americans, participants aged 55 or older are eligible for program participation (42 U.S.C. 3056(a)(1), 42 U.S.C. 3056p(a)(3)(A)).

[2] Congregate nutrition services are meals served at group sites such as senior centers, community centers, schools, churches, and senior housing complexes.

[3] For a compilation of the Older Americans Act of 1965, as amended through P.L. 116-131, see https://acl.gov/sites/default/files/about-acl/2020-04/Older%20Americans%20Act%20Of%201965%20as%20amended%20by%20Public%20Law%20116-131%20on%203-25-2020.pdf.

[4] Prior to enactment of P.L. 116-131, FY2020 discretionary appropriations for OAA programs, projects, and activities under ACL's Aging and Disability Services Programs budget authority and the Department of Labor budget authority were funded under the Further Consolidated Appropriations Act, 2020 (P.L. 116-94) at an estimated total of $2.100 billion. In response to the Coronavirus Disease 2019 (COVID-19) pandemic, supplemental appropriations laws providing an additional $1.120 billion in funding for OAA programs have been enacted. For more information about the Older Americans Act and funding, see CRS Report R43414, *Older Americans Act: Overview and Funding*.

Abbreviations

AAA	Area Agency on Aging
ACL	Administration for Community Living
ADRC	Aging and Disability Resource Center
AOA	Administration on Aging
CDC	Centers for Disease Control and Prevention
CMS	Centers for Medicare & Medicaid Services
DOL	U.S. Department of Labor
FY	Fiscal Year
GAO	Government Accountability Office
HHS	U.S. Department of Health and Human Services
HUD	U.S. Department of Housing and Urban Development
NIA	National Institute on Aging
LTC	Long-term care
LSP	Local Service Provider
OAA	Older Americans Act
PHSA	Public Health Service Act
SAMHSA	Substance Abuse and Mental Health Services Administration
SUA	State Unit on Aging
SSI	Supplemental Security Income
USDA	U.S. Department of Agriculture
WIOA	Workforce Innovation and Opportunity Act (P.L. 113-128)

Older Americans Act: Reauthorization Timeline and Key Issues

This section provides the legislative timeline for OAA reauthorization in the 116th Congress and describes the key reauthorization issues for policymakers and stakeholders in amending the act.

Reauthorization Timeline

In the 116th Congress, both the House and the Senate considered legislation to reauthorize the OAA. In June of 2019, a bipartisan working group of leadership offices from the Senate Committee on Health, Education, Labor, and Pensions (HELP) and the Senate Special Committee on Aging released a discussion draft entitled the Modernization of the Older Americans Act Amendments.[5] On September 16, 2019, the House introduced H.R. 4334, the Dignity in Aging Act of 2020, a bill to reauthorize the OAA for a five-year period, through FY2024. Two days later, the House Committee on Education & Labor held a markup session and ordered the bill

[5] U.S. Congress, Senate, S. ___, to modernize the Older Americans Act of 1965, and for other purposes, Discussion draft, 116th Cong., June 2019, https://www.aging.senate.gov/imo/media/doc/MOAA.pdf.

reported, as amended. The House Committee on Education & Labor reported H.R. 4334, as amended,[6] which was subsequently passed in the House on October 28, 2019, and placed on the Senate Legislative Calendar.

On December 16, 2019, the Senate draft language under the Modernization of the Older Americans Act Amendments was amended and introduced as S. 3057, the Modernization of the Older Americans Act of 2020. S. 3057 would authorize appropriations for programs over a seven-year period, through FY2026, and make various amendments to existing OAA authorities, including changes to the statutory funding formula for certain programs under Title III of the act.

Rather than amend the Senate-introduced bill, the Senate instead took up the House bill, H.R. 4334, which was renamed the Supporting Older Americans Act of 2020, and passed it with an amendment on March 3, 2020. H.R. 4334, as amended by the Senate, would authorize appropriations for OAA programs through FY2024, among other modifications. The House then passed H.R. 4334, as amended by the Senate, on March 11, 2020. President Donald J. Trump signed P.L. 116-131, the Supporting Older Americans Act of 2020, on March 25, 2020.

Key Issues

Key OAA reauthorization issues for policymakers and stakeholders included amending the act to address a range of health promotion and disease prevention activities, such as chronic disease self-management and falls prevention, as well as addressing the negative effects of social isolation among older individuals. Policymakers focused on other reauthorization issues as well, including changes to nutrition services programs and to programs that provide support to family caregivers. In addition, policymakers continued to seek alternative ways to distribute Title III funding through the statutory funding formula for certain programs and established a new program authority for supportive services to Native Americans.

Health Promotion and Disease Prevention

The OAA seeks to promote the health and wellness of older individuals by supporting healthy lifestyles and behaviors. In addition, the OAA includes a number of grant authorities and other activities that address disease management and preventive services to assist older individuals in maintaining their quality of life and potentially avoiding more costly medical interventions. For example, evidence-based chronic disease self-management programs provide older individuals with education and tools to help them manage chronic conditions such as arthritis, asthma, depression, diabetes, lung disease, heart disease, stroke, and osteoporosis, among others.[7] The Administration on Aging (AOA) provides community-based organizations that serve older individuals with resources and information about mental, behavioral, and brain health. In addition, grants to support falls prevention programs use evidence-based community programs to reduce falls, which are the leading cause of injury-related death among adults aged 65 and older.[8]

P.L. 116-131 makes several changes to the OAA to further promote healthy lifestyles and behaviors among older individuals and to promote evidence-based disease prevention activities. For example, the law amends the definition of *disease prevention and health promotion services* to include screening for immunization status, suicide risk, fall-related traumatic brain injury and other fall-related injuries, and social isolation. The amended definition of *disease prevention and*

[6] H.Rept. 116-258.

[7] Administration for Community Living, "Health, Wellness, and Nutrition," https://acl.gov/programs/health-wellness.

[8] Centers for Disease Control and Prevention, "Home and Recreational Safety, Older Adult Falls, Falls Data," https://www.cdc.gov/homeandrecreationalsafety/falls/fallcost/deaths-from-falls.html.

health promotion services includes infectious disease and vaccine-preventable disease, prevention of sexually transmitted diseases, and chronic pain management as evidence-based health promotion programs. P.L. 116-131 further defines new terms such as "*person-centered, trauma-informed"* and "*traumatic brain injury.*"

Under the OAA Title III Supportive Services and Senior Centers Program, P.L. 116-131 authorizes states to provide screening for negative health effects associated with social isolation and traumatic brain injury, and to provide services that promote or support social connectedness and reduce social isolation. And, under OAA Title IV for training, research, and demonstration projects in the field of aging, the law includes evidence-based falls prevention, chronic disease self-management programs, addressing social isolation, and public awareness of traumatic brain injury among the list of authorized grant activities. P.L. 116-131 further amends OAA Title IV to add language authorizing the establishment and operation of a national resource center focusing on older individuals experiencing trauma. In addition, the law requires separate studies on the negative health effects of social isolation and on federal programs that support falls prevention, home assessments, and home modifications.

Nutrition Services

The Nutrition Services Program, authorized under OAA Title III, provides grants to states and U.S. territories to support nutrition services for seniors. As stipulated in the law, the purposes of the program are to (1) reduce hunger and food insecurity, (2) promote the socialization of older individuals, and (3) promote the health and well-being of older individuals by assisting them in accessing nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutrition or sedentary behavior.

P.L. 116-131 makes several changes to the OAA to clarify standards and make further improvements to the nutrition programs. It amends OAA Title II to specify that the officer or employee responsible for federal administration of the Nutrition Services Program be a registered dietician or registered dietician nutritionist. Under OAA Title III, the law includes reducing malnutrition as a purpose of the Nutrition Services Program and similarly includes screening for malnutrition in the definition of *disease prevention and health promotion services*. P.L. 116-131 specifies that meals adjusted to meet special dietary needs should include those adjusted for cultural considerations and preferences and medically tailored meals.

With respect to the states' authority to transfer funds between nutrition programs under OAA Title III, P.L. 116-131 further requires states to ensure that transfers are done in a manner that reduces administrative barriers and directs limited resources to the greatest nutrition service needs at the community level. The law also directs the Assistant Secretary to perform a study to assess how to measure and evaluate the discrepancy between available services and the demand for such services in the Nutrition Services Program.

Family Caregiving

OAA Title III authorizes the National Family Caregiver Support Program (NFCSP), a formula grant program available to states and U.S. territories that provides services and supports to directly assist family caregivers. These services and supports may include information and referral, individual counseling, support groups, training, and respite care. OAA Title VI also authorizes the Native American Caregiver Support Program to provide funding to tribal organizations for similar caregiver services and support to Native American elders.

Caregiving issues were of particular interest to policymakers in this OAA reauthorization. P.L. 116-131 amends the NFCSP to include caregiver assessments as a defined process of gathering

information to identify the specific needs and barriers to caregiving, as well as identifying existing supports to appropriately target program services. Such assessments may be used to inform the resources and services provided to caregivers. P.L. 116-131 requires the Assistant Secretary to provide technical assistance on the use of caregiver assessments and to include caregiver assessments in certain reporting requirements. It also requires the Assistant Secretary to issue a report to Congress on the use of caregiver assessments by Area Agencies on Aging (AAAs) and tribal organizations. P.L. 116-131 authorizes the Assistant Secretary to award NFCSP funds for conducting activities of national significance that promote quality and improvement under NFCSP and the Native American Caregiver Support Program. It further requires the Assistant Secretary to identify and make publicly available best practices under these programs.

The reauthorization also includes provisions to address specific populations of caregivers and makes amendments to other caregiving statutes that broadly address caregiving issues. Specifically, it amends OAA Title III to address younger onset Alzheimer's disease by specifying that caregivers can care for individuals of any age with Alzheimer's disease. It also removes NFCSP's funding cap for support services to older relative caregivers of children and young adults with severe disabilities. P.L. 116-131 extends the sunset date for the advisory council established under the Supporting Grandparents Raising Grandchildren Act (P.L. 115-196) by one year, until July 7, 2022. P.L. 116-131 also requires that the HHS Secretary, acting through the Assistant Secretary for Aging, carry out the duties of the Recognize, Assist, Include, Support, and Engage Family Caregivers Act of 2017 (RAISE Family Caregivers Act, P.L. 115-119), which directs HHS to develop a national family caregiving strategy. The law extends the sunset date for authorities and obligations provided under P.L. 115-119 by one year, until January 22, 2022.

Statutory Funding Formula

Similar to past OAA reauthorizations, changes to the OAA Title III funding formula were of interest to policymakers. Congress continued to revisit the "hold harmless" provision, which under prior law ensured that states and U.S. territories were guaranteed to receive at least 99% of the previous year's funding amount for FY2017 through FY2019; for FY2020, states were guaranteed to receive 100% of their FY2019 funding amount. The hold harmless provision has divided lawmakers from states with relatively faster-growing older populations from those representing states with relatively slower growth in their older populations. Those representing fast-growth states have argued that the "hold harmless" provision in current law protects states whose populations are not increasing as quickly as others' are and results in an inequitable distribution of funds that disadvantage fast-growth states.

To address this issue, P.L. 116-131 eliminates the hold harmless provision for two programs—(1) Home-Delivered Nutrition Services and (2) Disease Prevention and Health Promotion Services—beginning in FY2020. It also changes the funding formula calculation for two programs—(1) Supportive Services and Senior Centers and (2) Congregate Nutrition Services—over a 10-year period from FY2020 to FY2029. For these two programs, the law establishes one methodology that goes into effect when the amount of funding available under the program for grants to states and territories in a given year is less than or equal to the amount available for FY2019. It establishes an alternate grant allocation methodology that takes effect when the amount of funding available for grants to states and territories in a given year exceeds the amount available for FY2019. For FY2030, it eliminates the hold harmless provision for Supportive Services and Senior Centers and Congregate Meals, effective October 1, 2029.

Older Americans Act: Historical Development

First enacted in 1965, the Older Americans Act (OAA) was created in response to concern by policymakers about a lack of community social services for older individuals. The original legislation established authority for grants to states for community planning and social services, research and development projects, and personnel training in the field of aging. The law also established the Administration on Aging (AOA) within the then-Department of Health, Education, and Welfare (DHEW) to administer the newly created grant programs and to serve as the federal focal point on matters concerning older individuals.

Although older individuals may receive services under many other federal programs, today the OAA is considered the major vehicle for the organization and delivery of social and nutrition services to this population. The act authorizes a wide array of service programs through a nationwide network of State Units on Aging (SUAs), Area Agencies on Aging (AAAs), and tribal organizations, as well as thousands of aging and social service providers in local communities. For example, Title III programs provide grants to SUAs, who in turn fund local AAAs to act as advocates on behalf of and to coordinate home-delivered meals, homemaker and chore services, and disease prevention and health promotion programs for older persons, among other activities. The act also supports the sole federal job program targeting low-income older workers and funds training, research, and demonstration activities in the field of aging.

Prior to the enactment of the OAA in 1965, older persons were eligible for limited social services through some federal programs. However, with the recognition that older individuals were becoming a larger proportion of the population and that their needs were not being formally addressed through existing federal programs, many groups began advocating on their behalf. Their actions led President Truman to initiate the first National Conference on Aging in 1950. Conferees called for government and voluntary agencies to accept greater responsibility for the problems and welfare of older individuals.

Further interest in the field of aging led President Eisenhower to create the Federal Council on Aging in 1956 to coordinate the activities of the various units of the federal government related to aging. The beginning of a major thrust toward legislation along the lines of the later-enacted OAA was made at the 1961 White House Conference on Aging. The conferees called for a federal coordinating agency in the field of aging to be established in statute, with adequate funding for coordinating federal efforts in aging, as well as for a federal program of grants for community services specifically for the elderly.[9]

In response to the White House Conference on Aging recommendations, legislation was introduced in 1962 to establish an independent U.S. Committee on Aging to cut across the responsibilities of many departments and agencies, and to create a program of grants for social services, research, and training that would benefit older persons. Legislation introduced in 1963 modified the 1962 proposal to call for creating within DHEW the AOA, which was to be under the direction of a Commissioner for Aging, appointed by the President with the approval of the Senate.

The OAA as introduced in 1965 paralleled the 1963 proposal. Sponsors emphasized how it would provide resources necessary for public and private social service providers to meet the social service needs of the elderly. The act received bipartisan support and was signed into law by

[9] U.S. Department of Health Education and Welfare, Special Staff on Aging, *The Nation and Its Older People, Report of the White House Conference on Aging, Jan. 9-12, 1961*, Washington, DC, April 1961, http://hdl.handle.net/2027/mdp.39015001657678.

President Lyndon Johnson on July 14, 1965 (P.L. 89-73). In addition to creating AOA, the act authorized grants to states for community planning and services programs, as well as for research, demonstration, and training projects in the field of aging. In his remarks upon signing the bill, President Johnson indicated that the legislation would provide "an orderly, intelligent, and constructive program to help us meet the new dimensions of responsibilities which lie ahead in the remaining years of this century. Under this program every state and every community can now move toward a coordinated program of services and opportunities for our older citizens."[10]

Major Amendments to the Older Americans Act

Since the original legislation was enacted in 1965, the OAA has been amended numerous times. The following section provides a summary of major amendments to the OAA over the past six decades.

1960s

The first amendments to the act in 1967 (P.L. 90-42) extended authorization for the state grant program and for research, demonstration, and training programs created in 1965. In 1969, authority was added under P.L. 91-69 for a program of area-wide model projects to test new and varied approaches to meet the social service needs of the elderly. The 1969 amendments also authorized the foster grandparent and retired senior volunteer programs to provide part-time volunteer opportunities for the elderly. (Authority for volunteer programs under the OAA was repealed by P.L. 91-69. These programs were subsequently authorized under the Domestic Volunteer Service Act of 1973, P.L. 93-113.)

1970s

Major amendments to the act occurred in 1972 with the creation of the national nutrition program for the elderly (P.L. 92-258). The 1973 amendments (P.L. 93-29) represented a major shift in federal law, with the establishment of sub-state Area Agencies on Aging (AAAs). For the first time, the act authorized the creation of local agencies whose purpose is to plan and coordinate services for older persons and to act as advocates for programs on their behalf. These amendments also created legislative authority for the community service employment program for older Americans that had previously operated as a demonstration initiative under the Economic Opportunity Act. In 1974, Congress passed legislation to extend the national nutrition program for the elderly (P.L. 93-351). The 1975 amendments (P.L. 94-135) extended the OAA through 1978, specifying certain services to receive funding priority under the state and area agency on aging program. In 1977, Congress made changes to the OAA nutrition program under P.L. 95-65, which permitted states to receive cash payments in lieu of donated food under the U.S. Department of Agriculture's surplus commodities food program.

The 1978 amendments (P.L. 95-478) made major structural changes to the act by consolidating previously separate grant programs for social services, nutrition services, and multipurpose senior center facilities into one program under the administration of SUAs and AAAs. The intent of these amendments was to improve coordination among the various service programs under the act. Among other changes were requirements for establishing state long-term care ombudsman programs and a new Title VI that authorized grants to Indian tribal organizations for social and nutrition services to older Native Americans.

[10] Public Papers of the Presidents of the United States, *Lyndon B. Johnson*, vol. 2, Washington, DC, 1965, p. 744.

1980s

The 1981 amendments (P.L. 97-115) made modifications to give SUAs and AAAs more flexibility in the administration of their service programs. These amendments also emphasized the transition of participants to private sector employment under the community service employment program. In 1984, Congress addressed a number of provisions (P.L. 98-459), including adding responsibilities for AOA; adding provisions designed to target services toward low-income minority older persons; giving more flexibility to states regarding service funds allocations; and giving priority to the needs of Alzheimer's patients and their families. The 1986 amendments (P.L. 99-269) increased authorized appropriations to provide a higher per meal reimbursement rate and directed the Secretary of Agriculture and the Department of Health and Human Services (HHS) to inform states, AAAs, and meal providers of their eligibility to participate in the National Commodity Processing Program.

The 1987 amendments (P.L. 100-175) expanded certain service components of SUAs and AAAs to address the special needs of certain populations. Congress authorized the following six additional distinct authorizations of appropriations for services: (1) in-home services for the frail elderly; (2) long-term care ombudsman services; (3) assistance for special needs; (4) health education and promotion services; (5) services to prevent abuse, neglect, and exploitation of older individuals; and (6) outreach activities for persons who may be eligible for benefits under the supplemental security income (SSI), Medicaid, and food stamp programs. Among other changes were provisions designed to give special attention to the needs of older Native Americans and persons with disabilities, to emphasize targeting of services to those most in need, to elevate the status of AOA within HHS, and to address eligibility of community service employment participants for other federal programs.

1990s

The 1992 amendments (P.L. 102-375) restructured some of the act's programs. A new Title VII, Vulnerable Elder Rights Protection Activities, was created to consolidate and expand certain programs that focus on protection of the rights of older persons. Title VII incorporated separate authorizations of appropriations for the long-term care ombudsman program; the program for the prevention of elder abuse, neglect, and exploitation; elder rights and legal assistance development program; and outreach, counseling, and assistance for insurance and public benefit programs. In addition, provisions were included to strengthen requirements related to targeting of Title III services on special population groups. Other amendments authorized programs for assistance to caregivers of the frail elderly, clarified the role of Title III agencies in working with the for-profit sector, and required improvements in AOA data collection.

In 1993, the OAA was amended (P.L. 103-171) to establish an Assistant Secretary for Aging (formerly the Commissioner on Aging) within HHS, to extend the time frame for convening the White House Conference on Aging, and to make technical amendments to the act and several other acts.

2000s

The 2000 amendments (P.L. 106-501) were enacted after six years of congressional debate on reauthorization. P.L. 106-501 extended the act's authorizations of appropriations for programs through FY2005. These amendments authorized the National Family Caregiver Support Program under Title III; required the Secretary of Labor to establish performance measures for the senior community service employment program; allowed states to impose cost-sharing for certain Title III services older persons receive while retaining authority for voluntary contributions by older

persons toward the costs of services; and consolidated a number of previously separately authorized programs. In addition, the amendments required the President to convene a White House Conference on Aging by December 31, 2005.

In 2003, the OAA was amended (P.L. 108-7) to revise provisions for the Nutrition Services Incentive Program, whereby access to commodities within U.S. Department of Agriculture (USDA) was maintained but authority for the program was transferred from the USDA—where it had been since its inception—to AOA.

The 2006 amendments (P.L. 109-365) extended the act's authorizations of appropriations for programs and activities through FY2011. Among other things, P.L. 109-365 authorized the Assistant Secretary for Aging to designate an individual within AOA to be responsible for prevention of elder abuse, neglect, and exploitation and to coordinate federal elder justice activities. It revised the formula for the allocation of certain Title III funds and revised the Title V community service employment program to place more emphasis on training of older individuals, while maintaining emphasis on placing them in community service activities. The law also required the Secretary of Labor to conduct a national competition for Title V funds every four years. In addition, the 2006 amendments required states to conduct increased planning efforts related to the growing number of older people in coming decades, and focused attention on the needs of older people with limited English proficiency and those at risk of institutional placement. The law added authority for the Assistant Secretary for Aging to conduct several new demonstration programs under Title IV. Among these were demonstration projects for model projects to assist older people to age in place, including supportive services programs in Naturally Occurring Retirement Communities (NORCs).

2010s

The 2016 amendments (P.L. 114-144) were enacted after six years of congressional debate, which was framed in the context of constraints on discretionary appropriations due to a restrictive budgetary climate. As a result, policymakers and stakeholders had little interest in seeking new or significant program expansions or activities under a reauthorization. Similar to past OAA reauthorizations, P.L. 114-144 revised the formula for the allocation of certain Title III funds. The law also revised the statutory language for most OAA discretionary authorizations of appropriations to identify discrete amounts of funding rather than authorizations of "such sums as may be necessary" for a given fiscal year. In doing so, the law extended the act's authorizations of appropriations for a three-year period through FY2019. Among other things, the law provided additional flexibility to states, AAAs, and social services providers in addressing the modernization of senior centers, falls prevention, and behavioral health screening, and it codified existing practices, such as requiring "evidence-based" disease prevention and health promotion services. Furthermore, the law aligned related programs, such as the workforce programs under Title V and those under the Workforce Innovation and Opportunity Act (WIOA, P.L. 113-128), while establishing new Title V performance measures and providing states with the option to establish a combined state plan for Title V under WIOA. The law also repealed certain sections under Title IV that, at the time, did not receive funding. Other provisions clarified policy for the Long-Term Care Ombudsman Program and addressed coordination among Aging and Disability Resource Centers (ADRCs) and other home and community-based service organizations providing information and referrals.

The Older Americans Act Reauthorization of 2020

A section-by-section summary of the provisions in the Supporting Older Americans Act of 2020 (P.L. 116-131) appears below. For information about effective dates for implementation of certain provisions, deadlines for reporting requirements, and other provisions that sunset under P.L. 116-131, see **Table A-1**. For a comparison of prior law authorizations of appropriations (as amended through P.L. 114-144) with current law through P.L. 116-131, see **Table B-1**.

Title I: Modernizing Definitions and Programs Under the Administration on Aging

Title I of P.L. 116-131 makes amendments to provisions primarily under OAA Titles I and II. The following section provides relevant background for context on OAA Titles I and II and a summary of the amendments made to the OAA by Title I of P.L. 116-131, among other stand-alone provisions, which includes a section-by-section summary of the provisions included in Title I of P.L. 116-131.

Background

OAA Title I sets out broad social policy objectives oriented toward improving the lives of all older Americans, including adequate income in retirement, the best possible physical and mental health, opportunity for employment, and comprehensive long-term care services, among other things. Also, Title I provides definitions for various terms under the act. Title I does not authorize appropriations.

OAA Title II establishes the Administration on Aging (AOA) and identifies the responsibilities of AOA and the Assistant Secretary for Aging. Title II also establishes State Units on Aging (SUAs), which serve as the state agency primarily responsible for planning and policy development, as well as for administration of OAA activities. OAA Title II also establishes Area Agencies on Aging (AAAs). AAAs serve as local entities that, either directly or through contract with local service providers (LSPs), oversee a comprehensive and coordinated service system for the delivery of social, nutrition, and community-based long-term services and supports to older individuals. Discretionary funding authorized under OAA Title II provides grant funding for Aging and Disability Resource Centers (ADRCs) and other activities.

Summary

Title I of P.L. 116-131 makes certain changes to definitions under OAA Title I and extends the authorizations of appropriations for OAA Title II, among other changes to various titles under the act. Specifically, it adds new terms, including *state assistive technology entity*, *person-centered, trauma-informed*, and *traumatic brain injury*. It amends the duties and functions of the Assistant Secretary to include addressing the negative effects of social isolation and requires a report on the topic. It further requires the Assistant Secretary to provide certain types of technical assistance activities and requires interagency coordination activities, including coordination with other federal agencies regarding suicide prevention among older individuals. Title I of P.L. 116-131 also requires the Assistant Secretary, in collaboration with other federal officials, to establish a "Committee on Healthy Aging and Age-Friendly Communities."

In addition, Title I of P.L. 116-131 requires the Assistant Secretary to coordinate OAA research and evaluation functions for the aging network under a new Research, Demonstration, and Evaluation Center. It codifies the existing National Resource Center for Women and Retirement

under OAA Title II. And, it authorizes direct care worker demonstration programs in coordination with the Secretary of Labor, to the list of grant activities under OAA Title IV. Furthermore, P.L. 116-131 amends the RAISE Family Caregivers Act (P.L. 115-119) to extend the sunset date by one year and amends the definition of *Secretary* under the RAISE Family Caregivers Act to include the Assistant Secretary for Aging.

Section 101. Reauthorization

The provision amends OAA Section 216 to authorize appropriations under OAA Title II for a five-year period through FY2024 as follows:

> (a) for administration, salaries, and expenses of the Administration on Aging, $43,937,410 for FY2020, $46,573,655 for FY2021, $49,368,074 for FY2022, $52,330,158 for FY2023, $55,469,968 for FY2024;
>
> (b)(1) to carry out §202(a)(21) relating to the National Eldercare Locator Service, $2,180,660 for FY2020, $2,311,500 for FY2021, $2,450,190 for FY2022, $2,597,201 for FY2023, $2,753,033 for FY2024;
>
> (b)(2) to carry out Section 215, relating to Pension Counseling and Information Program, $1,988,060 for FY2020, $2,107,344 for FY2021, $2,233,784 for FY2022, $2,367,811 for FY2023, $2,509,880 for FY2024;
>
> (b)(3) to carry out Section 202 relating to Elder Rights Support Activities under this title, $1,371,740 for FY2020, $1,454,044 for FY2021, $1,541,287 for FY2022, $1,633,764 for FY2023, $1,731,790 for FY2024;
>
> (b)(4) to carry out Section 202(b) relating to ADRCs, $8,687,330 for FY2020, $9,208,570 for FY2021, $9,761,084 for FY2022, $10,346,749 for FY2023, $10,967,554 for FY2024.

Section 102. Person-Centered, Trauma-Informed Services

The provision amends OAA Section 101(2) with respect to the Declaration of Objectives regarding physical and mental health under the act to add the following language "(including access to person-centered, trauma-informed services as appropriate)."

Section 103. Aging and Disability Resource Centers

The provision amends OAA Section 102(4) with respect to the definition of *Aging and Disability Resource Center* to mean an entity that provides information and assistance "in collaboration with" AAAs, Centers for Independent Living, and other aging or disability entities. It adds new language stating that person-centered counseling include developing and implementing a person-centered plan for long-term "services, supports" and care that is consistent with the desires "and choices" of such an individual. With respect to cooperation of other entities, it strikes language referencing 29 U.S.C. 796f et seq. related to Centers for Independent Living and clarifies that other community-based entities include other aging or disability entities.

Section 104. Assistive Technology

The provision amends OAA Section 102(8) to define the new term *State assistive technology entity* to mean "the agency, office, or other entity designated under Section 4(c)(1) of the Assistive Technology Act of 1998 (29 U.S.C. 3003) to carry out state activities under such section."

It amends OAA Section 306(a)(6) to require that each area plan provide that the AAA will coordinate with the state assistive technology entity to ensure access to, and acquisition of, assistive technology in serving older individuals.

It further amends OAA Section 306(b)(3) to authorize AAAs to make recommendations to state and local government officials to meet the needs of older individuals for "assistive technology devices and services" among the list of current issues.

It also amends OAA Section 411(a)(2) to authorize grants or contracts with respect to applied social research and analysis that are "aligned with evidence-based practice" and in paragraph (10) with respect to technology-based service models and best practices to refer to technology services consistent with Section 508 of the Rehabilitation Act of 1973 (29 U.S.C. 794d).

Section 105. Vaccination

The provision amends OAA Section 102(14)(B) to add language to the definition of *disease prevention and health promotion services* to include "immunization status" in examples of routine health screening and to include the prevention of "infectious disease, and vaccine-preventable disease" in examples of evidence-based health promotion programs.

Section 106. Malnutrition

The provision amends OAA Section 102(14)(B) to add language to the definition of *disease prevention and health promotion services* to include "screening for malnutrition" in examples of routine health screening. It amends OAA Section 330(1) to expand the purpose of nutrition services to include reducing "malnutrition."

Section 107. Sexually Transmitted Diseases

The provision amends OAA Section 102(14)(D) to add language to the definition of *disease prevention and health promotion services* to include "prevention of sexually transmitted diseases" in examples of evidence-based health promotion programs.

Section 108. Addressing Chronic Pain Management

The provision amends OAA Section 102(14)(D) to add language to the definition of *disease prevention and health promotion services* to include "chronic pain management" in examples of evidence-based health promotion programs.

Section 109. Screening for Suicide Risk

The provision amends OAA Section 102(14)(G) to add language to the definition of *disease prevention and health promotion services* to include "screening for suicide risk" under community mental and behavioral health services.

Section 110. Screening for Fall-Related Traumatic Brain Injury; Addressing Public Health Emergencies and Emerging Health Threats; Negative Health Effects Associated with Social Isolation

The provision amends OAA Section 102(14) to add new subparagraphs (H), (L) and (N), as redesignated, to include the following in the definition of *disease prevention and health promotion services*:

(H) "screening for fall-related traumatic brain injury and other fall-related injuries; coordination of treatment, rehabilitation and related services; and referral services related to such injuries";

(L) "services that are part of responses to a public health emergency or emerging health threat"; and

(N) "screening for the prevention of negative health effects associated with social isolation and coordination of supportive services and health care to address such effects associated with social isolation."

Section 111. Clarification Regarding Board and Care Facilities

The provision amends OAA Section 102(35) to modify the definition of *long-term care facility* to include *board and care facility* without specific reference to OAA Section 307(a)(12), related to state plan assurances regarding elder abuse prevention activities, and OAA Section 712, related to the State Long-Term Care Ombudsman Program.

Section 112. Person-Centered, Trauma-Informed Services Definition

The provision amends OAA Section 102 to define the new term *person-centered, trauma-informed* to mean "with respect to services, services provided through an aging program that–(A) use a holistic approach to providing services or care; (B) promote the dignity, strength, and empowerment of victims of trauma; and (C) incorporate evidence-based practices based on knowledge about the role of trauma in trauma victims' lives."

Section 113. Traumatic Brain Injury

The provision amends OAA Section 102 to define the new term *traumatic brain injury* to have the same meaning under PHSA Section 393B(d), which is defined to mean an acquired injury to the brain.[11] This definition does not include brain dysfunction caused by congenital or degenerative disorders, nor birth trauma, but the definition may include brain injuries caused by anoxia (i.e., absence of oxygen) due to trauma. The HHS Secretary is authorized to revise the definition as necessary after consultation with states and other appropriate entities.

Section 114. Modernizing the Review of Applications and Providing Technical Assistance for Disasters

The provision amends OAA Section 202 with respect to the duty and function of the Assistant Secretary to require that the Assistant Secretary administer the grants provided by the act, but not approve a grant application for a grant from a prior grantee unless the Assistant Secretary determines the activity has operated, or is operating, effectively to achieve its stated purpose and that the applicant meets certain compliance requirements. It further requires the Assistant Secretary to provide technical assistance to, and share best practices with, states and AAAs on how to collaborate and coordinate activities and develop emergency preparedness plans with certain specified entities.

The provision also amends OAA Section 202 to add a new subsection (h) to require the Assistant Secretary to annually publish a list of centers and demonstration projects funded under each title of the act and to ensure that this information is directly provided to states and AAAs.

[11] 42 U.S.C. §280b–1c.

Section 115. Increased Focus of Assistant Secretary on Negative Health Effects Associated with Social Isolation

The provision amends OAA Section 202(a) to require the Assistant Secretary, with input from aging network stakeholders, to develop objectives, priorities, and a long-term plan for supporting state and local efforts related to negative health effects associated with social isolation among older individuals. It further requires the Assistant Secretary to submit a report to Congress on this effort by January 2021.

Section 116. Notification of Availability of or Updates to Policies, Practices, and Procedures through a Uniform E-Format

The provision amends OAA Section 202(a) to require the Assistant Secretary to provide (to the extent practicable) a standardized notification to SUAs, AAAs, service providers, grantees, and contract awardees on the availability of, or updates to, policies, practices, and procedures under the act through electronic format.

Section 117. Evidence-Based Program Adaptation

The provision amends OAA Section 202(a) to require the Assistant Secretary, in providing information and technical assistance regarding the delivery of evidence-based disease prevention and health promotion programs, to include information and technical assistance on delivery of such services in different settings.

The provision amends OAA Section 361(a) regarding the Title III, Part D, Evidence-Based Disease Prevention and Health Promotion Services Program to require the Assistant Secretary, in carrying out the program, to provide technical assistance on the delivery of evidence-based disease prevention and health promotion services in different settings and for different populations.

Section 118. Business Acumen Provisions and Clarification Regarding Outside Funding for Area Agencies on Aging

The provision amends OAA Section 202(b)(9) with respect to the establishment of technical assistance programs to assist SUAs, AAAs, and providers in implementing home and community-based long-term care systems and evidence-based disease prevention and health promotion services programs. Specifically, it includes activities for increasing business acumen, capacity building, organizational development, innovation, and other methods to address the capacity of the aging network to serve older individuals and caregivers.

The provision amends OAA Section 306 with respect to area plans to state that nothing in the act should restrict an AAA from providing services not provided or authorized by the act, including through contract with health care payers; consumers' private pay programs, or other arrangements with entities or individuals that increase the availability of home and community-based services and supports.

The provision adds a conforming amendment to OAA Section 307(a).

Section 119. Demonstration on Direct Care Workers

The provision amends OAA Section 411(a) to add language authorizing, in coordination with the Secretary of Labor, grants or contracts to demonstrate new strategies for recruitment, retention, or

advancement of direct care workers and to implement certain strategies among other authorized activities.

Section 120. National Resource Center for Older Individuals Experiencing the Long-Term and Adverse Consequences of Trauma

The provision amends OAA Section 411(a) to add language authorizing the establishment and operation of a national resource center focused on older individuals experiencing trauma among other authorized activities. The center is required to provide training and technical assistance to agencies in the aging network that are delivering services to older individuals experiencing trauma; to share best practices with the aging network; and to make subgrants to agencies best positioned to deliver person-centered, trauma-informed services to such older individuals.

Section 121. National Resource Center for Women and Retirement

The provision amends OAA Section 215 to add a new subsection (k) requiring the Assistant Secretary to operate, directly or by grant or contract, the National Resource Center for Women and Retirement. The center is required to provide information on financial management and retirement planning, to develop targeted outreach strategies and summarize outreach activities, and to provide technical assistance to state agencies and other entities, among specified activities.

Section 122. Family Caregivers

The provision amends OAA Section 202 to add a new subsection (i) to require the Assistant Secretary to carry out the Recognize, Assist, Include, Support, and Engage Family Caregivers Act of 2017 (RAISE Family Caregivers Act, P.L. 115-119). It amends Section 6 of the RAISE Family Caregivers Act, to extend the sunset date for authorities and obligations under the act from three years to four years from enactment (i.e., to January 22, 2022), and amends the definition of *Secretary* to mean the Secretary of HHS "acting through the Assistant Secretary for Aging."

Section 123. Interagency Coordination

The provision amends OAA Section 202(a)(5) with respect to the duty and function of the Assistant Secretary to add language to the requirement that the Administration develop, plan, and conduct research in the field of aging and assist in programs designed to meet the needs of older individuals to require certain interagency coordination activities. Specifically, related to mental and behavioral health services, the Assistant Secretary for Aging is required to coordinate with the SAMHSA Assistant Secretary for Mental Health and Substance Use and the CDC Director in evidence-based policies, programs, practices, and other activities and in providing technical assistance pertaining to the prevention of suicide among older individuals.

It further amends OAA Section 202(a)(5), which requires that the Administration develop, plan, and conduct research in the field of aging and assist in programs designed to meet the needs of older individuals, to also include "cultural experiences, activities, and services, including in the arts" to the list of specified topics.

Section 124. Modernizing the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities

The provision amends OAA Section 203(b) regarding the purpose of federal agency consultation under the act to add PHSA Section 393D[12] relating to falls prevention among older adults to the list of programs related to the objectives of the act.

It amends OAA Section 203(c) to strike certain language regarding the Interagency Coordinating Committee on Aging and replace it with language requiring the Secretary, in collaboration with other federal officials, to establish a "Committee on Healthy Aging and Age-Friendly Communities." The committee will focus on coordinating agencies' response to aging issues and the development of a national set of recommendations to support older individuals to age in place and access homelessness prevention services and preventive health care, to promote age-friendly communities, and to address access to long-term care supports. It requires the Chairperson of the Committee's term to start no later than one year after enactment.

It describes certain recommendations that the committee may include, such as

- ways to improve coordination among federal agencies with responsibility for programs and services that impact older individuals;
- best practices identified in coordination with certain specified federal entities (e.g., CDC, NIA, CMS, as well as HUD's office of Lead Hazard Control and Healthy Homes, and other federal agencies, as appropriate) that incorporate evidence-based falls prevention programs and home modifications to reduce falls among older individuals;
- ways to collect and disseminate information about programs and services available to older individuals to ensure that such information is accessible;
- ways to ensure certain data collection activities;
- actively seek input from and consult with certain specified entities; and
- ways to improve coordination to provide housing, health care, and other supportive services to older individuals.

For the purposes of this subsection, the provision defines the term *age-friendly community*. It requires the Assistant Secretary to provide technical assistance regarding dissemination of best practices and recommendations from the committee and methods for managing and coordinating existing programs to meet the needs of growing age-friendly communities.

Section 125. Professional Standards for a Nutrition Official Under the Assistant Secretary

The provision amends OAA Section 205(a)(2)(D)(ii) regarding federal administration of the act to require that the officer or employee tasked with the administration of nutrition services "be a registered dietician or registered dietician nutritionist."

Section 126. Report on Social Isolation

The provision requires the Secretary, in carrying out evaluation activities under OAA Section 206(a), to prepare a report on programs that address the negative impacts associated with social isolation through targeting older individuals identified as being in greatest social need, as

[12] 42 U.S.C. 280b-1f.

appropriate. It requires the report to identify whether social isolation is adequately addressed under such programs and to identify various types of programs. It further requires the report to include recommendations, as appropriate, for reducing the negative impacts of social isolation and to address any impacts as identified. The Secretary is required to submit an interim report to Congress on the status of the evaluation and the development of the final report no later than two years after enactment. The Secretary is required to submit a final report to Congress no later than five years after enactment.

Section 127. Research and Evaluation

The provision amends OAA Section 201 to add a new subsection (g) that requires the Assistant Secretary to coordinate the research and evaluation functions of the act under a "Research, Demonstration, and Evaluation Center for the Aging Network."

The provision specifies that one purpose of the center, among others, is to coordinate, as appropriate, research, research dissemination, evaluation, demonstration projects, and related activities carried out under the act. It further requires certain center activities to include conducting, promoting, coordinating, and providing support for research and evaluation activities and demonstration projects that support the objectives of the act, along with outreach and dissemination of research findings and certain technical assistance.

The center shall be headed by a Director with substantial knowledge of and experience in aging, health policy, and research administration, as designated by the Assistant Secretary. The provision requires the Director to coordinate research, research dissemination, evaluation, and demonstration projects, as well as related activities, with appropriate agency program staff, and with other federal departments and agencies involved in research in the field of aging, as appropriate. The Director is required to consult with research experts and stakeholders on the implementation of the center's activities and to coordinate, as appropriate, all research and evaluation authorities under the act.

No later than October 1, 2020, and at five-year intervals thereafter, the provision requires the Director to publish in the *Federal Register* for public comment a draft of a five-year plan that outlines priorities for research, research dissemination, evaluation, demonstration projects, and related activities; explains the basis for such priorities; and describes how the plan will meet the needs of underserved populations.

The provision requires the Director to submit to the Secretary and to Congress a report on the activities funded under this section and OAA Title IV, no later than December 31, 2020, and annually thereafter.

The provision further amends OAA Section 206(b) to require the Secretary, no later than July 1, 2020, to provide directly or by contract for an evaluation of programs under the act, to include to the extent practicable an analysis of the relationship of such programs—including demonstration projects under OAA Title IV—to health care expenditures under the Medicare and Medicaid programs. The Secretary is required to oversee analyses of data obtained in connection with program evaluation to evaluate, where feasible, the relationship of programs under the act to health care expenditures, including under the Medicare and Medicaid programs. It amends OAA Section 207 to add a new subsection (d) that requires the Assistant Secretary to provide the evaluation required under Section 206(b) to certain specified committees of Congress.

Title II: Improving Grants for State and Community Programs on Aging

Title II of P.L. 116-131 makes amendments to provisions primarily under OAA Title III. The following section provides relevant background for context on OAA Title III and a summary of the provisions under Title II of P.L. 116-131, among other stand-alone provisions, which includes a section-by-section summary of the provisions included in Title II of P.L. 116-131.

Background

OAA Title III authorizes grants to SUAs, who in turn fund local AAAs to act as advocates on behalf of and to coordinate programs for older persons. States receive separate allotments of funds based on a statutory funding formula for Supportive Services and Senior Centers, Congregate Nutrition, Home-Delivered Nutrition, the Nutrition Services Incentive Program, Disease Prevention and Health Promotion Services, and the National Family Caregiver Support Program (NFSCP).

In order to receive federal funding under OAA Title III, states are required to periodically develop and submit a multiyear state plan for approval by the Assistant Secretary. The state plan serves as a policy and planning document that guides state program implementation. Under the state plan, states are required to provide various assurances with respect to planning, coordination, evaluation, and administration of Title III programs, services, and activities in meeting the act's broader objectives. OAA Title III also requires AAAs to develop and submit a multiyear area plan approved by the SUA. Similar to the state plan, the area plan serves as a policy and planning document for a designated planning and service area within the state that guides the AAA in implementation of programs, services, and activities under the act.

Summary

Title II of P.L. 116-131 extends the authorizations of appropriations for OAA Title III, Grants for State and Community Programs on Aging. It amends OAA Title III regarding state and area plan assurances to require additional outreach, data collection, reporting, and coordination activities. Title II also makes changes to the statutory formula for allocating funding to states for Supportive Services and Senior Centers, Congregate and Home-Delivered Nutrition Services, and Disease Prevention and Health Promotion Services. Under the Supportive Services and Senior Centers Program, P.L. 116-131 amends the list of authorized activities to include services that promote or support social connectedness and reduce social isolation and specifies that health screening activities include those associated with social isolation and traumatic brain injury.

Title II of P.L. 116-131 further amends OAA Title III regarding nutrition programs to require states, in consultation with AAAs, to decrease administrative burdens and direct services to the greatest need when transferring funds between programs. It requires the HHS Secretary to study the discrepancy between available nutrition services and the demand for such services. With respect to the National Family Caregiver Support Program (NFCSP), Title II establishes a process for caregiver assessments that states may use to inform caregivers about available services. It further requires the Assistant Secretary to provide technical assistance regarding the use of caregiver assessments and issue a report on their use. It also removes the NFCSP funding cap for "older relative caregivers" of children and young adults with severe disabilities.

Section 201. Social Determinants of Health

The provision amends OAA Section 301(a)(1) to add language to "measure impacts related to social determinants of health of older individuals" to the purposes for planning and provision of services under OAA Title III.

Section 202. Younger Onset Alzheimer's Disease

The provision amends OAA Section 302(3) in the definition of *family caregiver* to clarify that a family caregiver could provide in-home and community care to an individual "of any age" with Alzheimer's disease.

The provision amends OAA Section 711(6) in the definition of *resident* under the State Long-Term Care Ombudsman Programs to clarify that a resident means an individual "of any age" who resides in a long-term care facility.

Section 203. Reauthorization

The provision amends OAA Section 303 to authorize appropriations under OAA Title III for a five-year period through FY2024 as follows:

> (a)(1) to carry out Part B (relating to supportive services) $412,029,180 for FY2020, $436,750,931 for FY2021, $462,955,987 for FY2022, $490,733,346 for FY2023, $520,177,347 for FY2024.
>
> (b)(1) to carry out Subpart 1 of Part C (relating to congregate nutrition services) $530,015,940 for FY2020, $561,816,896 for FY2021, $595,525,910 for FY2022, $631,257,465 for FY2023, $669,132,913 for FY2024.
>
> (b)(2) to carry out Subpart 2 of Part C (relating to home delivered nutrition services) $268,935,940 for FY2020, $285,072,096 for FY2021, $302,176,422 for FY2022, $320,307,008 for FY2023, $339,525,428 for FY2024.
>
> (d) to carry out Part D (relating to disease prevention and health promotion services) $26,587,360 for FY2020, $28,182,602 for FY2021, $29,873,558 for FY2022, $31,665,971 for FY2023, $33,565,929 for FY2024.
>
> (e) to carry out Part E (relating to family caregiver support) $193,869,020 for FY2020, $205,501,161 for FY2021, $217,831,231 for FY2022, $230,901,105 for FY2023, $244,755,171 for FY2024.

The provision amends OAA Section 311 regarding the Nutrition Services Incentive Program for a five-year period through FY2024 as follows:

> (e) to carry out this section (other than subsection (c)(1)) $171,273,830 for FY2020, $181,550,260 for FY2021, $192,443,275 for FY2022, $203,989,872 for FY2023, $216,229,264 for FY2024.

Section 204. Hold Harmless Formula

The provision amends OAA Section 304(a)(3)(D) with respect to the formula for allocating funding for parts B, C (subpart 1 and 2), and D under OAA Title III. It eliminates the current law hold harmless provision for two programs—Part C, Subpart 2, Home-Delivered Nutrition Services and Part D, Disease Prevention and Health Promotion Services—beginning in FY2020. It also changes the current law funding formula allocation for two programs—Part B, Supportive Services and Senior Centers and Part C, Subpart 1, Congregate Nutrition Services—over a 10-year period, from FY2020 to FY2029.

For the latter two programs, the provision establishes one methodology that takes effect when the amount of funding available under the program for grants to states and territories in a given year is less than or equal to the amount available for grants for FY2019. It establishes an alternate grant allocation methodology that takes effect when the amount of funding available for grants to states and territories in a given year exceeds the amount available for grants for FY2019. The provision does not change the current law minimum grant amounts for states and territories as minimum grantees would receive the same proportionate amount of funding under both allocation methodologies.[13]

When the Amount Available Is Less Than or Equal to FY2019 Levels

When the amount available for the applicable grant program (i.e., Supportive Services or Congregate Meals) in a fiscal year is less than or equal to the FY2019 available amount, states and territories receive their grants based on the same population-based formula factor (proportion of the U.S. population aged 60 and over) and state and territory minimum grant amounts as under current law. However, states' and territories' hold harmless amounts are reduced by 0.25 percentage points from their FY2019 levels in each year as follows:

- For FY2020, no state or territory receives less than 99.75% of the annual amount allotted to it for FY2019;
- For FY2021, no state or territory receives less than 99.50% of the annual amount allotted to it for FY2019;
- For FY2022, no state or territory receives less than 99.25% of the annual amount allotted to it for FY2019.
- For FY2023, no state or territory receives less than 99.00% of the annual amount allotted to it for FY2019.
- For FY2024, no state or territory receives less than 98.75% of the annual amount allotted to it for FY2019.
- For FY2025, no state or territory receives less than 98.50% of the annual amount allotted to it for FY2019.
- For FY2026, no state or territory receives less than 98.25% of the annual amount allotted to it for FY2019.
- For FY2027, no state or territory receives less than 98.00% of the annual amount allotted to it for FY2019.
- For FY2028, no state or territory receives less than 97.75% of the annual amount allotted to it for FY2019.
- For FY2029, no state or territory receives less than 97.50% of the annual amount allotted to it for FY2019.

For FY2030, the provision eliminates the hold harmless for Supportive Services and Congregate Meals effective October 1, 2029.

[13] Under current law, states (including the District of Columbia and Puerto Rico) receive a minimum amount of funds defined as 0.5% (one-half of 1%) of the total grant amount for the respective fiscal year. The minimum grant amounts for the remaining U.S. territories are defined as follows: Guam and the U.S. Virgin Islands are each allotted no less than 0.25% (one-quarter of 1%) of the total grant amount, and American Samoa and the Commonwealth of the Northern Mariana Islands are each allotted no less than 0.0625% (one-sixteenth of 1%) of the total grant amount.

When the Amount Available Exceeds FY2019 Levels

When the amount available for the grant program (i.e., Supportive Services or Congregate Meals) in a given fiscal year exceeds the FY2019 available amount, then the following two-part methodology for allocating funding to states and territories is applied.

The first allocation methodology to states and territories applies to the amount of grant funding equal to the FY2019 available amount, where states and territories receive an allotment based on the same methodology described above for the when the amount available is less than or equal to FY2019 levels. That is, states and territories receive the first portion of their grants based on the same population-based formula factor (proportion of the U.S. population aged 60 and over) and state and territory minimum grant amounts as under current law. The hold harmless provision reduces states' and territories' hold harmless amounts by 0.25 percentage points from their FY2019 levels according to the same time series described in the bulleted list above.

The second allocation methodology to states and territories applies to the amount of available funding above the FY2019 level, where states and territories receive an allotment amount based on their proportion of the U.S. population aged 60 and over with the same state and territory minimum grant amounts as under current law. These two allotment amounts are added together to get the total allotment amounts for states and territories.

The provision repeals OAA Section 304(a)(4)(D), the first allocation methodology to states and territories, effective October 1, 2029. For FY2030, states and territories receive an allotment amount based on their proportion of the U.S. population aged 60 and over with the same state and territory minimum grant amounts as under current law.

Section 205. Outreach Efforts

The provision amends OAA Section 306(a)(4)(B)(i)(VII) regarding area plans' assurances involving outreach efforts to specifically include Holocaust survivors as individuals who may be at risk of institutional placement in the list of special emphasis groups that AAAs must identify as eligible for assistance under the act.

Section 206. State Long-Term Care Ombudsman Program Minimum Funding and Maintenance of Effort

The provision amends OAA Section 306(a)(9) and OAA Section 307(a)(9) regarding area and state plan assurances, respectively, to update the maintenance of effort funding provisions for the State Long-Term Care Ombudsman Program from FY2000 to FY2019. Specifically, the provision requires AAAs to annually expend no less than the total amount of funds appropriated under the act and expended by the agency in FY2019 in carrying out such program. The provision requires states to annually expend no less than the total amount of funds expended by the state agency with funds received under OAA Titles III and VII for FY2019. The provision further adds under each section that funds made available to AAAs and states pursuant to OAA Section 712 must supplement and not supplant other federal, state, and local funds expended to support activities described in OAA Section 712.

Section 207. Coordination with Resource Centers

The provision amends OAA Section 306(a) to require area plans to provide assurances that AAAs will collect data to determine the services needed by older individuals whose needs are the focus of all centers funded under OAA Title IV in FY2019, along with data on the effectiveness of the

programs, policies, and services provided by such AAAs in assisting those individuals. Each agency plan shall provide assurances that AAAs will use outreach efforts to identify individuals eligible for assistance under the act, with special emphasis on those whose needs were the focus of all centers funded under OAA Title IV in FY2019.

The provision amends OAA Section 307(a) to require state plans to contain assurances that the state will prepare and submit to the Assistant Secretary annual reports that describe

- data collected to determine the services that are needed by older individuals whose needs are the focus of all centers funded under OAA Title IV in FY2019;
- data collected to determine the effectiveness of the programs, policies, and services provided by AAAs on assisting such individuals; and
- outreach efforts and other activities carried out to satisfy the assurances as described.

Section 208. Senior Legal Hotlines

The provision requires the Assistant Secretary to prepare and submit a report to Congress, no later than four years after the date of enactment, containing information on which states or localities operate senior legal hotlines, information on how such hotlines operated by states or localities are funded, information on the usefulness of senior legal hotlines in the coordination and provision of legal assistance, and recommendations on additional actions that should be taken related to senior legal hotlines.

Section 209. Increase in Limit on Use of Allotted Funds for State Administrative Costs

The provision amends OAA Section 308(a) and (b)(1) to make certain technical corrections. It also amends OAA Section 308(b)(2)(A) regarding planning, coordination, evaluation, and administration of state plans to increase the cap for state administrative costs to be the greater of 5% of state's allotments, or $750,000 (an increase from $500,000).

Section 210. Improvements to Nutrition Programs

The provision amends OAA Section 308(b)(4) with respect to a state's authority to elect to transfer funds between certain OAA Title III programs. Specifically, it requires each state, in consultation with AAAs, to ensure that the process used by the state in transferring funds (including requirements relating to the authority and timing of such transfers) is simplified and clarified to reduce administrative barriers and direct limited resources to the greatest nutrition service needs at the community level. It requires that such process be modified to attempt to lessen the administrative barriers of such transfers, and help direct limited resources to where they are needed the most as the unmet need for nutrition services grows.

Section 211. Review of Reports

The provision amends OAA Section 308(b) regarding planning, coordination, evaluation, and administration of state plans to require the Assistant Secretary to review certain submitted reports and to include aggregate data on the effectiveness of the program, policies, and services needed by older individuals whose needs are the focus of centers funded under OAA Title IV in FY2019 in subsequent reports submitted under Section 207 to the President and to Congress. The

provision also requires the report to include data on outreach efforts and other activities carried out to satisfy specified assurances to identify older individuals' service needs.

Section 212. Other Practices

This provision adds a new OAA Section 315(e), which requires states to make available to AAAs, upon request, any policies or guidance pertaining to consumer contributions established under this section of the act. It further provides for a rule of construction that nothing in the above statement requires a state to develop policies or guidance pertaining to consumer contributions established under this section of the act.

Section 213. Screening for Negative Health Effects Associated with Social Isolation and Traumatic Brain Injury

The provision amends OAA Section 321(a)(8) regarding authorized health screening under the Supportive Services and Senior Centers Program to add "screening for negative health effects associated with social isolation" and "traumatic brain injury screening."

Section 214. Supportive Services and Senior Centers

The provision amends OAA Section 321(a) regarding authorized services under the Supportive Services and Senior Centers Program to add "services that promote or support social connectedness and reduce negative health effects associated with social isolation" to the list of supportive services. The provision further amends authorized program services to include "cultural experiences (including the arts)" to the list of supportive services designed to enable older individuals to attain and maintain physical and mental well-being.

Section 215. Culturally-Appropriate, Medically Tailored Meals

This provision amends OAA Section 339(2)(A)(iii) regarding requirements for nutrition projects to specify that meals adjusted to meet special dietary needs should include "meals adjusted for cultural considerations and preferences and medically tailored meals."

Section 216. Nutrition Services Impact Study

This provision amends OAA Title III, Part C regarding Nutrition Services to add a new OAA Section 339B "Nutrition Services Impact Study." It requires the Assistant Secretary to perform a study to assess how to measure and evaluate the discrepancy between available services and the demand for such services in the home-delivered nutrition services program and the congregate nutrition services program. It requires the Assistant Secretary to analyze and determine the least burdensome and most effective methods for measuring and evaluating the discrepancy and to prepare specified recommendations within three years of enactment. The Assistant Secretary is required to issue the recommendations and make them available to Congress and as a notification to states, AAAs, service providers, grantees, and contract awardees.

Section 217. National Family Caregiver Support Program

Caregiver Assessments

This provision amends the National Family Caregiver Support Program (NFCSP) under OAA *Section* 372 to define the new term *caregiver assessment* as "a defined process of gathering

information to identify the specific needs, barriers to carrying out caregiving responsibilities, and existing supports of a family caregiver or older relative caregiver, as identified by the caregiver involved, to appropriately target recommendations for support services as described. Such assessment shall be administered through direct contact with the caregiver, which may include contact through a home visit, the Internet, telephone or teleconference, or in-person interaction." It further specifies under OAA Section 373 that support services to caregivers may be informed through the use of caregiver assessments and that caregiver assessments must be included in certain state reporting requirements.

The provision requires the Assistant Secretary to issue a report on the use of caregiver assessments by AAAs, entities contracting with such agencies, and tribal organizations no later than three years after enactment. The Assistant Secretary is required to submit the report to Congress no later than six months after the report is issued.

Best Practices, Activities of National Significance, and Technical Assistance

The provision amends OAA *Section* 373 to require the Assistant Secretary to identify and make publicly available best practices with respect to NFCSP and the Native American Caregiver Support Program no later than one year after enactment and every five years thereafter. The provision authorizes the Assistant Secretary to award funds to certain specified entities for conducting activities of national significance that promote quality and continuous improvement in the support provided to caregivers through NFCSP and the Native American Caregiver Support Program, and to include program evaluation, training, and technical assistance, and research with respect to the program. The provision requires the Assistant Secretary, in consultation with stakeholders and, as appropriate, informed by the strategy developed under the RAISE Family Caregivers Act, to provide technical assistance to promote and implement the use of caregiver assessments no later than one year after enactment. The provision requires such technical assistance to include available tools or templates, protocols, and best practices.

Section 218. National Family Caregiver Support Program Cap

This provision amends OAA §373(h)(2) to remove the 10% cap on the amount of the total funds (federal and nonfederal) that a state may use for support services to older relative caregivers. The provision requires the Assistant Secretary to submit a report to Congress no later than 18 months after enactment, and annually thereafter, on the impact of the elimination of the cap. Such reports must be made available to the public.

Title III: Modernizing Activities for Health, Independence, and Longevity

Title III of P.L. 116-131 makes amendments to provisions under OAA Title IV. The following section provides relevant background for context on OAA Title IV and a summary of the amendments made to the OAA by Title III of P.L. 116-131, which includes a section-by-section summary of provisions included in Title III of P.L. 116-131.

Background

OAA Title IV authorizes the Assistant Secretary to award funds for training, research, and demonstration projects in the field of aging. Over the years, Title IV has supported a wide range of research and demonstration projects, including those related to income, health, housing,

retirement, and long-term services and supports, as well as projects on career preparation and continuing education for personnel in the field of aging.

Summary

Title III of P.L. 116-131 extends the authorizations of appropriations for OAA Title IV, Activities for Health, Independence, and Longevity. P.L. 116-131 includes provisions that amend existing grant authority to include specific mention of public awareness of traumatic brain injury, evidence-based falls prevention and chronic disease self-management programs, and social isolation among older adults. Other provisions make changes to OAA Title IV grants that provide technical assistance to improve transportation for older individuals and multigenerational collaboration.

Section 301. Reauthorization

The provision amends OAA Section 411 to authorize appropriations for grant programs for a five-year period through FY2024 as follows:

> (b)(1) to carry out aging network support activities under this section $14,514,550 for FY2020, $15,385,423 for FY2021, $16,308,548 for FY2022, $17,287,061 for FY2023, $18,324,285 for FY2024; and
>
> (b)(2) to carry out elder rights support activities under this section $15,613,440 for FY2020, $16,550,246 for FY2021, $17,543,261 for FY2022, $18,595,857 for FY2023, $19,711,608 for FY2024.

Section 302. Public Awareness of Traumatic Brain Injury

The provision amends Section OAA 411(a)(12) to authorize grants or contracts—with respect to building public awareness of cognitive impairments—to add "traumatic brain injury" to the list of such impairments.

Section 303. Falls Prevention and Chronic Disease Self-Management Education

The provision amends OAA Section 411(a) to add language authorizing grants or contracts that bring to scale and sustain evidence-based falls prevention and chronic disease self-management programs targeted toward older individuals, including older individuals with disabilities, among other authorized activities.

Section 304. Demonstration to Address Negative Health Impacts Associated with Social Isolation

The provision amends OAA Section 411(a) to add language authorizing projects that address negative health effects associated with social isolation among older adults among other authorized grant activities.

Section 305. Technical Assistance and Innovation to Improve Transportation for Older Individuals

The provision amends OAA Section 416(b)(2) under the use of grant or contract funds for technical assistance and innovation to improve transportation for older individuals. Specifically, it clarifies that funds may be used to prepare information on options and resources for transportation information (e.g., a call center, website, internet-based portal, mobile application,

or other technological tools). The provision further authorizes funds for activities to (1) improve information on options for transportation services for older individuals, including public transit and on-demand transportation services; (2) provide older individuals with the ability to schedule trips both in advance and on demand; (3) identify opportunities to share resources and reduce costs of transportation services for older individuals; and (4) coordinate individualized trip planning response to requests from older individuals for transportation services.

Section 306. Grant Program for Multigenerational Collaboration

The provision amends OAA Section 417(a) regarding demonstration, support, and research projects for multigenerational and civic engagement activities. Specifically, it requires the Assistant Secretary to award grants or contracts to eligible organizations that carry out projects serving individuals in younger generations and older individuals to provide them with opportunities to participate in, coordinate, and facilitate the development of multigenerational and civic engagement activities that contribute to health and wellness and promote volunteerism.

The provision amends language regarding the use of funds and grant preference requirements to include eligible organizations with a record of carrying out, an "intent to carry out, or intent to partner with local organizations or multiservice organization to carry out," activities. The provision further adds a new preference for grants to eligible organizations proposing multigenerational activity projects that use shared site programs. The provision amends language regarding eligible organizations, evaluations that include a report to Congress, and the definition of the term *multigenerational coordinator*.

Title IV: Senior Community Service Employment Program

Title IV of P.L. 116-131 makes amendments to provisions under OAA Title V. The following section provides relevant background for context on OAA Title V and a summary of the amendments made to the OAA by Title IV of P.L. 116-131, which includes a section-by-section summary of provisions included in Title IV of P.L. 116-131.

Background

OAA Title V establishes the Community Service Employment for Older Americans program (CSEOA), sometimes referred to as the Senior Community Service Employment Program (SCSEP). SCSEP promotes part-time employment opportunities in community service activities for unemployed low-income persons who are 55 years old or older and who have poor employment prospects.[14] The Title V program is administered by Department of Labor's (DOL's) Employment and Training Administration. DOL allocates Title V funds for grants based on a statutory funding formula to state agencies in all 50 states, the District of Columbia, Puerto Rico, and the U.S. territories, and to national organizations. Program participants work part-time in community service jobs, including employment at schools, libraries, social service organizations, and senior-serving organizations. Priority for program participation is given to certain individuals who demonstrate barriers to employment, such as those aged 65 years or older, individuals with a disability, individuals with limited English proficiency or low literacy skills, those residing in a rural area, and veterans, among others.

[14] For more information on OAA Title V, see CRS Report R45626, *Older Americans Act: Senior Community Service Employment Program*.

Summary

Title IV of P.L. 116-131 extends the authorization of appropriations for OAA Title V, Community Service Senior Opportunities Act. It further amends several sections under OAA Title V to include reference to eligible individuals "who have been incarcerated within the last 5 years or are under supervision following the release from prison or jail within the last 5 years."

Section 401. Priority for the Senior Community Service Employment Program

The provision amends OAA Title V to include eligible individuals "who have been incarcerated within the last 5 years or are under supervision following the release from prison or jail within the last 5 years" in three sections under this title of the act. It amends state plan requirements to include certain incarcerated individuals [OAA Section 503(a)(4)(C)]. It further amends the definition of *individuals with barriers to employment* with respect to national grantee requirements for serving such individuals [OAA Section 514(e)(1)]. And, it extends increased periods of participation, as well as priority, for program activities for certain incarcerated individuals [OAA Section 518]. The provision is required to take effect one year after the date of the enactment of the act.

Section 402. Authorization of Appropriations

The provision amends OAA Section 517(a) to authorize appropriations for OAA Title V for a five-year period through FY2024 as follows:

- There are authorized to be appropriated to carry out this title $428,000,000 for FY2020, $453,680,000 for FY2021, $480,900,800 for FY2022, $509,754,848 for FY2023, $540,340,139 for FY2024.

Title V: Enhancing Grants for Native Americans

Title V of P.L. 116-131 makes amendments to provisions under OAA Title VI. The following section provides relevant background for context on OAA Title VI and a summary of the amendments made to the OAA by Title V of P.L. 116-131, which includes a section-by-section summary of provisions included in Title V of P.L. 116-131.

Background

OAA Title VI, Grants for Native Americans, authorizes programs for nutrition, supportive services, and caregiver services to tribal organizations. OAA Title VI programs provide similar services to those authorized under OAA Title III for states and U.S. territories. In recognition of the relationship between the federal government and tribal organizations, funding under OAA Title VI is awarded directly by ACL to eligible Indian tribal organizations and to Native Alaskan organizations. OAA funding is also awarded directly to nonprofit organizations representing Native Hawaiians.

Summary

Title V of P.L. 116-131 extends authorizations of appropriations for programs established under OAA Title VI. Specifically, P.L. 116-131 amends OAA Title VI to rename Part D, General Provisions, as Part E and to create a new Part D, Supportive Services for Healthy Aging and Independence. Part D establishes a competitive grant program to authorize eligible tribal organizations to carry out the range of supportive services defined in OAA Title III. Prior to this

new grant authority, funding for nutrition and supportive services was authorized to be provided to tribal organizations under the Part A, Indian Program, and to nonprofit organizations representing Native Hawaiians under Part B, Native Hawaiian Program. While P.L. 116-131 did not change these statutory authorities, the provision change allows for specific funds to be dedicated to the same types of supportive services authorized under OAA Title III grants to states and U.S. territories. The new grant program is funded through a set-aside of up to 5% of funds appropriated for OAA Title VI Parts A and B, provided certain funding conditions are met.

Section 501. Reauthorization

This provision amends OAA Section 643 to authorize appropriations under OAA Tile VI for a five-year period through FY2024 as follows:

- for parts A and B, relating to the Indian Program and Native Hawaiian Program, respectively, $37,102,560 for FY2020, $39,298,714 for FY2021, $41,626,636 for FY2022, $44,094,235 for FY2023, $46,709,889 for FY2024; and
- for part C, relating to the Native Americans Caregiver Support Program, $10,759,920 for FY2020, $11,405,515 for FY2021, $12,089,846 for FY2022, $12,815,237 for FY2023, $13,584,151 for FY2024.

The provision redesignates OAA Title VI, Part D, as Part E and inserts after Part C a new "Part D – Supportive Services for Healthy Aging and Independence" to establish a supportive services program for tribal organizations. Specifically, the provision authorizes the Assistant Secretary to carry out a competitive demonstration program for making grants to tribal organizations or organizations serving Native Hawaiians with approved applications under Title VI, Parts A or B. This demonstration program provides a wider range of in-home and community supportive services to enable older individuals who are Indians or Native Hawaiians to maintain their health and independence and to avoid long-term care facility placement. The provision authorizes supportive services to include any of the activities described under OAA Section 321(a) the Supportive Services and Senior Centers Program. It requires the Assistant Secretary, in making grants under this section, to give priority to entities that will use grant funds for certain specified services and other services that directly support the independence of older individuals served. Nothing in this section should be construed or interpreted to prohibit the provision of supportive services under OAA Title VI, Parts A or B.

The provision adds a new OAA Section 644, which sets aside funds to be made available for a support services demonstration program under a new OAA Title VI, Part D. It requires that no more than 5% of appropriations under OAA Section 643(1) for a fiscal year be made available for a new Part D, provided that for such fiscal year funds appropriated for Parts A and B are greater than the funds appropriated for FY2019, and that the Assistant Secretary makes available for Parts A and B no less than the amount of resources made available for FY2019.

Title VI: Modernizing Allotments for Vulnerable Elder Rights Protection Activities and Other Programs

Title VI of P.L. 116-131 makes amendments primarily to provisions under OAA Title VII. The following section provides relevant background for context on OAA Title VII and a summary of the amendments made to the OAA by Title VI of P.L. 116-131, among other stand-alone provisions, and a section-by-section summary of provisions included in Title VI of P.L. 116-131.

Background

OAA Title VII authorizes two programs that provide grants to states under statutory funding formulas: (1) the Long-Term Care (LTC) Ombudsman Program and (2) the Elder Abuse, Neglect, and Exploitation Prevention Programs (Elder Abuse Prevention). The LTC Ombudsman Program investigates and resolves complaints of residents in nursing facilities, board and care facilities, and other adult care homes. With respect to staffing, the program receives significant support from volunteers. In 2018, almost 1,300 paid staff and about 6,200 certified volunteers investigated more than 194,000 resident complaints.[15] States' grants for Elder Abuse Prevention may be used to establish or administer a range of activities for the prevention, detection, assessment, and treatment of elder abuse, neglect, and exploitation, including investigation, intervention, and response to elder abuse. For example, states may use grant funding to train law enforcement officers, health care providers, and others to recognize and respond to elder abuse; to increase public awareness of elder abuse and prevention strategies; and to support multidisciplinary teams or coalitions addressing elder abuse prevention at the state and local levels.[16] Some states may use Elder Abuse Prevention grant funding to supplement federal and state funding for LTC Ombudsman Program or State Adult Protective Services Program activities.

Summary

Title VI of P.L. 116-131 extends authorizations of appropriations for programs established under OAA Title VII, Vulnerable Elder Rights Protection Activities and includes several stand-alone provisions. For example, it requires the ACL Administrator to disseminate the principles for Person-Directed Services and Supports during Serious Illness; amends the Supporting Grandparents Raising Grandchildren Act (P.L. 115-196) to extend the sunset date for the Advisory Council to July 7, 2022; and requires a GAO report on federal home modification assistance programs for older individuals and individuals with disabilities, among other issues.

Section 601. Reauthorization; Vulnerable Elder Rights Protection Activities

The provision amends OAA Section 702 to authorize appropriations for a five-year period through FY2024 as follows:

> (a) to carry out Chapter 2, regarding the LTC Ombudsman Program, $18,066,950 for FY2020, $19,150,967 for FY2021, $20,300,025 for FY2022, $21,518,027 for FY2023, $22,809,108 for FY2024.
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> (b) to carry out Chapters 3 and 4, regarding Programs for Prevention of Elder Abuse, Neglect, and Exploitation and State Legal Assistance Development Program, respectively, $5,107,110 for FY2020, $5,413,537 for FY2021, $5,738,349 for FY2022, $6,082,650 for FY2023, $6,447,609 for FY2024.

Section 602. Volunteer State Long-Term Care Ombudsman Representatives

The provision amends OAA Section 712(a)(5) regarding the State LTC Ombudsman Program to add a rule of construction for volunteer ombudsman representatives. The rule states that nothing in the paragraph prohibits the program from providing and financially supporting recognition for

[15] Administration for Community Living, *Aging, Independence, and Disability (AGID) Program Data Portal, National Ombudsman Reporting System (NORS) Data-at-a-Glance*, https://agid.acl.gov/DataGlance/NORS/.

[16] Administration for Community Living, *Prevention of Elder Abuse, Neglect, and Exploitation*, https://acl.gov/programs/elder-justice/prevention-elder-abuse-neglect-and-exploitation.

volunteer ombudsman representatives, or from reimbursing or otherwise providing financial support for any costs, such as transportation costs, incurred in serving as a volunteer.

Section 603. Prevention of Elder Abuse, Neglect, and Exploitation

The provision amends OAA Section 721(b)(12) with respect to elder abuse prevention grant activities to include "community outreach and education" in supporting groups carrying out multidisciplinary elder justice activities. The provision strikes language regarding "studying" innovative practices in communities for elder abuse prevention and replaces it with "implementing" such practices, "programs, and materials."

Section 604. Principles for Person-Directed Services and Supports During Serious Illness

The provision defines the terms, *administrator*, *covered agency*, *principles*, and *state agency*. It requires the ACL Administrator to disseminate the principles for Person-directed Services and Supports during Serious Illness, issued by ACL on September 1, 2017, or an updated set of principles to appropriate stakeholders within the aging network, as determined by the Assistant Secretary, and to covered agencies. Covered agencies may use the principles in setting priorities for service delivery and care plans in programs carried out by the agencies. The Administrator is required to solicit feedback on the principles from covered agencies, aging experts, and stakeholders who provide or receive disability services on an ongoing basis. The Administrator is also required to submit a report to Congress describing the feedback received and indicating if any changes or updates are needed to the principles, at least once, but not more than annually, during the three years after the date of enactment.

Section 605. Extension of the Supporting Grandparents Raising Grandchildren Act

This provision amends Section 3(f) of the Supporting Grandparents Raising Grandchildren Act (P.L. 115-196, enacted July 7, 2018) by extending the sunset date of the Advisory Council from three years from enactment to four years from enactment (i.e., July 7, 2022).

Section 606. Best Practices for Home and Community-Based Ombudsmen

The provision requires the Assistant Secretary to issue a report, no later than three years after the date of enactment, updating the best practices for home and community-based ombudsmen that were included in the report entitled *Best Practices for Home and Community-Based Ombudsmen*, issued by CMS's National Direct Service Workforce Resource Center and prepared by the Research and Training Center at the University of Minnesota and The Lewin Group (January 2013).

Section 607. Senior Home Modification Assistance Initiative

The provision requires GAO to conduct a study regarding federal programs that support evidence-based falls prevention, home assessments, and home modifications for older individuals and individuals with disabilities. GAO is required to issue a report, no later than two years after the date of enactment, that includes certain specified data and analysis regarding such federal programs.

Title VII: Miscellaneous

Section 701. Technical Corrections

The provision makes certain technical corrections to various sections of the OAA.

Appendix A. Older Americans Act: Effective Dates, Deadlines for Report Requirements, and Sunset Dates Under P.L. 116-131

Most provisions under the Supporting Older Americans Act of 2020 (P.L. 116-131) were effective upon enactment (March 25, 2020). However, some provisions specified effective dates for implementation or included deadlines for reporting requirements, including reports to Congress. Two provisions extend dates for authorities and activities that sunset under other laws. **Table A-1** provides information about these provisions.

Table A-1. Provision Effective Dates, Reporting Requirements, and Sunset Dates Under P.L. 116-131

Section Number	Section Title	Brief Description	Effective Date/ Reporting Requirement/ Sunset Date
§115	Increased Focus of Assistant Secretary on Negative Health Effects Associated with Social Isolation	Requires the Assistant Secretary to develop objectives, priorities, and a long-term plan for supporting state and local efforts regarding social isolation among older individuals and submit report to Congress.	Not later than January 2021.
§122	Family Caregivers	Extends sunset date of the RAISE Family Caregivers Act (P.L. 115-119, enacted on January 22, 2018) by one year.	*Sunset:* Four years after the date of enactment (i.e., January 22, 2022).
§124	Modernizing the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities	Requires the Secretary to establish a "Committee on Healthy Aging and Age-Friendly Communities." Further requires the Chairperson of the committee's term to start no later than one year after enactment.	Not later than one year after date of enactment (i.e., by March 25, 2021).
§126	Report on Social Isolation	Requires the Secretary to prepare an interim report to Congress on the status of the evaluation and development of the final report and then a final report to Congress on programs that include a focus on addressing the negative impacts associated with social isolation through targeting older individuals identified in greatest social need.	*Interim Report*: Not later than two years after the date of enactment (i.e., by March 25, 2022). *Final Report*: Not later than five years after the date of enactment (i.e., by March 25, 2025).

Section Number	Section Title	Brief Description	Effective Date/ Reporting Requirement/ Sunset Date
§127	Research and Evaluation	Requires the Director of the Research, Demonstration, and Evaluation Center for the Aging Network to publish in the *Federal Register* for public comment a draft five-year plan for prioritizing research, research dissemination, evaluation, demonstration projects, and related activities and describe how it will meet the needs of underserved populations. Requires the Director to submit to the Secretary and to Congress a report on the activities funded under this section and OAA Title IV. Requires the Secretary to provide directly or through contract for an evaluation of programs under the act to include an analysis of the relationship to Medicare and Medicaid programs.	*Federal Register Publication:* No later than October 1, 2020, and at five-year intervals thereafter. *Report:* No later than December 31, 2020, and annually thereafter. *Provide for Program Evaluation:* No later than July 1, 2020.
§204	Hold Harmless Formula	Eliminates the hold harmless for Supportive Services and Congregate Meals.	Effective October 1, 2029.
§208	Senior Legal Hotlines	Requires the Assistant Secretary to prepare and submit a report to Congress containing specified information on senior legal hotlines, including recommendations for further actions.	Not later than four years after the date of enactment (i.e., March 25, 2024).
§216	Nutrition Services Impact Study	Requires the Assistant Secretary to perform a study to assess how to measure and evaluate the discrepancy between available services and the demand for such services in the Nutrition Services Program. Further requires the Assistant Secretary to issue specified recommendations to Congress and as a notification to states, AAAs, service providers, grantees, and contract awardees.	*Recommendations:* Not later than three years after the date of enactment (i.e., March 25, 2023).

Section Number	Section Title	Brief Description	Effective Date/ Reporting Requirement/ Sunset Date
§217	National Family Caregiver Support Program	Requires the Assistant Secretary to identify and make publicly available best practices with respect to the Title VI Native American Caregiver Support Program. Requires the Assistant Secretary to provide technical assistance to promote and implement the use of caregiver assessments. Requires the Assistant Secretary to issue a report on the use of caregiver assessments by AAAs, entities contracting with such agencies, and tribal organizations. Further requires the Assistant Secretary to submit the report to Congress.	*Best Practices:* Not later than one year after enactment (i.e., March 25, 2021) and at five-year intervals thereafter. *Technical Assistance:* Not later than one year after enactment (i.e., March 25, 2021). *Report:* Not later than three years after the date of enactment (i.e., March 25, 2023), and submitted to Congress no later than six months after issuance.
§218	National Family Caregiver Support Program Cap	Requires the Assistant Secretary to submit a report to Congress on the impact of the elimination of the NFCSP cap on the amount of funds that a state may use for support services to older relative caregivers.	Not later than 18 months after enactment (i.e., September 25, 2021).
§401	Priority for the Senior Community Service Employment Program	Amends OAA Title V to include reference to eligible individuals "who have been incarcerated within the last 5 years or are under supervision following the release from prison or jail within the last 5 years."	Effective one year after the date of the enactment (i.e., March 25, 2021).
§605	Extension of the Supporting Grandparents Raising Grandchildren Act	Extends sunset date of Advisory Council under the Supporting Grandparents Raising Grandchildren Act (P.L. 115-196, enacted July 7, 2018) by one year.	*Sunset:* Four years after the date of enactment (July 7, 2022).
§606	Best Practices for Home and Community-Based Ombudsmen	Requires the Assistant Secretary to issue a report updating the best practices for home and community-based ombudsmen included in the report entitled *Best Practices for Home and Community-Based Ombudsmen*, issued by CMS's National Direct Service Workforce Resource Center and prepared by the Research and Training Center at the University of Minnesota and The Lewin Group (January 2013).	Not later than three years after the date of enactment (i.e., March 25, 2023).
§607	Senior Home Modification Assistance Initiative	Requires GAO to issue a report regarding federal programs that support evidence-based falls prevention, home assessments, and home modifications for older individuals and individuals with disabilities.	Not later than two years after the date of enactment (i.e., March 25, 2022).

Source: Table prepared by the Congressional Research Service (CRS) based on statutory language contained in Title III of the CARES Act (P.L. 116-136).

Notes: ACL = Administration for Community Living; Assistant Secretary = Assistant Secretary for Aging; CMS = Centers for Medicare and Medicaid Services; GAO = Government Accountability Office; HHS = Department of Health and Human Services; NFCSP = National Family Caregiver Support Program; OAA = Older Americans Act; Secretary = Secretary of the Department of Health and Human Services (HHS); RAISE Family Caregivers Act = Recognize, Assist, Include, Support, and Engage Family Caregivers Act of 2017 (P.L. 115-119).

Appendix B. Older Americans Act: Authorizations of Appropriations

Table B-1 compares the authorizations of appropriations for each title of the act as stipulated under prior law of the Older Americans Act (as amended through the Older Americans Act Reauthorization Act of 2016, P.L. 114-144) and the Older Americans Act, as amended by the Supporting Older Americans Act of 2020 (P.L. 116-131).

Table B-1. Authorizations of Appropriations for Older Americans Act (OAA) Programs

Comparison of Prior Law (as Amended through P.L. 114-144) and Current Law (as Amended by P.L. 116-131)

	Older Americans Act Programs	
Authorizations of Appropriations	**Prior Law [OAA Section]**	**Current Law**
Title II, Administration on Aging (AOA)		
Administration, salaries, and expenses of AOA	[§216(a)] Authorizes to be appropriated $40,063,000 for each of FY2017 to FY2019	Authorizes to be appropriated: • $43,937,410 for FY2020, • $46,573,655 for FY2021, • $49,368,074 for FY2022, • $52,330,158 for FY2023, • $55,469,968 for FY2024
National Eldercare Locator Services	[§216(b)(1)] Authorizes to be appropriated: • $2,088,758 for FY2017, • $2,132,440 for FY2018, and • $2,176,121 for FY2019.	Authorizes to be appropriated: • $2,180,660 for FY2020, • $2,311,500 for FY2021, • $2,450,190 for FY2022, • $2,597,201 for FY2023, • $2,753,033 for FY2024;
Pension Counseling and Information Program	[§216(b)(2)] Authorizes to be appropriated: • $1,904,275 for FY2017, • $1,944,099 for FY2018, and • $1,983,922 for FY2019.	Authorizes to be appropriated: • $1,988,060 for FY2020, • $2,107,344 for FY2021, • $2,233,784 for FY2022, • $2,367,811 for FY2023, • $2,509,880 for FY2024;
Elder Rights Support Activities (Title II)	[§216(b)(3)] Authorizes to be appropriated: • $1,312,904 for FY2017, • $1,340,361 for FY2018, and • $1,367,817 for FY2019	Authorizes to be appropriated: • $1,371,740 for FY2020, • $1,454,044 for FY2021, • $1,541,287 for FY2022, • $1,633,764 for FY2023, • $1,731,790 for FY2024;
Aging and Disability Resource Centers	[§216(b)(4)] Authorizes to be appropriated: • $6,271,399 for FY2017, • $6,402,551 for FY2018, • $6,533,703 for FY2019	Authorizes to be appropriated: • $8,687,330 for FY2020, • $9,208,570 for FY2021, • $9,761,084 for FY2022, • $10,346,749 for FY2023, • $10,967,554 for FY2024

Authorizations of Appropriations	Older Americans Act Programs	
	Prior Law [OAA Section]	Current Law
Title III, State and Community Programs on Aging		
Part B, Supportive services and centers	[§303(a)] Authorizes to be appropriated: • $356,717,276 for FY2017, • $364,456,847 for FY2018, • $372,196,069 for FY2019	Authorizes to be appropriated: • $412,029,180 for FY2020, • $436,750,931 for FY2021, • $462,955,987 for FY2022, • $490,733,346 for FY2023, • $520,177,347 for FY2024
Part C, Subpart 1, Congregate Nutrition Services	[§303(b)(1)] Authorizes to be appropriated: • $459,937,586 for FY2017, • $469,916,692 for FY2018, • $479,895,348 for FY2019	Authorizes to be appropriated: • $530,015,940 for FY2020, • $561,816,896 for FY2021, • $595,525,910 for FY2022, • $631,257,465 for FY2023, • $669,132,913 for FY2024
Part C, Subpart 2, Home-Delivered Nutrition Services	[§303(b)(2)] Authorizes to be appropriated: • $459,937,586 for FY2017, • $469,916,692 for FY2018, • $479,895,348 for FY2019	Authorizes to be appropriated: • $268,935,940 for FY2020, • $285,072,096 for FY2021, • $302,176,422 for FY2022, • $320,307,008 for FY2023, • $339,525,428 for FY2024
Part D, Disease Prevention and Health Promotion	[§303(d)] Authorizes to be appropriated: • $20,361,334 for FY2017, • $20,803,107 for FY2018, • $21,244,860 for FY2019	Authorizes to be appropriated: • $26,587,360 for FY2020, • $28,182,602 for FY2021, • $29,873,558 for FY2022, • $31,665,971 for FY2023, • $33,565,929 for FY2024
Part E, Family Caregiver Support	[§303(e)] Authorizes to be appropriated: • $154,336,482 for FY2017, • $157,564,066 for FY2018, • $160,791,658 for FY2019	Authorizes to be appropriated: • $193,869,020 for FY2020, • $205,501,161 for FY2021, • $217,831,231 for FY2022, • $230,901,105 for FY2023, • $244,755,171 for FY2024
Nutrition Services Incentive Program	[§311(e)] Authorizes to be appropriated: • $164,055,664 for FY2017, • $167,486,502 for FY2018, and • $170,917,349 for FY2019	Authorizes to be appropriated: • $171,273,830 for FY2020, • $181,550,260 for FY2021, • $192,443,275 for FY2022, • $203,989,872 for FY2023, • $216,229,264 for FY2024
Title IV, Activities for Health, Independence, and Longevity		

Authorizations of Appropriations	Older Americans Act Programs	
	Prior Law [OAA Section]	**Current Law**

	[§411(b)] Authorizes to be appropriated:
	For (b)(1) aging network support activities,
	• $6,216,054 for FY2017,
	• $6,346,048 for FY2018,
	• $6,476,043 for FY2019;
	
	for (b)(2) elder rights support activities,
	• $10,856,828 for FY2017,
	• $11,083,873 for FY2018,
	• $11,310,919 for FY2019
		Authorizes to be appropriated:
		for (b)(1) aging network support activities,
		• $14,514,550 for FY2020,
		• $15,385,423 for FY2021,
		• $16,308,548 for FY2022,
		• $17,287,061 for FY2023,
		• $18,324,285 for FY2024; and
		for (b)(2) elder rights support activities,
		• $15,613,440 for FY2020,
		• $16,550,246 for FY2021,
		• $17,543,261 for FY2022,
		• $18,595,857 for FY2023,
		• $19,711,608 for FY2024

Title V, Community Service Senior Opportunities Act		
Community Service Employment for Older Americans	[§517(a)] Authorizes to be appropriated: • $445,189,405 for FY2017, • $454,499,494 for FY2018, • $463,809,605 for FY2019	Authorizes to be appropriated: • $428,000,000 for FY2020 • $453,680,000 for FY2021, • $480,900,800 for FY2022, • $509,754,848 for FY2023, • $540,340,139 for FY2024
Title VI, Grants for Native Americans		
Parts A, Indian; and Part B, Native Hawaiian Programs	[§643(1)] Authorizes to be appropriated • $31,934,018 for FY2017, • $32,601,843 for FY2018, • $33,269,670 for FY2019	Authorizes to be appropriated: • $37,102,560 for FY2020, • $39,298,714 for FY2021, • $41,626,636 for FY2022, • $44,094,235 for FY2023, • $46,709,889 for FY2024
Part C, Native American Caregiver Support Program	[§643(2)] Authorizes to be appropriated: • $7,718,566 for FY2017, • $7,879,982 for FY2018, • $8,041,398 for FY2019	Authorizes to be appropriated: • $10,759,920 for FY2020, • $11,405,515 for FY2021, • $12,089,846 for FY2022, • $12,815,237 for FY2023, • $13,584,151 for FY2024
Part D, Supportive Services for Healthy and Aging Independence	Not applicable.	[§644] sets aside funds to be made available for Part D: • no more than 5% of appropriations under §643(1) for any fiscal year.
Title VII, Vulnerable Elder Rights Protection Activities		
Subtitle A—State Programs		

Long-Term Care Ombudsman Program	[§702(a)] Authorizes to be appropriated to carry out Chapter 2: • $16,280,630 for FY2017, • $16,621,101 for FY2018, • $16,961,573 for FY2019	Authorizes to be appropriated: • $18,066,950 for FY2020, • $19,150,967 for FY2021, • $20,300,025 for FY2022, • $21,518,027 for FY2023, • $22,809,108 for FY2024
Elder Abuse, Neglect, and Exploitation Prevention Program; Legal Assistance Development Program	[§702(b)] Authorizes to be appropriated to carry out Chapters 3 and 4: • $4,891,876 for FY2017, • $4,994,178 for FY2018, • $5,096,480 for FY2019	Authorizes to be appropriated: • $5,107,110 for FY2020, • $5,413,537 for FY2021, • $5,738,349 for FY2022, • $6,082,650 for FY2023, • $6,447,609 for FY2024
Subtitle B—Native American Organization and Elder Justice Provisions		
Native American elder rights program and Grants for state elder justice systems	[§751(d)] Authorizes to be appropriated such sums as may be necessary for FY2007 and subsequent fiscal years	No change.

Sources: The Older Americans Act, as amended through the Older Americans Act Reauthorization Act of 2020 (P.L. 114-144); and the Older Americans Act current law, as amended by Supporting Older Americans Act (P.L. 116-131).

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