

Supporting Older Americans Act of 2020

Sec.1. Short title.

This Act may be cited as the “Supporting Older Americans Act of 2020”.

Sec.2.Table of Contents.

Sec.3.References.

Sec.4.Definitions

TITLE I—MODERNIZING DEFINITIONS AND PROGRAMS UNDER THE ADMINISTRATION ON AGING

Sec.101. Reauthorization.

Reauthorizes Older Americans Act (OAA) of 1965 Title II programs for fiscal years 2020 through 2024 and includes a seven percent increase in 2020 and a six percent increase per year for the next four fiscal years. Title II programs establish the Administration on Aging, the functions of the Assistant Secretary, state units on aging and instructions for state plans, area agencies on aging and instructions for area plans, as well as program administration for other programs under the Administration for Community Living (ACL).

Sec.102. Person-centered, trauma-informed services.

Adds access to person-centered, trauma-informed services to the objectives of OAA.

Sec.103. Aging and Disability Resource Centers.

Encourages Aging and Disability Resource Centers to collaborate with Centers for Independent Living and other community-based entities, including aging or disability entities.

Sec.104. Assistive technology.

Modernizes OAA to ensure programs authorized under OAA consider and coordinate with State assistive technology programs.

Sec.105. Vaccination.

Adds screening an individual’s immunization status to the definition of disease prevention and health promotion services and adds infectious diseases and vaccine-preventable diseases to evidence-based health promotion programs.

Sec.106. Malnutrition.

Clarifies that screening for malnutrition is included as part of nutrition screening within broader routine health screenings in the definition of disease prevention and health promotion services. Adds reducing malnutrition to the purpose of nutrition services programs under OAA.

Sec.107. Sexually transmitted diseases.

Adds prevention of sexually transmitted diseases to evidence-based health promotion programs under the definition of disease prevention and health promotion services.

Sec.108. Addressing chronic pain management.

Adds chronic pain management to evidence-based health promotion programs under the definition of disease prevention and health promotion services.

Sec.109. Screening for suicide risk.

Adds screening for suicide risk to the definition of disease prevention and health promotion services related to mental and behavioral health.

Sec.110. Screening for fall-related traumatic brain injury; addressing public health emergencies and emerging health threats negative health effects associated with social isolation.

Inserts into the definition of disease prevention and health promotion services (1) screenings, coordination of treatment, and other services for fall-related injuries, including traumatic brain injury; (2) services that are responses to public health emergencies and emerging health threats; and (3) screening and coordination of services and health care to prevent and address negative health effects associated with social isolation.

Sec.111. Clarification regarding board and care facilities.

Clarifies that board and care facilities are included within the definition of assisted living facility under OAA.

Sec.112. Person-centered, trauma-informed services definition.

Defines ‘person-centered, trauma-informed’ to include with respect to services provided by the Older Americans Act.

Sec.113. Traumatic brain injury.

Defines traumatic brain injury in OAA in the same way as it is defined in the Public Health Service Act.

Sec.114. Modernizing the review of applications and providing technical assistance for disasters.

Clarifies that the Assistant Secretary for Aging shall not approve grant applications for programs that have received previous grants unless the programs that were awarded such grants meet certain standards. Requires the Assistant Secretary to publish a list of resource centers as well as demonstration projects funded through OAA on an annual basis. Directs the Assistant Secretary to provide technical assistance and share best practices with state and area agencies on aging on how to collaborate and coordinate activities and develop long-range emergency preparedness plans.

Sec.115. Increased focus of Assistant Secretary on negative health effects associated with social isolation.

Directs the Assistant Secretary for Aging to consult stakeholders and develop objectives, priorities, and a long-term plan for supporting state and local efforts involving education about prevention of, detection of, and response to negative health effects associated with social isolation.

Sec.116. Notification of availability of or updates to policies, practices, and procedures through a uniform e-format.

Requires the Assistant Secretary for Aging to regularly update State agencies, area agencies on aging, service providers, grantees or contract awardees on the availability of, or updates to, policies, practices and procedures through electronic format.

Sec.117. Evidence-based program adaptation.

Requires the Assistant Secretary for Aging to provide technical assistance on how to deliver evidence-based disease prevention and health promotion programs for different populations in a variety of different settings, such as in local communities and rural areas.

Sec.118. Business acumen provisions and clarification regarding outside funding for area agencies on aging.

Clarifies that area agencies on aging are not prohibited from providing services not provided or authorized under OAA, including through contracts with health payers, consumer private pay programs, or other arrangements with entities or individuals that increase the availability of home- and community-based services and supports. Requires the Assistant Secretary for Aging to provide technical assistance to further this effort.

Sec.119. Demonstration on direct care workers.

Allows projects to improve the direct care workforce to the list of authorized demonstration projects which the Assistant Secretary for Aging may provide grants for under Title IV of OAA.

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

Establishes national resource center for the providing training, technical assistance and best practices for the delivery of person-centered, trauma-informed services for older individuals experiencing long-term and adverse consequences of trauma.

Sec.121. National Resource Center for Women and Retirement.

Codifies the National Resource Center for Women and Retirement. The Center provides basic financial management, retirement planning and other educational tools that promote financial literacy and help identify and prevent fraud and elder exploitation of women.

Sec.122. Family caregivers.

Extends the authorization for the RAISE Family Caregivers Act for an additional year.

Sec.123. Interagency coordination.

Requires the Assistant Secretary for Aging to coordinate with the Assistant Secretary for Mental Health and Substance Use and the Director of the Centers for Disease Control and Prevention in implementing suicide prevention activities for older individuals.

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

Modernizes the existing Interagency Coordinating Committee on healthy aging and includes supporting age-friendly communities as part of the activities and recommendations of the

Committee.

Sec.125. Professional standards for nutrition official under the Assistant Secretary.

Ensures that the nutrition official under the Assistant Secretary for Aging is a Registered Dietitian/Registered Dietitian Nutritionist.

Sec.126. Report on social isolation.

Requires the Secretary of Health and Human Services to review existing programs under OAA to determine if and how such programs adequately address the negative health effects associated with social isolation for older individuals.

Sec.127. Research and evaluation.

Establishes a Research, Demonstration, and Evaluation Center for the Aging Network that is tasked with conducting, promoting, and coordinating research and evaluation activities and assessment of the relationship between programs authorized under OAA and outcomes for seniors, such as health outcomes. The Center is also tasked with research dissemination, evaluation, demonstration projects, and related technical assistance for programs authorized under the OAA and must provide a five year plan every five years and a report to Congress annually. Requires the Secretary to provide for an analysis of the relationship between applicable programs within the Act and health care expenditures and provide a report to Congress on this analysis.

TITLE II—IMPROVING GRANTS FOR STATE AND COMMUNITY PROGRAMS ON AGING

Sec.201. Social determinants of health.

Ensures state and community programs on aging measure impacts related to social determinants of health of older individuals.

Sec.202. Younger onset Alzheimer’s disease.

Clarifies existing authority to provide caregiver and long-term care services to those with Alzheimer’s disease at any age.

Sec.203. Reauthorization.

Reauthorizes OAA Title III programs and includes a seven percent increase in 2020 and a six percent increase per year for next four fiscal years. Title III provides grant authority for supportive services and senior centers, family caregiver support, congregate nutrition, home-delivered nutrition, the nutrition services incentive grant program, and disease prevention and health promotion services.

Sec.204. Hold harmless formula.

Repeals hold harmless provisions for home-delivered meals and disease prevention and health promotion services.

With respect to supportive services and congregate meals, when appropriated funding is less than or equal to the amount appropriated for fiscal year 2019, there is a hold harmless of 99.5 percent

in fiscal year 2020 which declines .25 percent each fiscal year through fiscal year 2029. When appropriated funding for supportive services and congregate meals is greater than the amount appropriated for fiscal year 2019 the Assistant Secretary for Aging is directed to distribute funds above fiscal year 2019 levels (minus the .25 percent reduction) to states and territories according to the population of seniors. The hold harmless provision is repealed, effective October 1, 2029, for supportive services and congregate meal programs. Maintains the minimum grant protection for states and territories.

Sec.205. Outreach efforts.

Requires that area agencies on aging include survivors of the Holocaust in their outreach efforts to older individuals at risk for institutional placement.

Sec.206. State Long-Term Care Ombudsman program minimum funding and maintenance of effort.

Updates the maintenance of effort funding provisions for State Long-Term Care Ombudsman program.

Sec.207. Coordination with resource centers.

Requires states and area agencies on aging to collect data on the services needed by the populations whose needs are the focus of the centers funded by Title IV of OAA. Requires states and area agencies on aging to conduct outreach to identify individuals eligible for assistance under OAA, with an emphasis on these populations.

Sec.208. Senior legal hotlines.

Directs the Assistant Secretary for Aging to submit a report with information on existing senior legal hotlines and recommendations to Congress four years after the date of enactment.

Sec.209. Increase in limit on use of allotted funds for State administrative costs.

Updates the cap for state administrative costs from the 1992 level of \$500,000 to \$750,000.

Sec.210. Improvements to nutrition programs.

Encourages states to work with area agencies on aging to reduce the administrative burden for transferring funds between nutrition programs for congregate and home-delivered meals.

Sec.211. Review of reports.

Requires the Assistant Secretary for Aging to review reports submitted in relation to data collection and outreach efforts to older individuals whose needs are the focus of all centers funded under Title IV of OAA.

Sec.212. Other practices.

Requires state agencies to make available, upon request, state policies related to consumer contributions to area agencies on aging. Clarifies that nothing in this section shall require a state to develop policies pertaining to this section.

Sec.213. Screening for negative health effects associated with social isolation and traumatic brain injury.

Adds screening for negative health effects associated with social isolation and traumatic brain

injury to the supportive services designed to provide health screening.

Sec.214. Supportive services and senior centers.

Allows services that promote social connectedness and reduce the negative health effects associated with social isolation to be included as supportive services.

Sec.215. Culturally appropriate, medically tailored meals.

Clarifies flexibility for meal planning to address cultural considerations and preferences, as well as medically tailored meals in nutrition programs.

Sec.216. Nutrition services study.

Requires the Assistant Secretary for Aging to complete a study which would 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. The Assistant Secretary shall make recommendations, no later than 3 years following the date of enactment, on the most successful ways of capturing this data and whether similar studies should be carried out for other programs.

Sec.217. National Family Caregiver Support program.

Makes improvements to the National Family Caregiver Support program. Defines ‘caregiver assessment,’ and updates the support services to ensure that these services take into consideration information received from such assessments. Requires the Assistant Secretary for Aging to identify best practices for caregiver assessments. Allows the Assistant Secretary for Aging to award funds for activities of national significance that improve support provided to caregivers, including for program evaluation, training, technical assistance, and research. Requires the Assistant Secretary for Aging to provide technical assistance on how to promote and implement caregiver assessments. Requires the Assistant Secretary for Aging to report to Congress on the use and potential impact of caregiver assessments, including how to further their use and recommendations state and area agencies on aging for implementing the use of caregiver assessments.

Sec.218. National Family Caregiver Support program cap.

Removes the ten percent funding cap for older relative caregivers and requires states that receive funding under the National Family Caregiver Support Program to report to the Assistant Secretary the total Federal and non-Federal shares used to provide support services for older relative caregivers.

**TITLE III—MODERNIZING ACTIVITIES FOR HEALTH, INDEPENDENCE,
AND LONGEVITY**

Sec.301. Reauthorization.

Reauthorizes OAA Title IV programs and includes a seven percent increase in fiscal year 2020 and a six percent increase per year for the next four fiscal years. Title IV authorizes the Assistant Secretary for Aging to award funds for training, research, and demonstration projects in the field of aging.

Sec.302. Public awareness of traumatic brain injury.

Allows projects that address traumatic brain injury among older adults to be included in authorized grant programs.

Sec.303. Falls prevention and chronic disease self-management education.

Codifies the existing Falls Prevention and Chronic Disease Self-Management programs.

Sec.304. Demonstration to address negative health impacts associated with social isolation.

Allows projects that address negative impacts associated with social isolation among older adults to be included in authorized grant programs.

Sec.305. Technical assistance and innovation to improve transportation for older individuals.

Modernizes and improves an existing transportation grant program to enhance the aggregation, availability, and accessibility of information on options for transportation services for older individuals, including through contemporary forms of transportation and technology such as on-demand transportation services.

Sec.306. Grant program for multigenerational collaboration.

Improves an existing grant program for multigenerational collaboration to place an emphasis on grant funding for the direct services of these projects, including projects that locate programs for older and younger individuals in the same facility.

TITLE IV—SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM

Sec.401. Priority for Senior Community Service Employment Program.

Allows eligible individuals who have been incarcerated to be considered a population for purposes of prioritization for the Senior Community Service Employment Program.

Sec.402. Authorization of appropriations.

Reauthorizes OAA Title V programs and includes a seven percent increase in 2020 from the amount appropriated in fiscal year 2019 and a six percent increase per year for the next four fiscal years. Title V establishes the Senior Community Service Employment Program (SCSEP), for the promotion of useful part-time opportunities in community service activities for unemployed low-income persons who are 55 years or older and who have poor employment prospects.

TITLE V—ENHANCING GRANTS FOR NATIVE AMERICANS

Sec.501. Reauthorization.

Reauthorizes OAA Title VI programs and includes a seven percent increase in 2020 and a six percent increase per year for the next four fiscal years, with an additional \$500,000 annually for technical assistance for tribal organizations implementing OAA programs. Title VI authorizes funds for supportive and nutrition services to older Native Americans.

Establishes a five percent set-aside for supportive services for older Native Americans, in the

event that appropriations for Parts A and B are greater than the amounts appropriated in fiscal year 2019 for Parts A and B.

TITLE VI—MODERNIZING ALLOTMENTS FOR VULNERABLE ELDER RIGHTS PROTECTION ACTIVITIES AND OTHER PROGRAMS

Sec.601. Reauthorization; vulnerable elder rights protection activities.

Reauthorizes OAA Title VII programs, and includes a seven percent increase in 2020 and a six percent increase per year for the next four fiscal years. Title VII authorizes the Long-Term Care Ombudsman Program as well as Elder Abuse, Neglect, and Exploitation Prevention Programs.

Sec.602. Volunteer State long-term care ombudsman representatives.

Clarifies that volunteer ombudsman representatives can be reimbursed for costs incurred through their service, such as transportation costs.

Sec.603. Prevention of elder abuse, neglect, and exploitation.

Updates elder justice activities to include community outreach and education as part of the multidisciplinary efforts. Ensures innovative projects capture programs and materials for developing partnerships in communities.

Sec.604. Principles for person-directed services and supports during serious illness.

Directs the Administrator of the Administration for Community Living to disseminate and solicit feedback on the *Principles for Person-directed Services and Supports during Serious Illness*, issued by ACL in 2017, as well as updated versions of the principles.

Sec.605. Extension of the Supporting Grandparents Raising Grandchildren Act.

Extends the authorization period of the *Supporting Grandparents Raising Grandchildren Act* by one year.

Sec.606. Best practices for home and community-based ombudsmen.

Updates the best practices for home and community-based ombudsmen.

Sec.607. Senior home modification assistance initiative.

Requires a Government Accountability Office study on federal programs for home modification assistance for older individuals and individuals with disabilities.

TITLE VII—MISCELLANEOUS

Sec.701. Technical corrections.

Makes technical corrections throughout the OAA.