

Aging Services Appropriations: Investing in the Health and Economic Security of Older Adults

About Aging Services Programs

- Community-based aging programs improve older adults' health and economic security, enabling them to stay independent.
- Older Americans Act (OAA) programs support senior centers, home-delivered and congregate meals, health programs, family caregiver support, job training and placement, and elder rights protections.
- The OAA Senior Community Service Employment Program (SCSEP) is the only federal job training program focused exclusively on helping older adults return to the workforce, prioritizing service to veterans, individuals with disabilities, and other in-need older adults who have low job prospects and significant barriers to employment.
- Evidence-based falls prevention programs offer cost-effective interventions by reducing or eliminating risk factors, offering treatments that promote behavior change, and leveraging community networks to link clinical treatment and community services.
- Medicare State Health Insurance Assistance Programs (SHIPs) provide no-cost, objective Medicare assistance and counseling to beneficiaries and their families.

Why These Programs Matter

Investments in these programs save taxpayer dollars by reducing expenditures for mandatory programs such as Medicare and Medicaid and by putting more older adults back in the workforce.

11 million 

Older adults served annually through **Older Americans Act** programs. OAA investments save Medicare and Medicaid dollars by reducing hospital and emergency room visits and premature nursing home placement, preventing falls, averting malnutrition, and controlling chronic health conditions.

55,000 

Older workers who develop new skills and add relevant work experiences through **SCSEP** community training assignments each year. Those who secure unsubsidized employment upon exiting the program earn more in their first year than the annual training.

2.4 million 

Individuals who received one-on-one counseling from **SHIPs** in 2019. Over 3.7 million received Medicare education. A total of 54 SHIP grantees oversee more than 2,200 local SHIPs and over 12,500 counselors who advise, educate, and empower individuals to navigate the increasingly complex Medicare program.

509% 

Return on investment of evidence-based **falls prevention** programs. Each year, 1 in 4 Americans aged 65 and over (>14 million) falls. Falls are the leading cause of both fatal and nonfatal injuries for those 65 and over. Over 3 million nonfatal fall injuries are treated in emergency departments resulting in over 800,000 hospitalizations.

How Aging Services Helped Gloria

At 63, Gloria faced several barriers to employment, including incomplete education, unstable housing, and inconsistent work history. After applying for SCSEP in West Virginia, Gloria received training that eventually led to a permanent position helping prepare meals for Catholic Charities WV. Her supervisor raved, "Gloria is an asset to the organization."



How to Support Aging Services

NCOA urges Congress to adopt the following FY25 appropriations to strengthen aging services programs.

- ✓ **Significantly increase OAA program funding**, doubling funding for falls prevention and other healthy aging initiatives, supportive services and senior centers, nutrition programs, and caregiver support. Every \$1 in federal OAA funding leverages \$3 in state, local, and private aging services support. Yet, investments in these programs have not kept pace. Doubling FY25 investments is crucial to address the growing number and diversity of older adults seeking assistance and the increased cost of providing services.
- ✓ **Appropriate at least \$540.3 million for SCSEP**. SCSEP serves less than 0.5% of the low-income seniors with incomes less than \$18,825 who are eligible for the program. The program also has failed to keep pace with the increase in wages, which represent 75% of the program's cost, decreasing the number of older workers who can be served.
- ✓ **Sustain investment in non-OAA falls prevention programs**, including doubling Centers for Disease Control (CDC) elderly falls work to \$6.1 million and growing Housing and Urban Development (HUD) Aging in Place Home Modification Grants to \$80 million. The nation is spending \$50 billion on fall injuries annually, 75% of which is paid for by Medicare and Medicaid. Without intervention, this cost is projected to increase to over \$101 billion by 2030. Falls prevention investments across the federal government for FY25 should include:
 - OAA Falls Prevention: \$15 million
 - OAA Health Promotion and Disease Prevention: \$52.6 million
 - OAA Aging Network Support: \$31 million
 - OAA Interagency Coordinating Committee on Healthy Aging and Age Friendly Communities: \$2 million
 - OAA Research, Demonstration, and Evaluation Center: \$10 million
 - CDC Elderly Falls: \$6.1 million
 - HUD Aging in Place Home Modification Grants: \$80 million
- ✓ **Increase SHIP funding to at least \$80 million**. Each day, over 11,000 baby boomers become Medicare eligible, and one-on-one assistance provided by SHIPs has tripled since 2005. If the SHIP investment had simply kept pace with inflation and the increasing number of Medicare beneficiaries since FY11, funding would be over \$80 million. Additional investments are needed to meet these increasing demands.

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