August 5, 2020

Dear Senator,

On behalf of the Leadership Council of Aging Organizations (LCAO), a coalition of 69 national nonprofit organizations concerned with the well-being of America’s older population, I urge you to take swift action to pass COVID-19 relief legislation that protects the health and well-being of, and provides equitable care and services for, older adults and family caregivers.

Older Americans, particularly in communities of color, remain among the people at greatest risk for the harmful effects of COVID-19. The pandemic has placed significant strain—emotional, financial, and physical—on older adults and family caregivers. Given the unique position of this population and the prolonged nature of the pandemic, many older adults will need to remain physically distant for an extended period of time, even as parts of the country reopen.

There is an urgent need for emergency resources for the care and support of America’s older adults, and the Aging Network, national service and volunteer efforts that supports them. The federal government must also provide quality care and promote the rights of residents of nursing homes, assisted living, and other congregate settings. For all settings, personal protective equipment (PPE) for all who work with older adults is desperately needed. In addition, expanded testing and contact tracing is required to reduce transmission, and additional funds are needed for the necessary technology and training for those who provide services to older adults.

Access to Community Services

In order to ensure that older adults can remain living safely and independently in their homes and communities throughout the COVID-19 crisis, increased federal funding is needed for the community-based programs that address the increasing and unique economic, social and nutritional needs of the nation’s older adults. LCAO asserts that any forthcoming pandemic relief package must include increased emergency funding for programs authorized by the Older Americans Act (OAA), including nutrition programs, in-home services, caregiver assistance, the long-term care (LTC) ombudsman program, health promotion/disease-prevention programs, and workforce programs.

To ensure these programs can help older adults remain socially connected — particularly as COVID-19 restricts the ability to interact with family caregivers — the coalition encourages that Congress provide additional funding to the Aging Network for programs to address social isolation, including those providing services to older people who are people of color, LGBTQ+, or have low incomes.
In the next legislation to respond to this global health and economic emergency, LCAO additionally urges continued investments in federal nutrition programs that are critical in helping address food insecurity for the older adult population. Along with nutrition services provided through the OAA, the Supplemental Nutrition Assistance Program (SNAP) must be expanded by increasing the maximum monthly benefit by 15 percent and the minimum monthly benefit from $16 to $30.

Any forthcoming COVID-19 relief package must also include funding for HUD-subsidized low-income housing, where 750,000 older Americans live. This critical funding must include federally assisted housing supports, new Section 202 homes, and emergency assistance for HUD-assisted senior housing communities. Additional funding must be provided for communication technology in low-income senior housing and expansion of health and social service coordination for older adults. This economic support for these housing and expansion of service coordinators for older adults is essential to reach and support low-income, vulnerable older adults. Additionally, LCAO supports improvement and expansion of the Federal Communications Commission Lifeline subsidy program, dissemination of devices to eligible households, and emergency broadband legislation that supports older adults.

Responding to and reducing elder abuse, neglect, and exploitation remains critical during the pandemic. Elder justice initiatives, including Adult Protective Services (APS) and the LTC ombudsman program, maximize the safety of older people in both their homes and LTC facilities. LCAO urges Congress to support these programs by adding the Elder Justice Act reauthorization (S. 4182) to the COVID-19 package.

**Income Security**

With 17.8 million people out of work and an overall unemployment rate of 11 percent, the need for additional income security measures continues to be great. The forthcoming pandemic relief package should extend unemployment benefits of $600 per week through the end of the year. In addition, the package should include hazard pay of an additional $13 per hour of work for essential workers who put their health and lives on the line to provide the health care and social services that are needed during this unprecedented time.

Congress should also provide an additional $1,200 in economic impact payments to families along with an additional $500 for each dependent. The agreement on COVID relief legislation should clarify that Social Security, Supplemental Security Income (SSI) and Veterans beneficiaries will automatically receive rebate payments even if they did not file federal income taxes in 2018 or 2019.
To preserve the income security that Social Security provides, final pandemic legislation should not include any cuts or deferrals of payroll contributions. LCAO also urges Congress to omit provisions that call for yet another commission to be established to “review” trust fund solvency. These measures would do nothing to protect the benefits of workers and retirees. Instead, LCAO urges Congress to add H.R. 7499 to COVID relief legislation, including the bill’s provisions to (1) correct the benefit calculation affecting people who reach the age of 60 in 2020, (2) increase benefits for low-income workers and their families, and (3) increase benefits for those who receive Supplemental Security Income.

As Congress considers this round of pandemic relief, it should also ensure that multiemployer pensions covering more than 1 million retirees and their families are adequately funded. These plans are struggling financially and are expected to run out of funds soon. The retirees belonging to these pensions include food industry workers, truck drivers, warehouse workers, musicians, ironworkers and others. Their labor helped build America and it is clear that the work they contribute is essential in keeping the nation going in the face the COVID-19 pandemic. Many have performed these jobs for decades, forgoing higher wages during bargaining in exchange for a secure pension on retirement. We urge Congress to allocate sufficient funds to protect the hard-earned benefits of millions of our nation’s retirees who depend on retirement income from plans that, through no fault of their own, have become financially troubled.

Health

Medicaid

LCAO strongly urges Congress to expand the Federal Medical Assistance Percentage (FMAP) to at least 14 percentage points (a 7.8 percentage point increase) to sustain Medicaid programs in all 50 states, the District of Columbia (DC), and U.S. territories. In addition, LCAO urges Congress to increase FMAP by at least another 10 percentage points to support and expand Medicaid Home- and Community-Based Services (HCBS)—which, as an optional service under Medicaid, are at great risk of being cut. Given the disproportionate risk of COVID-19 associated with nursing homes, HCBS are vital to enabling older adults and people with disabilities to remain in or return to their homes. Without such increases, cuts to Medicaid enrollment, services, and provider rates might be required, thereby reducing access to crucial care and services. LCAO also urges Congress to retain the maintenance of effort (MOE) protection in the forthcoming COVID-19 package.
Medicare

LCAO appreciates Senator Charles Grassley’s desire to control the cost of Medicare Part B premiums and deductibles for beneficiaries in calendar year 2021. The coalition urges that any solution should be responsive to the Social Security cost-of-living adjustment (COLA) and Medicare Part B premium amounts scheduled for release this fall. We also recommend that Congress hold off on addressing this issue now and consult with Medicare beneficiary advocacy organizations, including LCAO members, to develop a solution responsive to all beneficiaries.

Moreover, the coalition urges Congress to pass a COVID-19-specific special enrollment period for Medicare beneficiaries, as outlined in Section 30207 of the Health and Economic Recovery Omnibus Emergency Solutions (HEROES) Act (H.R. 6800), as part of the forthcoming COVID-19 relief package.

LCAO greatly appreciates the attention given to telehealth in both the HEROES Act and the HEALS Act. Continued access to telehealth is critical to continuity of care for older people and to reducing community transmission during the COVID-19 pandemic, and telehealth offers tremendous potential to increase access to care for older adults as the country moves beyond the current crisis. The coalition urges Congress to extend the telehealth flexibilities and to work to establish a glide path that prevents a beneficiary’s access to telehealth services from ending abruptly. As Congress also considers long-term and even permanent authorization for telehealth, LCAO recommends that any such changes be made deliberately and in a manner that does not exacerbate existing disparities in access to care; that complies with HIPAA privacy protections and provides for the associated need for additional infrastructure; and that ensures clear communication among payers, providers, and beneficiaries regarding beneficiary cost sharing. We also urge Congress to require (1) continuing study by HHS regarding telehealth utilization and impact and (2) MedPAC data on access and beneficiary characteristics, as well as data from Medicare Part A, Part B, Part D, and Medicare Advantage. Such data are essential to inform future decision making on the role of telehealth in Medicare.

COVID-19 Testing, Contact Tracing, and Vaccination

LCAO urges Congress to allocate the same amount of funding for COVID-19 testing and contact tracing as included in the HEROES Act. Currently, the HEALS Act designates $16 billion to track and mitigate COVID-19 with testing, laboratory support, and contact tracing. This amount is likely insufficient, given that COVID-19 diagnoses continue to rise in multiple states. LCAO urges Congress, at a minimum, to match the $75 billion allotted in the HEROES Act.
LCAO commends the House and Senate for inclusion of vaccination distribution and administration plans. The HEALS Act currently calls upon the National Academies of Sciences to develop and submit vaccine recommendations by September 18, 2020, that ensure equitable allocations. The coalition urges Congress to consider how this equitable distribution plan would include people at greatest risk of having complications or dying from COVID-19, including older adults.

**Employer-Based Health Coverage**

LCAO continues to urge Congress to pass the Worker Health Coverage Protection Act (H.R. 6514), which is included in the HEROES Act (§30312), as part of the forthcoming COVID-19 relief package. H.R. 6514, which LCAO has supported, requires the federal government to pay COBRA premiums for workers who are unemployed or furloughed as a result of the pandemic and who have lost their health coverage. The act is essential to the health of older workers, who are more likely than younger workers to have preexisting conditions. Moreover, because Medicare might be a more appropriate choice for some people, we urge you to adopt the outreach and education strategies in Section 30312 of the HEROES Act. This provision would empower people who lose employer-based health insurance to make informed coverage decisions and to avoid costly Medicare Part B enrollment mistakes.

**Flexible Spending Accounts (FSA)**

LCAO commends the House and Senate for inclusion of provisions allowing flexibility for people enrolled in FSA or “dependent care” FSA plans in the HEROES Act and HEALS Act, respectively. Such flexibility benefits older people who are in the paid workforce, family caregivers of older adults, and older people who receive support and assistance from family caregivers. We urge Congress to incorporate the language from Section F (Flexibility for Certain Employee Benefits) of the HEROES Act in the forthcoming COVID-19 package.

**Nursing Homes and Assisted Living Facilities**

LCAO commends the House and Senate for inclusion of strike teams in nursing homes with residents who are diagnosed with COVID-19. Strike teams represent an immediate response to containing the spread of COVID-19 in nursing homes to their residents, who represent one-third of deaths across the U.S. LCAO urges Congress to pass legislation that would bolster the work of strike teams through workplace safety standards, requirements on infection control, staff and resident testing inspections, and measures to ensure an adequate supply of personal protective equipment for staff and residents.
The coalition urges Congress to include in its new COVID-19 relief package greater transparency of coronavirus-related data collected in nursing homes. It is essential that nursing home data, including staffing data, be made available to understand the impact of the pandemic on residents and staff. Therefore, LCAO urges Congress to codify the current nursing home COVID-19 reporting requirements [42 C.F.R. §483.80(g)(1)] and supports the HEALS Act provision (S. 4318, §314) calling for the HHS Secretary to provide to the governor of each state a list of all Medicare- and Medicaid-enrolled nursing homes in which the reported cases of COVID-19 increased during the previous week. Additionally, LCAO encourages Congress to require the CDC and CMS to coordinate and make all data available online to the public.

Health Care Workers

LCAO urges Congress to include in its forthcoming COVID-19 package coverage for COVID-19 testing for all essential workers, including home care workers and staff of nursing homes and assisted living residences. The HEALS Act does not include such coverage and would leave essential workers paying out of pocket for such testing. COVID-19 testing is crucial to safeguarding the health not only of essential workers, but also of older people served by that workforce.

The coalition also urges Congress to incorporate the following provisions for all essential workers in its forthcoming COVID-19 package: premium (or hazard) pay, as reflected in Section 170102 of the HEROES Act; free child care, as reflected in Section 100101 of HEROES; and paid family, sick, and medical leave.

Trust Funds

LCAO strongly opposes the Senate’s inclusion of the Time to Rescue United States Trusts (TRUST) Act of 2020 (S. 4323) in the HEALS Act and urges Congress to drop this bill from its forthcoming COVID-19 package. The TRUST Act would establish a closed-door Congressional commission to examine the long-term solvency of the Medicare, Social Security, and Highway Trust funds. This bill is unrelated to the COVID-19 pandemic and inappropriately targets Medicare and Social Security, which have been lifelines for many older Americans during the pandemic, to reduce the federal deficit.

Return to Physical Classrooms

LCAO urges Congress to act with extreme caution in resuming classroom-based education on every level (preschool–prekindergarten through college–university). Many older people live with children, teens, and adults who are students; some older people are, themselves, students
or are employed in educational settings. A premature return to the physical classroom could have a drastic impact on all generations, including older adults. Consequently, we urge you not to condition dissemination of federal education funds to states and localities on the provision of in-person, classroom-based instruction for all students (as is done in the HEALS Act). This approach does not give states and localities the flexibility they need either to respond to changes in community spread of COVID-19 or to the health and safety needs of staff, students, and communities.

Older people need more help during the COVID-19 pandemic. They are getting sick and dying at alarming rates, especially older adults of color. For that reason, on behalf of the Leadership Council of Aging Organizations, I urge you to include these proposals in the agreement now being negotiated on coronavirus relief legislation.

Sincerely,

Max Richtman
Chair