

Heroes work here!

Trillions in Covid relief, but not for Caregivers
and Seniors in Assisted Living and Memory Care.

Don't leave us behind...again!

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Every day, 10,000 Americans turn age 65 and nearly 70% of these seniors will require some form of long-term care. By 2025, America will need 1.4 million additional senior caregivers. Since March 2020, senior care facilities have lost over 380,000 caregivers and 96% of assisted living communities are facing staffing shortages right now. These workforce and demographic challenges are all in addition to the \$30 billion in losses and expenses that assisted living caregivers have incurred through June 2021 to mitigate and prevent COVID-19, with little to no federal relief.

Assisted living communities are the homes for 2 million seniors who share common caregivers. This innovative and cost-effective care model provides 24 hours-a-day care for seniors who need assistance with life daily activities, such as bathing, dressing, and taking medications. However, the current House reconciliation package¹ does not provide any assistance for these senior caregivers in Home & Community Based Services (HCBS) funding despite the White House specifically calling for the inclusion of assisted living². Additionally, assisted living caregivers are explicitly excluded from critical workforce development programs. Please don't leave these seniors and their caregivers behind, again.

Two modest modifications are needed to ensure that assisted living and other senior caregivers are not left behind again:

1. Include assisted living caregivers in critical workforce development programs in the reconciliation bill. This will ensure that workforce programs are better focused on meeting the needs of America's rapidly aging population. See below.
2. Per President Biden's request, include assisted living caregivers within HCBS funding. Dramatic COVID losses and woefully inadequate relief³ threatens the viability of these senior caregivers. To prevent seniors from losing their homes and caregivers, include a direct and targeted allocation of \$15 billion for the Public Health and Social Services Emergency Fund in the Build Back Better Act.

¹ BBB Text: <https://tinyurl.com/aysh9tn4>

² WH Fact Sheet: <https://tinyurl.com/25cpmhez>

³ Relief Comparisons: <https://tinyurl.com/tdndx9fs>

Modifications to Build Back Better

Section 22008: Industry or sector partnership grants (p. 193): Creates a \$10 billion grant program authorized through the Department of Labor to “eligible partnerships” to expand workforce development and employment opportunities in sections including healthcare. Section 22008(b) should be amended to specifically reference “assisted living and senior care” providers.

Sections 22301 & 22302: Direct Care Workforce (p. 216/221): Authorizes \$1.48 billion for grants to eligible entities to provide competitive wages and benefits to direct care workers and to develop a plan to recruit, retain, and train direct care workers. Section 22301(a)(3)(C) should be amended to specifically reference “assisted living and senior care” providers or “non-profit trade associations”.

Section 25004: Funding for the aging network and infrastructure (p.336): Authorizes \$1.2 billion in state grants for several different programs within the framework created by the Older Americans Act (OAA). Section 25004 should be amended to specifically direct states to provide this grant funding to a “long-term care facility” as defined by the OAA⁴.

Section 30712: Home and community based services planning grants (p. 573): Authorizes \$130 million for home and community based services planning grants for eligible states who must consult with “stakeholders”. Section 30712 should be amended to specifically reference “assisted living and other senior care” providers as stakeholders.

Section 134101: Pathways to health careers (p. 1496): Authorizes \$425 million to create block grants for eligible entities to provide health profession opportunity grants. Eligible entities includes health care providers (including hospitals, skilled nursing facilities and health centers) but does not include assisted living facilities. Section 134101(h)(4)(F) should be amended to a “long-term care facility” as defined in the OAA.

Section 134201(a): Nursing home worker training grants (p. 1524/1530): Creates a \$400 million nursing home worker training state grant program, which is weighted to states with a high senior population. Grant funding can be used for wage subsidies for workers, student loan repayment, tuition assistance, child care and transportation. Section 134201(a) should be amended to include a “long-term care facility”, as defined in the OAA, within the eligible settings.

Section 134201(d): Grants to area agencies on aging to study social isolation among older adults (p. 1540): Creates a \$250 million grant program to area agencies on aging or community based organizations for outreach and intervention to address loneliness and social isolation of elderly individuals. Section 134201(d) should be amended to require that outreach and intervention be conducted at assisted living facilities and to allow “non-profit trade associations” to assist in these research efforts.

⁴ OAA Section 102(35): <https://tinyurl.com/54zrunxs>