

Administration for Community Living
Release of the FY 2014 Budget Request to Congress
Wednesday, April 10, 2013

On April 10, 2013, the Administration for Community Living's (ACL) first budget request to Congress, for Fiscal Year 2014, totaling **\$2.14 billion** was released as part of the U.S. Department of Health and Human Services (HHS) budget request. ACL was formed in April 2012 to help people with disabilities and older adults to have the option to live in their homes and participate fully in their communities. ACL works across HHS to harmonize efforts to promote community living, which can save Federal funds. Compared to FY 2012, the current request makes modest strategic investments, while maintaining level funding for most core areas. The request again proposes to transfer complementary programs to ACL, including, for the first time, the Paralysis Resource Center from the Centers for Disease Control and Prevention. The request also includes \$24.7 million from the Prevention and Public Health Fund (PPHF) for three programs: Chronic Disease Self-Management Education, services related to the Alzheimer's Disease Initiative, and an Alzheimer's Outreach and Communications Campaign.

One area proposed for additional investment is the protection of vulnerable older adults. There is no single set of national elder abuse prevalence data, yet the number of reported cases of elder abuse, neglect, and exploitation is rising. Data suggest that more than 5 million, or 10 percent of elders are abused, neglected, and/or exploited annually. Research shows that older victims of even modest forms of abuse have dramatically higher (300 percent) morbidity and mortality rates. The result is a growing number of seniors who access the health care system more frequently (including emergency room visits and hospital admissions), and are ultimately forced to leave their homes and communities prematurely. The FY 2014 budget includes \$8 million for Adult Protective Services to strengthen the evidence base so that states, tribes, and communities on the front lines of this serious problem can direct their resources to what works.

The budget invests an additional \$5.5 million to partially restore funding for the Alzheimer's Disease Supportive Services program, thereby allowing ACL to continue to implement the only HHS program that currently targets supportive services to people experiencing Alzheimer's disease and their caregivers. This request will complement the Alzheimer's Initiative first announced last year by HHS, under which a total of \$14.7 million is requested from Prevention and Public Health funds in FY 2014 for caregiver support, provider education, public awareness and improvements in data infrastructure. The budget also includes \$10 million in mandatory funding for Aging and Disability Resource Centers that serve as "one-stop shop" entry points into long-term services and supports at the community level.

The request would maintain \$1.4 billion to support a vibrant array of existing programs that focus on health and independence for seniors and their caregivers. Authorized under the Older Americans Act (OAA) and administered by the national aging services network, these core programs include home and community-based services, nutrition programs, preventive health services and services to assist caregivers. These programs help families keep their loved ones living at home for as long as possible. Services complement existing medical and health care systems, help to prevent hospital readmissions, provide transport to doctors' appointments, and support some of life's most basic functions, such as providing assistance in elders' homes to help

them with bathing or preparing food. The national aging services network also helps consumers learn about and access the services and supports that are available in the community and addresses issues related to caregivers. OAA services are less expensive than institutional care and performance data show that they are very effective.

In addition, the budget would fund \$168 million for five programs in ACL's Administration for Intellectual and Developmental Disabilities (AIDD). These programs fund capacity-building and systems change efforts to assure that people with intellectual and developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life. These funds will support a variety of partnerships with states and territories, including State Councils on Developmental Disabilities, Developmental Disabilities Protection and Advocacy programs, University Centers for Excellence in Developmental Disabilities, and Projects of National Significance, in addition to providing funding for the Help America Vote Act protection and advocacy access program.

Finally, ACL seeks to further strengthen its emphasis on community living in the FY 2014 budget through three transfers to ACL: the State Health Insurance Assistance Programs (SHIPs) from the Centers for Medicare & Medicaid Services, the Senior Community Service Employment Program (SCSEP) from the Department of Labor and the Paralysis Resource Center (PRC) from the Centers for Disease Control and Prevention.

- The SHIPs programs, which are funded at \$52.1 million, the same level as in FY 2012, provide one-on-one counseling to help Medicare beneficiaries navigate complex health and long-term care decisions. This transfer will enable grantees, about two-thirds of which are State Units on Aging, to enhance efficiency and better complement ACL's Aging and Disability Resource Centers (ADRCs) that serve as community level "one-stop shop" entry points for people of all ages who have chronic conditions and disabilities.
- SCSEP, authorized under Title V of the Older Americans Act (OAA), would receive \$380 million in funding, a reduction of \$68.3 million from the FY 2012 level necessitated by the current tight budget environment. ACL will make improving program performance a priority, including targeting the SCSEP program to people with the greatest need. This proposed transfer recognizes that SCSEP can be more effective when its services are closely integrated with the supports that are provided by ACL's existing aging services programs. The wages earned by participants while in this program and after finding unsubsidized employment are key to allowing more seniors to remain economically independent and in their communities.
- The PRC, funded at the FY 2012 level of \$6.7 million and proposed for transfer from CDC, provides comprehensive information and referral services for people living with paralysis and their families and caregivers. Under ACL's administration, the PRC will benefit from extensive ties to ACL's aging and disability networks.