On behalf of NCOA, I greatly appreciate the opportunity to talk with you today about Older Americans Act (OAA) reauthorization and supportive services (Title IIIB). This will be the third reauthorization effort in which I have actively participated.

NCOA (www.NCOA.org) is a nonprofit service and advocacy organization headquartered in Washington, DC. NCOA’s mission is to improve the lives of millions of older adults, especially those who are vulnerable and disadvantaged. NCOA is a national voice for older Americans and the community organizations that serve them. We bring together nonprofit organizations, businesses, and government to develop creative solutions that improve the lives of all older adults. NCOA works with thousands of organizations across the country to help seniors find jobs and benefits, improve their health, live independently, and remain active in their communities.

With the population of older individuals expected to grow exponentially in the coming years, the Aging Services Network (ASN) faces incredible challenges associated with the influx of older individuals into OAA programs. During this Congress, the OAA should be strengthened through reauthorization, which provides an important opportunity to modernize and improve services by supporting efficiencies and innovations, reassessing the Act’s successes and limitations, and addressing its ability to effectively serve older Americans in need.

Recognized by the OAA as community focal points, multipurpose senior centers have become one of the most widely used services among America’s older adults. Today, nearly 11,000 senior centers serve 1 million older adults every day. Senior centers serve as a gateway to the nation’s aging network—connecting older adults to vital community services that can help them stay healthy and independent.
Older adults who participate in senior center programs find tools, information and options that:
(1) prolong independence and delay institutionalization; (2) empower them in their own self-
care to better manage and delay the onset of chronic disease; (3) improve their physical, social,
spiritual, mental, and economic well-being; and (4) promote active engagement in their
communities. Through reauthorization, we should ensure that these successful efforts are
embraced in state and area plans, and create new opportunities to modernize multipurpose senior
centers to foster innovation, and build leadership and capacity.

In seeking to appeal to and serve the boomers-becoming-seniors (about 10,000 Americans are
turning 65 every day), senior centers must make changes that connect them in new ways with
their communities, e.g. by upgrading their facilities and equipment. According to a February
2010 study by the Council of Senior Centers and Services in New York, many senior centers
have aging physical plants and need to renovate to meet growing demands. Senior centers also
need to be strategic in sharing their experience, knowledge and best practices with others,
establishing a “systematic diffusion of innovation.”

Reauthorization of the OAA should create authority for dedicated funding for multipurpose
senior center modernization to foster innovation, leadership, and capacity-building. There is
acceptance among senior center leaders that those receiving such investments would be held to a
certain level of accountability, standards or accreditation. We should help the “innovators” to
continue to develop and test new models and provide technical assistance and training so that
senior centers can better meet the needs of our growing aging population.

Efforts in these areas should be closely coordinated with reauthorization improvements in Title
IV of the OAA – Activities for Health, Independence and Longevity – where NCOA is crafting
specific recommendations to strengthen the research, demonstration, and evaluation components
of the Act. Many senior centers have the potential to serve as research centers, to develop and
test supportive services and evaluate evidence-based programs.
Transportation is of critical importance to vulnerable seniors and the ASN. In fact, at the 2005 White House conference on Aging, the resolution regarding transportation received the second highest number of priority votes from the 73 considered, outranked only by the resolution calling for a reauthorized OAA within six months following the conference. The transportation resolution (#22) focused on ensuring that older Americans have transportation options to retain their mobility and independence, with implementation strategies covering flexibility, public-private partnerships, attention to rural areas, and the importance of volunteer drivers. We support the recommendations of the Leadership Council of Aging Organizations (LCAO) to: expand the description of transportation services to include mobility management activities, broadly defined, and formalize the role of the ASN in the coordinated public transit-human services transportation planning process while authorizing funding support and technical assistance for these efforts.

We have a number of specific suggestions for amendment language we look forward to sharing with the committee that would improve access to evidence-based falls prevention and self-care management programs, particularly for seniors with multiple chronic conditions. There is evidence that improved access to these community-based programs can reduce Medicare and Medicaid spending.

We also have specific ideas we look forward to sharing on Section 321(a)(5) and (22) to better promote the concepts of person-centered planning and self-direction within long-term services and supports. These would parallel leadership in the Centers for Medicare and Medicaid Services (CMS) to advance such concepts within the Medicaid Home and Community-Based Services programs.

Finally, we expect to have some modest suggestions in Section 321(a)(9) and (14) to include references to specific services that would enhance seniors’ economic security – a top reauthorization priority for NCOA.

Thank you again for this opportunity to share our views. We look forward to working with you and other members of the committee on important supportive services and other issues of concern to vulnerable older Americans.