FY22 Eldercare Workforce Appropriations Requests

As the Fiscal Year (FY) 2022 Labor, Health and Human Services, and Education funding is considered, the Eldercare Workforce Alliance (EWA) urges adequate funding for programs designed to increase the number of health care professionals prepared to care for America’s growing population of older adults and to support family caregivers in the essential role they play in caring for older loved ones.

The number of Americans over age 65 is expected to double between 2000 and 2030, totaling more than 70 million people and accounting for almost 20% of the American population by the end of the next decade. To ensure that there is a skilled eldercare workforce and knowledgeable, well-supported family caregivers available to meet the complex and unique needs of older adults, we urge you to support the following requests:

1. **$51 million** in funding for geriatrics programs in Title VII of the Public Health Service Act;
2. **$398.7 million** in funding for programs administered by the Administration for Community Living (ACL) that support the vital role of family caregivers in providing care for older adults;
3. **$51 billion** to support the research efforts of the National Institutes of Health (NIH);
   - **$500 million** within this amount specifically dedicated to support cross-Institute aging research at the NIH, including but not limited to biomedical, behavioral and social sciences aging research; and
   - **$289 million** also within this amount for research on Alzheimer’s disease and related dementias.

While our requests take into account the current fiscal constraints, EWA believes a modest increase in funding for these programs is essential to meet the needs of our growing older adult population, today and in the future.

### Title VII Geriatrics Programs: GWEP & GACA ($51 million)

The Title VII geriatrics programs include the Geriatrics Workforce Enhancement Program (GWEP) and the Geriatrics Academic Career Awards (GACA). These Title VII geriatrics workforce programs, administered by the Health Resources and Services Administration, are the only federal programs that train in geriatrics principles. The two initiatives have four main goals:

- Foster education and engagement with family caregivers by training providers who can assess and address their care needs and preferences.
- Promote interprofessional team-based care by transforming clinical training environments to integrate geriatrics and primary care delivery systems.
- Improve the quality of care delivered to older adults by providing education to families and caregivers on critical care challenges like Alzheimer’s disease and related dementias.
- Reach underserved and rural communities by ensuring clinician-educators are prepared to train the geriatrics workforce of today and tomorrow.

For FY2022, we request increased funding to close current geographic and demographic gaps in geriatrics workforce training. During the COVID-19 public health emergency, the Geriatrics Workforce Enhancement Program (GWEP) and the Geriatrics Academic Career Awards (GACAs) program have been on the frontlines, ensuring their clinical and educational training can enhance their institutions’ and communities’ response to the pandemic and its impacts on older adults. Specifically, the increased funding would allow for current and any additional GWEPs HRSA funds to help communities with disaster\public health planning. **$51 million request**
Programs for Older Americans and Caregivers ($398.7 million)

**National Family Caregiver Support Program:** This program provides a range of support services family and other unpaid caregivers annually, including counseling, respite care, training, and assistance with locating services that assist family and informal caregivers in caring for their loved ones at home for as long as possible. We request that Congress work toward funding the National Family Caregiver Support Program at $334 million in FY 2022. Included in the funding request for the National Family Support Program, $400,000 is needed to sustain the efforts of the RAISE Family Caregiving Advisory Council in creating a National Family Caregiving Strategy. **$334 million request**

**Native American Caregiver Support:** This program provides grants to eligible tribal organizations to provide support for family and informal caregivers of Native American, Alaskan Native, and Native Hawaiian elders. It offers information and outreach, access assistance, individual counseling, support groups and training, respite care and other supplemental services. In FY2014, more 934,000 caregivers were served through this program. **$12.5 million request**

**Alzheimer’s Disease Program:** A critical focus of these programs is to support the family caregivers who provide countless hours of unpaid care, thereby enabling their family members with dementia to continue living in the community. Funds will go to evidence-based interventions and expand the dementia-capable home and community-based services, enabling additional older adults to live in their residence of choice. **$35 million request**

**Lifespan Respite Care:** This program funds grants to improve the quality of and access to respite care for family caregivers of children or adults of any age with special needs. **$14.2 million request**

**Demonstration on Direct Care Workers:** This program is authorized in Title IV of the Older Americans Act (OAA), in coordination with the Secretary of Labor, to carry out the demonstration of new strategies for the recruitment, retention or advancement of direct care workers. If funding is appropriated, ACL would begin with demonstrations that could prove the concept of what approaches were effective. **$3 million request**

National Institutes of Health ($51 billion)

**The National Institute on Aging,** one of the 27 Institutes and Centers of the National Institutes of Health, leads a broad scientific effort to understand the nature of aging in order to promote the health and well-being of older adults. Funding will aid in researching training initiatives for the workforce that cares for older adults and research on physician-family communication during end-of-life and critical care. In addition, the NIA coordinates the Older Americans Independence Centers Program, which aims to increase scientific knowledge leading to better ways to maintain or restore independence in older persons. The NIA also supports on-going projects that improve patient-level health outcomes for individuals with three or more chronic health conditions. To support the NIA and aging research across the NIH, we recommend funding as follows:

- **$51 billion for NIH as proposed by the Biden Administration but no less than $46.1 billion**
- Increase of at least $500 million specifically dedicated to support cross-Institute aging research at the NIH, including but not limited to biomedical, behavioral and social sciences aging research; and
- A minimum increase of $289 million specific to research on Alzheimer’s disease and related dementias (ADRD). NIA is the primary federal agency supporting and conducting Alzheimer’s disease and related dementias research.

**$51 billion request**

BOLD Infrastructure for Alzheimer’s Act ($20 million)

**Alzheimer's and Related Dementias Public Health Centers of Excellence:** This legislation establishes Alzheimer’s centers of excellence and funds state, local, and tribal public health departments to increase early detection and diagnosis, reduce risk, prevent avoidable hospitalizations, reduce health disparities, and support the needs of caregivers and care planning for people living with the disease across the country. **$20 million request**

The positions of the Eldercare Workforce Alliance reflect a consensus of 75 percent or more of its members. Statements reflect the consensus of the Alliance and do not necessarily represent the position of individual Alliance member organizations.

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