

AMERICAN GERIATRICS SOCIETY
Outside Witness Testimony – Fiscal Year 2017 Appropriations
Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies
Committee on Appropriations
United States Senate

April 15, 2016

Written Testimony for FY 2017 Appropriations for the Department of Health and Human Services

- **Geriatrics Education and Training Programs**
- **Additional workforce programs in the Health Resources and Services Administration**
- **National Institutes of Health/National Institute on Aging**

Submitted on behalf of the American Geriatrics Society

40 Fulton Street, 18th Floor

New York, NY 10038

Contact: Anna Mikhailovich, Senior Coordinator of Public Affairs and Advocacy,

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Mr. Chairman and Members of the Subcommittee,

We submit this testimony on behalf of the American Geriatrics Society (AGS), a non-profit organization of nearly 6,000 geriatrics healthcare professionals dedicated to improving the health, independence, and quality of life of all older Americans. As the Subcommittee works on its fiscal year (FY) 2017 Labor-HHS Appropriations Bill, we ask that you prioritize funding for the geriatrics education and training programs under Title VII and Title VIII of the Public Health Service (PHS) Act, additional primary care programs under the Health Resources and Services Administration (HRSA), and for aging research within the National Institutes of Health (NIH)/National Institute on Aging (NIA).

We ask that the subcommittee consider the following funding levels for these programs in FY 2017:

- **\$45 million for the Geriatrics Workforce Enhancement Program (PHS Act Title VII, Sections 750 and 753(a) and PHS Act Title VIII, Section 865)**
- **\$9.7 million for additional primary care workforce programs under HRSA**
- **An increase of \$500 million over the FY 2016 enacted level for aging research across the NIH, in addition to the funding allocated for Alzheimer's disease and related dementias**

Sustained and enhanced federal investments in these initiatives are essential to delivering high quality, better coordinated, and more cost effective care to our nation's seniors, whose numbers are projected to increase dramatically in the coming years. According to the U.S. Census Bureau, the number of people age 65 and older will more than double between 2010 and 2050 to 88.5 million or 20 percent of the population; and those 85 and older will increase threefold to 19 million. To ensure that our nation is prepared to meet the unique healthcare needs of this rapidly growing population, we request that Congress provide additional investments necessary to expand and enhance the geriatrics workforce, which is an integral component of the primary care workforce, and to foster groundbreaking medical research.

PROGRAMS TO TRAIN GERIATRICS HEALTHCARE PROFESSIONALS

Our nation is facing a critical shortage of geriatrics faculty and healthcare professionals across disciplines. This trend must be reversed if we are to provide our seniors with the quality care they need and deserve. Care provided by geriatrics healthcare professionals, who are trained to care for the most complex and frail individuals who account for 80 percent of our Medicare expenditures, has been shown to reduce common and costly conditions that are often preventable with appropriate care, such as falls, polypharmacy, and delirium.

Geriatrics Workforce Enhancement Program (\$45 million)

The Geriatrics Workforce Enhancement Program (GWEP) is currently the only federal program designed to increase the number of providers, in a variety of disciplines, with the skills and training to care for older adults.

In May 2015, HRSA announced 41 three-year grant funded programs that consolidated the Title VIII Comprehensive Geriatric Education Program and the Title VII Geriatric Academic Career Award, Geriatric Education Centers, and Geriatric Training for Physicians, Dentists and Behavioral and Mental Health Providers programs.

This consolidation—a change made by HRSA in December 2014—provides greater flexibility to grant awardees by allowing applicants to develop programs that are responsive to the specific interprofessional geriatrics and training needs of their communities. While the AGS is encouraged by elements of this new approach, we are concerned that there is no longer a sufficient focus on the training and education of health professionals who wish to pursue academic careers in geriatrics or gerontology. The Geriatric Academic Career Award (GACA) program is the only federal program that is intended to increase the number of faculty with geriatrics expertise in a variety of disciplines. In the past, the number of GACA awardees has ranged from 52 to 88 in a given grant cycle; in the most recent round of GWEP grants, it appears that only a small number of the grantees will be dedicating resources to train faculty in geriatrics and gerontology.

At a time when our nation is facing a severe shortage of both geriatrics healthcare providers and academics with the expertise to train these providers, the AGS believes the number of educational and training opportunities in geriatrics and gerontology should be expanded, not reduced.

To address this issue, we request additional funding for the Title VII and Title VIII geriatrics professions programs for FY 2017:

- **Geriatrics Workforce Enhancement Program (\$45 million)**

GWEP seeks to improve high-quality, interprofessional geriatric education and training to the health professions workforce, including geriatrics specialists, as well as increase geriatrics competencies of primary care providers and other health professionals to improve care in medically underserved areas. It supports the development of a healthcare workforce that improves health outcomes for older adults by integrating geriatrics with primary care, maximizing patient and family engagement and transforming the healthcare system. We ask the subcommittee to provide a FY 2017 appropriation of \$45 million for the Geriatrics Workforce Enhancement Program. With more resources available, we also ask for a renewed emphasis to address the severe shortfall of faculty with expertise in geriatrics and gerontology.

Additional Workforce Programs under the Health Resources and Services Administration (\$9.7 million)

- **National Health Care Workforce Commission (\$3 million)**

The National Health Care Workforce Commission was established in the Affordable Care Act to identify barriers to healthcare workforce development and to formulate a national strategy to address the shortage; however, Congress has not provided funding for the Commission to be convened. The AGS believes that the Commission's work—including research on topics such as workforce priorities and goals; current and projected workforce supply; and needs and assessments of current education and training activities—is an important first-step in the effort to bolster the healthcare workforce in order to meet the needs of the burgeoning number of older Americans. We request \$3 million for the Commission so that it can accomplish its essential mission.

- **Geriatric Career Incentive Awards Program (\$3.3 million)**

Congress authorized this program under the Affordable Care Act to provide financial support to foster greater interest among a variety of health professionals entering the field of geriatrics, long-term care, and chronic care management. Our funding request includes \$3.3 million for this program.

- **Training Opportunities for Direct Care Workers (\$3.4 million)**

Under the Affordable Care Act, Congress approved a program that will offer advanced training opportunities for direct-care workers. The AGS believes this program should be funded to improve training and enhance the recruitment and retention of direct care workers, particularly those in long-term care settings. As our population ages, these workers are an integral part of efforts to ensure that older adults have access to high-quality care. We are requesting \$3.4 million for this program.

RESEARCH FUNDING INITIATIVES

National Institutes of Health (additional \$500 million over FY 2016)

The institutes that make up the NIH and specifically the NIA lead the national scientific effort to understand the nature of aging and to extend the healthy, active years of life. As a member of the Friends of the NIA, a broad-based coalition of aging, disease, research, and patient groups committed to the advancement of medical research that affects millions of older Americans—the AGS urges a minimum increase of \$500 million over the enacted FY 2016 level in the FY 2017 budget for biomedical, behavioral, and social sciences aging research efforts across the NIH. The AGS also supports an additional \$400 million for NIH-funded Alzheimer's disease and related dementias research over the enacted FY 2016 level.

The federal government spends a significant and increasing amount of funds on healthcare costs associated with age-related diseases. By 2050, for example, the number of people age 65 and older with Alzheimer's disease and related dementias is estimated to reach 13.8 million—nearly triple the number in 2016—and is projected to cost more than \$1 trillion. Further, chronic diseases related to aging, such as diabetes, heart disease, and cancer continue to afflict 80 percent of people age 65 and older and account for more than 75 percent of Medicare and other federal health expenditures. Continued and increased federal investments in scientific research will ensure that the NIH and NIA have the resources to conduct groundbreaking research related to the aging process, foster the development of research and clinical scientists in aging, provide research resources, and communicate information about aging and advances in research on aging.

Strong support such as yours will help ensure that every older American is able to receive high-quality care.

Thank you for your consideration.

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