

May 22, 2025

The Honorable Bill Cassidy, Chairman  
The Honorable Bernie Sanders, Ranking Minority Member  
Senate HELP Committee  
Washington, DC 20510

The Honorable Tim Walberg, Chairman  
The Honorable Bobby Scott, Ranking Minority Member  
House Education and Workforce Committee  
Washington, DC 20515

Dear Chairmen Cassidy and Walberg and Ranking Members Sanders and Scott:

The undersigned entities write today to express our support for the Older Americans Act (OAA) and the efficient, effective services that are delivered through OAA in communities nationwide every day. As leaders of the committees of jurisdiction over OAA, you know these include crucial supports and services such as in-home help with dressing, bathing and eating; rides to the doctor; case management; adult day care; home-delivered and congregate meals; evidence-based falls prevention and chronic disease self-management programs; caregiver respite; elder abuse prevention and long-term care ombudsmen, among many others.

**We are concerned, however, that the Department of Health and Human Services (HHS) reorganization threatens to disrupt this efficient, effective delivery system and leave older adults and caregivers stranded.** A leaked copy of the HHS budget for FY 2026 would splinter apart the programs that make up the Older Americans Act (OAA), sending OAA Title III C Nutrition and Title VI Native American Aging Programs Part A (meals and supportive services) to the Administration for Children and Families (ACF), a human services agency, and all other line items (Title III B Supportive Services and Senior Centers, Title III D Evidence-Based Health Promotion and Disease Prevention and Title III E National Family Caregiver Support Group; Title VI Native American Aging Programs Part C Caregiver; Title VII Elder Rights and Long-Term Care Ombudsman) to the Centers for Medicare & Medicaid Services (CMS), a health care administration agency that does not issue formula funding such as OAA.

**Splitting up OAA programs into two different federal agencies undermines the fact that the different titles and subtitles programs are all part of ONE delivery system established by Congress in the OAA: the Aging Network, with leadership at federal, state and local levels.** The OAA works so well because of that coordinated approach, allowing state and local aging agencies and their community provider partners to provide a wide range of person-centered services to meet the needs of older adults and caregivers as efficiently as possible.

It's why Congress created an Administration on Aging (AoA) in the Act to serve as the administrator of these vital programs and elevate the issues of aging within HHS. In 1992, the leader of AoA became a Senate-confirmed position, the Assistant Secretary on Aging. This federal leadership is even more important today given the nation's rapid pace of aging, with the U.S. having already reached historic levels of older adults as a share of the overall population, with more growth expected, and with people living much longer than in previous generations. We need strong federal leadership on aging issues to handle these demographic changes and ensure that cost-effective, successful programs like those under the Older Americans Act can help older Americans age well and at home. On the issue of where AoA should be housed, the answer is clear: ACF is the most appropriate placement of the two agencies.

If the proposed breakup of the programs in the OAA goes forward, it will severely impact the ability of older adults to get the services and supports they need to remain living at home and in the community versus facing placement in institutional settings, as well as drive cost inefficiencies through unnecessary and wasteful administrative burden on federal, state and local aging agencies.

We urge you, as authorizers, to ensure that the HHS reorganization does not break apart the OAA and instead keeps all of HHS' OAA programs together and administered at AoA under an Assistant Secretary on Aging, even if AoA is moved under ACF.

Sincerely,

USAgings

ACCSES: The Voice of Disability Service Providers

Addus Homecare

Alliance for Aging Research

Alliance for Retired Americans

Alzheimer's Disease Resource Center, Inc.

American Academy of Neurology

American Association for Geriatric Psychiatry

American Medical Women's Association

American Society on Aging

Caregiver Action Network

CCS Health

Center for Health and Social Care Integration at Rush

Center for Medicare Advocacy

Center to Advance Palliative Care

Cumulus.care

Elder Justice Coalition

Family Caregiver Alliance, National Center on Caregiving

Gerontological Society of America

GroundGame Health

HealthyWomen  
HFC: Hilarity for Charity  
HIV+Aging Research Project  
Hypertrophic Cardiomyopathy Association  
International Association for Indigenous Aging  
Justice in Aging  
LeadingAge  
Lewy Body Dementia Resource Center  
MAZON: A Jewish Response to Hunger  
Meals on Wheels America  
Medicare Rights Center  
Memory and Aphasia Care  
National Academy of Elder Law Attorneys (NAELA)  
National Adult Day Services Association (NADSA)  
National Adult Protective Services Association  
National Alliance for Caregiving  
National Association of Development Organizations  
National Association of Nutrition and Aging Services Programs  
National Association of Regional Councils  
National Association of Social Workers (NASW)  
National Certification Council for Activity Professionals - NCCAP  
National Consumer Voice for Quality Long-Term Care  
National Council on Aging  
National Health Council  
National Indian Council on Aging  
National Task Group on Intellectual Disabilities and Dementia Practices  
NMAC  
PrognosUs  
SAGE  
Second Wind Dreams, Inc.  
The Association for Frontotemporal Degeneration  
The Foundation for Social Connection Action Network  
The National Alliance to End Homelessness  
Trust for America's Health  
Voices of Alzheimer's

cc: Members of the Senate HELP Committee and House Education and Workforce Committee