

# NCOA Blog

Public Policy & Action

◀ 363

◀ 135



By Marci Phillips | 2.21.2018

## **Straight Talk for Seniors®: What the Administration's FY19 Budget Request Means for Seniors**

On Feb. 12, the Administration released its FY19 budget request, which outlines its funding priorities. The request does not reflect the budget deal that Congress passed earlier this month, but more detailed documents are expected from agencies in the coming weeks.

Congress is focused on finalizing FY18 appropriations. Like last year, lawmakers will likely move forward with their own plans for FY19, and few major policy changes are expected to pass in this election year.

Largely due to last year's tax cuts, the Administration's budget would never balance, with accumulated deficits of an estimated \$7.2 trillion over the next 10 years. Here are some other major proposals which, if enacted, would affect seniors.

## **Medicare: Cut by \$237 billion**

The budget includes a variety of Medicare cuts, most of which would reduce provider payments, such as spending reductions for Graduate Medical Education and Medicare bad debt payments. Several Medicare drug pricing proposals are also included, some of which could increase beneficiary out-of-pocket costs, and some which would reduce them. NCOA is supportive of the proposals to cap Part D out-of-pocket costs by eliminating the current 5% cost-sharing in catastrophic coverage and eliminating generic drug copayments for beneficiaries eligible for low-income subsidies.

## **Medicaid: Cut by about \$1 trillion**

The budget eliminates the Medicaid expansion and imposes per capita caps or block grants on the entire program. The caps would limit Medicaid funding at a set amount per beneficiary, irrespective of states' actual costs. The cap would grow more slowly each year than the projected growth in state per-beneficiary costs. Nearly 7 million low-income seniors rely on Medicaid for their health and long-term care. The proposal is based on a Graham-Cassidy Senate bill that Congress rejected last year, which the Congressional Budget Office estimated would reduce federal spending on Medicaid by about \$1 trillion from 2017-2026.

## **SSDI and SSI: Cut by \$72 billion**

The Social Security Disability Insurance (SSDI) program and Supplemental Security Income (SSI) programs would be cut by an estimated \$72 billion over 10 years.

## **Medicare State Health Insurance Assistance Program (SHIP): Eliminated**

The budget eliminates this program that each year supports 15,000+ counselors who provide free, state-specific assistance to over 7 million beneficiaries.

## **Senior Community Service Employment Program (SCSEP): Eliminated**

The budget eliminates the nation's only job training and placement program specifically for older adults. In 2016 under SCSEP, 60,000 older adults received on-the-job training while providing over 33 million hours of staff support more than 20,000 organizations, at a value of \$806 million, twice the amount of the program's current appropriation.

## **Falls Prevention: Eliminated**

The budget eliminates \$5 million in falls prevention funding in the Administration for Community Living (ACL) budget. No details are yet available regarding the \$2 million in funding in the Centers for Disease Control (CDC) budget, but the Administration proposed no funding for FY18. Every 19 minutes, an older adult dies from a fall; every 11 seconds an older adult is treated in an emergency room for a fall-related injury.

## **Chronic Disease Self-Management Education (CDSME): Eliminated**

The budget eliminates \$8 million in funding for community-based workshops for people with chronic conditions. The budget also repeals the Prevention and Public Health Fund, which currently provides funding for CDSME and falls prevention. Over 90% of older adults have at least one chronic disease and two-thirds have two or more.

## **Low-Income Home Energy Assistance Program (LIHEAP): Eliminated**

The budget eliminates this program that helps low-income individuals pay for their heating and cooling costs. About a third of the 6.7 million households receiving LIHEAP benefits include an older adult aged 60+.

## **Block Grants (SSBG, CSBG, CDBG): Eliminated**

The budget eliminates the Social Services Block Grant (SSBG), Community Services Block Grant (CSBG), and Community Development Block Grant (CDBG). These programs provide states and localities with funding to improve economic security and independence for low-income families and seniors through services like home care, congregate and home-delivered meals, and transportation. SSBG is the only source of federal funding for Adult Protective Services. An estimated 4.4 million older adults receive services under SSBG and CSBG.

## **National Service Programs: Eliminated**

The budget eliminates the Corporation for National and Community Service, and with it, the Senior Corps, VISTA, and AmeriCorps programs that enlist older adults in volunteerism and serve seniors in communities nationwide. In 2016, 245,000 Senior Corps volunteers provided 74.6 million hours of service.

## **Commodity Supplemental Food Program (CSFP): Eliminated**

CSFP provides monthly food assistance to nearly 600,000 low-income seniors. The program is designed to meet the unique nutritional needs of older adults.

## **Supplemental Nutrition Assistance Program (SNAP): Cut by \$213 billion**

Various proposals to alter the program's design and eligibility would reduce funding by \$213 billion over 10 years. The ones with particular impact on seniors include:

- Subjecting 2 million more older adults to the more stringent 3-month time limit on benefits for non-disabled childless individuals by increasing the applicable age from 49 years old to 62 years old, beginning in 2021. It also extends work requirements for recipients up to age 62.
- Eliminating a state option that helps poor working families, seniors, and people with disabilities known as "broad-based categorical eligibility," which eases income and asset limits.
- Changing the "elderly" definition to age 62, resulting in low-income seniors aged 60-62 no longer qualifying for certain eligibility rules and program flexibilities designed to reduce administrative burdens and ease access for vulnerable seniors, such as eliminating asset limits, accounting for medical and shelter expenses, and easing application and certification processes.
- Ending SNAP's minimum monthly benefit for households of 1-2 people, which primarily goes to low-income seniors and people with disabilities who qualify for a benefit of \$14 or less. About 2 million people would be affected.
- For all individuals receiving SNAP of \$90 or more a month, approximately 50% of the value of benefits will be provided in a box of nonperishable foods.

## **Elder Justice Act (EJA): Cut by \$2 million**

The budget cuts funding for Adult Protective Services and Elder Justice Initiative at ACL. As many as 5 million older adults are abused each year, and the annual loss by victims of financial exploitation is estimated to be at least \$36.5 billion.

Download our funding table for a complete list of FY19 proposals for aging services programs.

## What happens next?

Congress is still working to wrap up FY18 funding by March 23. Work is already starting on FY19, but legislation isn't expected for at least a few months. The two-year budget deal provides more room to invest in appropriations. Stay tuned for details as they unfold.

Tags: Medicare, Medicaid, Straight Talk, federal budget, SCSEP

Search

### Visit our other blogs

- [Aging Mastery Program®](#)
- [National Institute of Senior Centers](#)
- [My Medicare Matters®](#)
- [Economic Security](#)
- [BenefitsCheckUp®](#)
- [Healthy Aging](#)
- [Benefits Access](#)
- [Public Policy & Action](#)
- [Home Equity](#)

### Tags


[Medicare](#) [Straight Talk](#) [Medicaid](#) [aging](#) [Older Americans Act](#) [Affordable Care Act](#) [federal budget](#) [ACA](#) [OAA](#) [BenefitsCheckUp](#) [chronic disease](#)  
[healthy eating](#) [SNAP](#) [SCSEP](#) [senior centers](#) [AMP](#) [benefits](#) [healthy aging](#) [benefits enrollment centers](#) [benefits for seniors](#)



## About Marci Phillips

Marci Phillips is NCOA's Director of Public Policy and Advocacy. She oversees NCOA's advocacy efforts related to budget and appropriations for seniors' programs, Older Americans Act, economic security and hunger, and elder justice.

## Comments



Start the discussion...

LOG IN WITH

OR SIGN UP WITH DISQUS 


Name

Be the first to comment.

ALSO ON NATIONAL COUNCIL ON AGING


9 Free Resources for Managing Your Money - Economic Security Blog | NCOA

1 comment • 10 months ago

 **Christa Sunderland** — These are great ideas and tips. Thank you for sharing these with us.


Importance of Medicaid for Low Income Seniors - Public Policy Blog | NCOA

13 comments • a year ago

 **Blueberry Hill** — These programs have worked for decades with little problem; why do they need to screw them up now? Oh, yes, I know, they want to screw us out of medical care. There cannot be a more contemptable


Federal Funding for Aging Services - Public Policy Blog | NCOA

4 comments • a year ago

 **Terrell Rodefer** — It's obvious these people have no concept of the meaning of the word "need." But they do understand "Want more...for ME!!" Sad...and dangerous.

What's New for Medicare in 2018

4 comments • 2 months ago

 **NCOAging** — Thank you for catching this! The update has been made.