



President Trump Recommends Federal Spending Cuts in FY 2018 Budget Proposal

The Trump Administration released a broad version of their Fiscal Year (FY) 2018 budget proposal on Thursday, March 16th. In this proposal, the President recommended decreasing funding for the federal Department of Health and Human Services by 17.9% (\$15.1 billion), and specifically indicated that the administration wants to eliminate funding for the Community Development Block Grant (CDBG) program.

Some news outlets have reported that eliminating CDBG funding is a cut to Meals on Wheels. While some states do use CDBG funding for nutrition programs, in Michigan no CDBG funding is distributed through the Aging and Adult Services Agency (AASA) or the Area Agency on Aging 1-B for nutrition programs. The CDBG is an important program that supports a variety of anti-poverty initiatives. Some local communities may use CDBG funding to buy equipment, support local senior centers, and provide chore services to older adults.

President Trump also proposed eliminating the Senior Community Services Employment Program (SCSEP), which helps low-income, unemployed individuals over the age of 55 find work.

It is unclear what the President's proposal means for nutrition and aging programs. The overall proposed funding cut of 17.9% for the Department of Health and Human Services (DHHS), which includes Older Americans Act funding for aging programs, is concerning. Older Americans Act programs may receive cuts as part of the \$15.1 billion proposed reduction to the DHHS budget, but that level of detail has not yet been released. Federal funding makes up 50% of all nutrition funding in Region 1-B.

The President's budget proposal marks the beginning of federal budget negotiations, but it is expected that Congressional Leaders will make changes to the budget in coming months.

Also in this Issue:

Understanding The American Health Care Act

Silver Key Coalition Testifies in Support of State Budget Proposal

Representatives from the Silver Key Coalition provided testimony to the Michigan House and Senate Health and Human Services Appropriations subcommittees in support of the Governor's (FY) 2018 budget proposal for the Aging and Adult Services Agency. The FY 2018 budget proposal includes a \$1.5 million increase for Home Delivered Meals and a \$2.1 million increase for other in-home services. It is expected that the appropriations subcommittees will vote on the budget later this month. The budget will be considered by the full House and Senate later this spring.



The Area Agency on Aging 1-B (AAA 1-B) is a nonprofit agency serving the needs of older adults in Livingston, Macomb, Monroe, Oakland, St. Clair, and Washtenaw counties.

Contact Katie Cahill, (248) 262-9232 or by e-mail at kcahill@aaa1b.com to join the Senior Advocacy Network or receive copies of AAA 1-B reports referenced in The Advocate.

Understanding The American Health Care Act's Impact on Older Adults

On March 6th, the American Health Care Act (AHCA) was introduced in the federal House of Representatives as part of the effort to repeal or replace the Affordable Care Act (ACA). If passed by Congress, this new Republican plan would make a number of changes to the ACA, including repealing the individual mandate to have insurance and changing the funding structure of the Medicaid program.

The AHCA maintains several key provisions of the ACA that are beneficial to older adults, including coverage for Medicare preventative screenings and annual wellness visits, prohibitions on insurers imposing lifetime limits in coverage, coverage for people with pre-existing conditions, and the gradual closing of the Medicare Part D donut hole, which will make prescription drugs more affordable for Medicare beneficiaries.

Several provisions in the AHCA could negatively impact older adults if the bill is passed by Congress:

- The AHCA would roll back Affordable Care Act protections that cap how much more insurers can charge older consumers than younger ones. The AHCA would allow insurers to charge older adults up to five times more than a younger individual. Under the ACA, an insurer can only charge an older individual three times more than a younger person. This change would likely mean higher premiums for people aged 55 to 64.
- Under the ACA, financial support was provided for individuals purchasing insurance on the private marketplace based on their income and the cost of insurance in their area. The new AHCA would provide individuals with a fixed amount of support based on their age. While older adults would receive higher subsidies than other age groups, most low-income older adults could get less financial support to purchase insurance under this new plan.
- The AHCA would reduce funding for the Prevention and Public Health Fund (PPHF) by \$100 million (10 percent) in 2018 and completely eliminate the fund in 2019. Currently, the PPHF provides grants that fund fall prevention activities, chronic disease self-management programs, and Alzheimer's disease prevention and education efforts.
- Policy changes in the AHCA are projected to reduce the solvency of the Medicare trust fund by four years; the ACA had increased the solvency of the Medicare trust fund by 11 years.

Leadership in the House of Representatives has indicated that they hope to pass the AHCA this month. To let your representatives know your position on the ACHA, you can contact them using the information provided below.

Representative Name	Counties Served	District	Phone Number
Representative Tim Walberg	Monroe/Washtenaw	7	(202) 225-6276
Representative Mike Bishop	Livingston/Oakland	8	(202) 222-4872
Representative Sander Levin	Oakland/Macomb	9	(888) 810-3880
Representative Paul Mitchell	Macomb/St. Clair	10	(202) 225-2106
Representative Dave Trott	Oakland	11	(202) 225-8171
Representative Debbie Dingell	Washtenaw	12	(202) 225-4071
Representative Brenda Lawrence	Oakland	14	(202) 225-5802