

## Outside Witness Testimony of Ellie Hollander, President and CEO of Meals on Wheels America

Submitted to the U.S. Senate Committee on Appropriations
Subcommittee on Labor, Health and Human Services, Education and Related Agencies
Regarding: United States Department of Health and Human Services, Administration for
Community Living Fiscal Year 2025 Appropriations
May 23, 2024

Dear Chairwoman Baldwin, Ranking Member Capito, and Members of the Subcommittee:

Thank you for the opportunity to submit testimony concerning Fiscal Year 2025 (FY25) appropriations for the Older Americans Act (OAA) Nutrition Program, administered by the Department of Health and Human Services' (HHS) Administration for Community Living (ACL). On behalf of Meals on Wheels America, the nationwide network of more than 5,000 community-based senior nutrition providers and the older adults they serve, we urge Congress to provide \$1,841,753,000 for the OAA Nutrition Program to be included in the final FY25 Labor, Health and Human Services, Education and Related Agencies (Labor-HHS-Ed) Appropriations bill. The specific line-item requests are:

- Congregate Nutrition Services (Title III-C-1) \$840,842,000
- Home-Delivered Nutrition Services (Title III-C-2) \$840,842,000
- Nutrition Services Incentive Program (NSIP) (Title III) \$160,069,000

Overseen by ACL's Administration on Aging and implemented at the local level through thousands of community-based providers, the OAA Nutrition Program delivers nutritious meals, social connection, and safety checks to adults 60 and older in group, grab-and-go and/or individual home settings. These critical programs have been at the forefront of addressing senior hunger and isolation for over five decades.

This \$1.842 billion funding request reflects the dire need for increased funding for the OAA Nutrition Program to meet the rising costs of services and our nation's growing senior population. Meals on Wheels programs provide vital nutrition and social connections that are a lifeline to older adults most in need. The FY24 funding cut to the OAA Nutrition Program, the first in more than a decade, paired with increased operational costs and volunteer shortages, exacerbated the challenges faced by local providers as they try to serve the rising number of seniors in need with fewer available resources. Despite the incredible efforts of community providers to quickly scale services in response to rapidly growing demand during the pandemic, funding has not kept pace with the sustained levels of need. Today, eight out of ten low-income, food insecure older adults do not receive the congregate or home-delivered meals for which they are eligible and need. One in three Meals on Wheels programs recently reported keeping a waitlist, with seniors waiting an average of 90 days for vital meals and supportive services. The troubling and costly level of unmet need across the country will only grow more severe without a significant increase in funding. And there is a concomitant return on that investment in terms of reduced visits to emergency departments, admissions and readmissions to hospitals and premature placements in nursing homes. The annual medical costs of senior malnutrition, falls and social isolation exceed \$107 billion combined. Yet a senior can receive nutritious food, friendly visits, and health and safety checks from Meals on Wheels for an entire year for roughly the same cost as one day in the hospital or ten days in a nursing home.

In the latest Meals on Wheels America member survey, 78% of programs report that they have already or will need to add seniors to a waitlist due to a lack of funding. Nearly all (99%) Meals on Wheels programs identify one or more significant challenges to serving meals to all seniors in need in their

community. The challenges that programs most frequently noted include food prices (75%), funding to pay for meals (65%), difficulty recruiting and retaining enough volunteers (59%), and gas prices (59%). Increased funding for the OAA Nutrition Program is urgently needed to ensure that community-based providers can deliver proven, life-sustaining nutrition and social connection services to the 2.5 million seniors in need who are currently not served.

The direct quotes below from Meals on Wheels programs that serve a variety of different communities are representative of the devastating impact of inadequate funding, especially since the end of the public health emergency as pandemic-related funding has expired. These reflections from program leaders paint a stark picture of the severe consequences of inadequate funding that will grow only worse if federal funding does not significantly increase to keep pace with increasing need and rising costs.

- "As of today, we have over 800 clients (and counting) on our waitlist. We are not able to take on any new clients and when we tell them that we have an indefinite wait time, they respond that they will be dead. We need an increase of \$1.3 million annually to get rid of our waitlist. All of the one-time pandemic funding allowed us to serve more people than ever and we are still serving move people than ever, we just can't take on any more clients without a significant increase in ongoing funding, not one time." Meals on Wheels Program in Washington
- "It will put services to the most at-risk older adults and their safety, at grave risk. We are experiencing a significant increase in requests, especially in the congregate meal portion, where older adults who do not qualify for home delivered meals, are starting to come to our dining locations. We are experiencing explosive growth in the level of high nutrition risk in those attending our dining locations. Finally, our agency has seen a dramatic increase in elder abuse cases, especially domestic violence cases. Funding cuts would impact them the greatest, especially based on their current needs and safety." Meals on Wheels Program in Iowa
- "We serve 2 very rural towns. These 2 towns have no services and no grocery stores. Cutting funding would cut clients from the nutrition they need to stay healthy. This is only one impact funding cuts will have. Budgets cuts would affect home delivered meal programs more extremely than congregate. This means even less meals would be provided to those seniors that need them the most. Home bound seniors, who are not able to drive, cook for themselves, or stand long enough to prepare a meal would have to go to bed hungry." Meals on Wheels Program in Wyoming
- "We are a small private non-profit organization serving four rural counties in Washington State. Federal funding is essential to the meal programs. Cuts in funding will force cuts in service to the seniors who attend congregate meals and reduce workdays for the staff providing the senior's service. Funding also impacts our ability to reach home delivered meal clients. For instance, Okanogan County is 5,315 square miles, larger than 3 states in the US. Demographics show 23 percent of the population are senior citizens, 11 percent are below the poverty level and only 8 people per square mile. Reduced funding would make it financially impossible to reach 1/3 of our current clients who live outside of a 10-mile radius of the individual meal sites." Meals on Wheels Program in Washington
- "We saw what federal funding cuts did in 2013 when sequestration hit and we had to immediately start a waiting list for meals (congregate and home-delivered) for the very first time in 30 years. Flash forward to 2023 and that waiting list now has 2,400 homebound seniors waiting for their first meal that may never come. It is horrifying when we reach out to serve those on the waitlist to find they have passed away. Any cuts to already insufficient federal funding will only amplify the lethal impact of hunger on our most vulnerable and isolated seniors." **Meals on Wheels Program in Florida**

• "There has been a notable increase in the number of requests for home-delivered meal service phone calls we receive. Presently, we are fortunate that our waitlist remains relatively short. However, if this financial decline persists, the consequences will be severe for our elderly community and our program. Regrettably, we will be unable to accommodate a significant number of additional seniors requiring our services, necessitating a re-evaluation of our hearthealthy menu. As our government funding encompasses transportation, we will also be compelled to reduce the number of rides provided to seniors, including transportation to medical appointments, dialysis sessions, and the VA clinic for veterans." – Meals on Wheels Program in Texas

Nutrition is paramount to healthy aging. Older adults who are food insecure and lack consistent access to nutritious meals experience worse health outcomes and are at increased risk of heart disease, depression, diabetes, and declines in cognitive function and mobility compared to those who are food secure. Most older Americans possess at least one factor that puts them at greater risk of food insecurity, malnutrition, and social isolation and loneliness, thereby increasing their likelihood of experiencing adverse health effects.

For over fifty years, the OAA Nutrition Program has been an essential linchpin in supporting the healthy aging process for millions of Americans. Meals on Wheels programs, backed by a history of strong bipartisan and bicameral support, set the gold standard for a successful public-private partnership that enables the delivery of more than 251 million nutritious meals annually to 2.2 million older adults facing hunger and isolation.<sup>2</sup> But the impact of our programs to address the dual national crises of senior hunger and social isolation is significantly limited by insufficient funding. The reality and scope of senior hunger and isolation in our country are sobering. 12 million older adults aged 60 and older worry about having enough food —up from 10 million in 2021.<sup>3</sup> And almost half of all older adults are estimated to be at risk of becoming, or are already, malnourished.<sup>4</sup>

Further, certain segments of the population experience a range of different challenges at disproportionately higher rates. Older adults who live in rural areas, are near or below the poverty line, live with disabilities or limited mobility, are racial or ethnic minorities, and/or are members of the LGBT community, face systemic inequities that too often result in a lack of adequate resources and access to services they need to thrive later in life.

The impact of OAA nutrition services on seniors' lives is powerful. Most seniors receiving them consistently report that they feel safer and more secure, are less afraid and at risk of falls, and appreciate

<sup>&</sup>lt;sup>1</sup> Ziliak and Gunderson, 2021, *The Health Consequences of Senior Hunger in the United States: Evidence from the 1999-2016 NHANES*, report prepared for Feeding America, available at <a href="www.feedingamerica.org/research/senior-hunger-research/senio

<sup>&</sup>lt;sup>2</sup> Administration for Community Living/Administration on Aging (2023), State Program Report (SPR) 2021, available on ACL's Aging, Independence, and Disability Program Data Portal (AGID) at: <a href="https://agid.acl.gov/">https://agid.acl.gov/</a> U.S. Census Bureau (2022), Current Population Survey (CPS) Food Security Supplement, Meals on Wheels America calculation of dataset available at: <a href="https://www.census.gov/data/datasets/time-series/demo/cps/cpssupp\_cps-repwgt/cps-food-security.html">https://www.census.gov/data/datasets/time-series/demo/cps/cpssupp\_cps-repwgt/cps-food-security.html</a>

<sup>&</sup>lt;sup>4</sup> Kaiser et al., 2010, "Frequency of malnutrition in older adults: a multinational perspective using the mini nutritional assessment", *Journal of the American Geriatrics Society* 58(9):1734-8, abstract available at <a href="https://pubmed.ncbi.nlm.nih.gov/20863332/">https://pubmed.ncbi.nlm.nih.gov/20863332/</a>

the ability to remain in their own home.<sup>5,6</sup> In turn, these supports contribute to improved health and help avoid preventable emergency room visits, hospital admissions and readmissions, extended stays in rehab and premature institutionalization – ultimately saving hundreds of billions of dollars in healthcare costs.

A recent evidenced-based report, *The Case for Meals on Wheels: An Evidence-Based Solution to Senior Hunger and Isolation*, showcased consistent findings that local Meals on Wheels programs improve senior health, safety, social connection, and more while significantly saving taxpayer dollars. The report analyzed a total of 38 studies, spanning 1996 to 2023, and found that local Meals on Wheels programs reduce healthcare utilization and costs, falls, moves to nursing homes and long-term care facilities, and social isolation and loneliness, all while improving food security, diet quality, nutritional status, and seniors' ability to age in place. These noteworthy outcomes demonstrate the life-changing impact and cost-effectiveness of community-based senior services, underscoring the urgent need for Congress to provide adequate funding to support the OAA Nutrition Program.

For many Meals on Wheels participants, staff and volunteers may be the only individual(s) they see that day. Regular social connection is an inherent component of the Meals on Wheels service model and can include intentional face-to-face conversation during delivery and/or enhanced programming, like friendly visiting and telephone reassurance calls. Further, in-home safety services include a regular environmental safety check and established approaches for addressing identified hazards, fall risks and home repair needs. For additional details about the powerful impact of Meals on Wheels programs in addressing the problems of senior hunger and social isolation in our communities across the country, my testimony before the Senate Committee on Health, Education, Labor and Pensions at its March 7, 2024 hearing on "The Older Americans Act: Supporting Efforts to Meet the Needs of Seniors" may be informative.<sup>8</sup>

In closing, we understand the difficult decisions you face with respect to annual appropriations bills and other budgetary challenges. However, funding for the OAA Nutrition Program can be the difference between life and death for too many vulnerable seniors and must be increased so that these critical programs reach more seniors in need. Very few programs can claim both a social and economic benefit but this one can. Our nation simply cannot afford to go backwards. As Congress considers priorities in the FY25 appropriations process, you have an important opportunity to invest in programs that support the health, safety and social connectedness of our nation's seniors and achieve significant savings to the federal government and taxpayers through reduced healthcare spending. That's why Meals on Wheels America urges you to prioritize \$1,841,753,000 for the OAA Nutrition Program, including equal funding for congregate and home-delivered nutrition services at \$840,842,000 each and \$160,069,000 for the Nutrition Services Incentive Program.

Thank you for your leadership and continued support of the OAA Nutrition Program. We hope that we can count on you to prioritize the needed increase in funding in the FY25 appropriations process and look forward to working together to ensure that no older adult in America is left hungry and isolated.

<sup>&</sup>lt;sup>5</sup> Administration for Community Living (ACL), 2019, *National Survey of OAA Participants*, available on ACL's AGID Custom Tables, available at <a href="https://agid.acl.gov/">https://agid.acl.gov/</a>

<sup>&</sup>lt;sup>6</sup> Meals on Wheels America, 2015, *More Than a Meal Pilot Research Study*, report prepared by Thomas & Dosa, available at www.mealsonwheelsamerica.org/learn-more/research/more-than-a-meal/pilot-research-study

<sup>&</sup>lt;sup>7</sup> Meals on Wheels America (September 2023), *The Case for Meals on Wheels: An Evidence-Based Solution to Senior Hunger and Isolation*. <a href="https://www.mealsonwheelsamerica.org/learn-more/research/the-case-for-mealsonwheels-sept23">https://www.mealsonwheelsamerica.org/learn-more/research/the-case-for-mealsonwheels-sept23</a>

<sup>&</sup>lt;sup>8</sup> Download File: Hollander Testimony | Senate Committee on Health, Education, Labor and Pensions