



**MEALS on WHEELS  
AMERICA**

**Outside Witness Testimony of  
Ellie Hollander, President and CEO, Meals on Wheels America  
Submitted to the Subcommittee on Labor, Health and Human Services, Education and  
Related Agencies  
Committee on Appropriations, United States Senate  
Relating to Fiscal Year 2019 Appropriations, Administration for Community Living**

**June 1, 2018**

Dear Chairman Blunt, Ranking Member Murray and Members of the Subcommittee:

Thank you for the opportunity to present testimony concerning Fiscal Year (FY) 2019 appropriations for the Older Americans Act (OAA) Nutrition Program administered by the Administration for Community Living (ACL)/Administration on Aging (AoA) within the U.S. Department of Health and Human Services. I am providing this testimony on behalf of the 2.4 million seniors who depend on congregate and home-delivered meals to remain healthier and independent in their homes, as well as the millions of volunteers and more than 5,000 local senior nutrition programs that care for them in your own states and across the country. We are grateful for your ongoing support of these proven and effective nutrition programs, including the \$59 million increase provided in H.R. 1625, the Consolidated Appropriations Act of 2018. We also appreciate your concern for the issues surrounding senior hunger and isolation, including the growing number of those who need Meals on Wheels but remain on waiting lists for services due to limited funding. In FY 2019, we urge you to continue to build on the long-standing bipartisan, bicameral support and increase federal funding for the OAA Nutrition Program by \$100 million over FY 2018 levels, for a total of \$996.7 million. Our specific line-item requests are:

- Congregate Nutrition Services (Title III, C-1) – \$490,342,000
- Home-Delivered Nutrition Services (Title III, C-2) – \$346,342,000
- Nutrition Services Incentive Program (Title III, NSIP) – \$160,069,000

At this critical juncture in our nation's history, when both the need and demand for OAA Nutrition Program services are rapidly climbing, we ask that you give this request your utmost consideration. This program is one of the best examples of a successful public-private partnership in which vulnerable seniors not only receive nutritious meals, but also receive opportunities for socialization, safety checks and connections to community resources that reduce healthcare costs and benefit our communities and taxpayers, as a whole.

For more than 50 years, the OAA has been the primary piece of legislation supporting vital services for older adults and their caregivers, with congregate and home-delivered services being the only federal programs designed to meet both the social and nutritional needs of our nation's most at-risk seniors. Proudly, the OAA Nutrition Program has delivered over 8 billion meals since its inception, and the network of service providers has the infrastructure and capability to serve even more, if properly funded.

The person-centered, community-driven approach that Meals on Wheels programs and millions of dedicated volunteers carry out each day enables seniors to live more nourished and independent lives longer in their own homes – where they want to be – reducing unnecessary and costly visits to the emergency room, admissions and readmissions to hospitals, and premature nursing home placements. In short, the OAA Nutrition Program delivers more than just a meal to those who are fortunate enough to receive its services and is an essential part of the solution to reducing healthcare expenditures resulting from an aging population that is increasingly threatened by hunger and isolation.

## **INADEQUATE FUNDING PLACES MORE AND MORE AMERICANS AT RISK**

Today, one in four seniors lives alone and 8.6 million seniors may not know from where their next meal will come. Yet, in 2016, funding provided through the OAA was only able to support the provision of meals to 2.4 million seniors nationwide. In addition, a 2015 Government Accountability Office report found that about 83% of food insecure seniors and 83% of physically-impaired seniors did not receive OAA meals, but likely needed them. Further highlighting the problem, the OAA network overall is serving 16 million fewer meals to seniors in need than it was in 2005 – representing a 6.6% decrease – due in large part to federal funding not keeping pace with inflation or need. Over that same time, the population of individuals 60 and older grew by 38%. Simply put, too few seniors who need meals are receiving them.

While the \$59 million increase as part of the FY 2018 Omnibus Appropriations Bill was an encouraging, desperately needed step in the right direction, an increase of this level is not nearly enough to close the gap between seniors in need and those served. Taking into account that 12,000 more Americans turn 60 each day, this gap will undoubtedly continue to grow and contribute to poorer health and increased healthcare utilization among seniors if left unabated. We can and must do better.

## **SERVING THE MOST VULNERABLE**

Data from ACL's State Program Reports and National Survey of OAA Participants demonstrates that the seniors receiving meals at home and in congregate settings, such as senior centers, need and rely on these services to help them remain more healthy, safe and independent. Often, the single meal provided through the OAA Nutrition Program represents half or more of a senior's total daily food intake. Further, the meal delivery volunteers, staff and/or peers at a congregate dining facility may also be the only individuals a senior meal recipient sees in a given day.

Below is the profile description of at-risk seniors receiving Meals on Wheels through the OAA:

- 59% are 75+ years old
- 59% are women
- 35% live at or below the poverty level
- 46% self-report fair or poor health
- 15% are veterans
- 25% live in rural areas
- 28% are a racial and/or ethnic minority
- 82% take 3+ medications daily

The extreme vulnerability of this population was further underscored in a groundbreaking 2015 study entitled More Than a Meal, commissioned by Meals on Wheels America. The study found

that seniors on Meals on Wheels waiting lists were significantly more likely than a nationally representative sample of comparably aged Americans to:

- report poorer self-rated health (71% vs. 26%);
- screen positive for depression (28% vs. 14%), and anxiety (31% vs. 16%);
- report recent falls (27% vs. 10%), and fear of falling that limited their ability to stay active (79% vs. 42%).

Even a slight reduction in nutritional intake for a vulnerable senior can accelerate physical and mental impairment and impede recovery from illness, injury, treatment or surgery. A senior struggling with hunger has physical limitations comparable to food-secure seniors 14 years older, thereby causing a significant discrepancy between chronological and physical age. Compounding the struggles of hunger with the negative effects of loneliness on health – which is comparably detrimental to smoking up to 15 cigarettes a day – results in profound social and economic consequences. Without adequate federal funding, more and more seniors are forced to make daily trade-offs between food, rent, utilities and medicine, which often prematurely lands them in the emergency room, hospital and/or costly long-term care facilities.

## **THE SOLUTION EXISTS**

Older adults are often at risk of poor nutrition given the myriad of social, economic and functional challenges that may accompany aging and limit ability to access, prepare and consume nutritious foods. Food insecurity and malnutrition are associated with poor health and \$77 billion in healthcare costs annually. Especially frail seniors, like those served through Meals on Wheels, mostly comprise the 5% of individuals who account for over 50% of healthcare spending. Food-insecure seniors are at higher risk of falls, which contributes another \$50 billion in total medical costs in 2015. However, the *More Than a Meal* study referenced above found that those seniors who received daily home-delivered meals (the traditional Meals on Wheels model of a daily, home-delivered meal, friendly visit and safety check) experienced the greatest improvements in health and quality of life. Specifically, between baseline and follow-up, seniors receiving daily home-delivered meals were more likely to exhibit improvements in physical and mental health, including reductions in falls and the fear of falling, as well as report fewer hospitalizations, reduced levels of anxiety, feelings of isolation, loneliness and worry about being able to remain at home.

Investing in Meals on Wheels has also been shown to reduce hospital readmissions and post-discharge costs. Further, in-home interactions with a senior enables early detection of a change in condition or worse yet, a medical emergency that can be immediately addressed. In previous testimony, I have provided the Subcommittee with information relating to the significant reductions in post-discharge costs – some as high as 31% – associated with interventions by Meals on Wheels. In pilot studies in six states, 30-day readmission rates post-medical intervention ranged from 6-7% for Meals on Wheels recipients in comparison to national readmission rates of 15-33% over the same period. Every \$25 per year per older adult spent on home-delivered meals results in a reduction of up to 1% of the low-care nursing home population, saving hundreds of millions of dollars in annual Medicaid costs alone, for individuals and taxpayers. The infrastructure and cost-effective solutions to support this unique population

already exist through the OAA network of more than 5,000 local, community-based programs. With federal funding as the foundation for 8 out of 10 Meals on Wheels programs that rely on the OAA to provide such critical social and nutrition services to America's most at-risk seniors, now is the time to invest further in these programs.

## **DELIVERING A STRONG RETURN ON INVESTMENT FOR OUR NATION**

We know you are tasked with making tough decisions during this appropriations cycle; nonetheless, we make the ask for a **\$100 million increase for home-delivered nutrition services** because of the growing unmet need and the powerful return to seniors and taxpayers alike. Taking into account the undeniable success of this public-private partnership – where \$1 appropriated through the OAA leverages about \$2 or more in other sources – a funding increase of \$100 million could enable the Meals on Wheels network to raise an additional \$200 million, creating the potential to serve an additional 88,000 seniors in need annually. While still not enough to provide meals to every senior in need, such a funding increase would build on the down payment that was made through the FY 2018 appropriations and further boost Meals on Wheels programs' capacity to serve.

The OAA Nutrition Program currently takes up *less than one-sixth of one percent of the total non-defense discretionary budget*; meanwhile, Medicare and Medicaid costs continue to rise year over year. Investing in providing meals designed specifically for seniors' nutritional needs, as well as creating opportunities for socialization and injury and/or illness prevention, can change this. OAA Nutrition Programs are an under-leveraged solution, with the potential to produce billions of dollars in savings to the Mandatory side of the budget. By increasing funding for meals, more seniors can remain in their own homes, driving healthcare costs down significantly. After all, we can deliver Meals on Wheels to a senior for an entire year for the same cost or less on average as just one day in the hospital or ten days in a nursing home.

As your Subcommittee crafts and considers the FY 2019 Labor-HHS-Education Appropriations Bill, we ask that you provide, at a minimum, **\$996,753,000 for all three nutrition programs authorized under the OAA (Congregate Nutrition Program, Home-Delivered Nutrition Program and the Nutrition Services Incentive Program)**. To demonstrate additional support for this increase, more than 30 of your colleagues signed onto a letter on April 13, 2018, calling for a 12% increase to all OAA programs. Again, we thank you for your leadership and continued support through the appropriations process. We hope our testimony has been instructive and are pleased to offer our assistance and expertise at any time throughout this process.