SPEECH TEXT

CUNFERENCE:

NASUA/N4A JOINT ANNUAL CONFERENCE

SPONSOR:

NATIONAL ASSOCIATION OF STATE UNITS ON AGING

NATIONAL ASSOCIATION OF AREA AGENCIES ON AGING

DATE:

AUGUST 5, 1981

TOPIC:

LINKING AGING INTERESTS: PARTNERSHIPS FOR CHANGE

AM PLEASED TO BE WITH YOU TODAY AS YOU BEGIN THIS IMPORTANT THE THEME YOU HAVE CHOSEN, "LINKING AGING INTERESTS: CONFERENCE • PARTNERSHIPS FOR CHANGE", IS ESPECIALLY APPROPRIATE AS WE EMBARK ON A NEW DECADE. IT RECOGNIZES THAT THE 1980'S WILL BE DIFFERENT THAN THE 1960's when so many new programs were developed for OLDER AMERICANS.

IN ADDRESSING NEW "LINKAGES AND PARTNERSHIPS" YOU HAVE STAKED OUT A FAR-REACHING AGENDA FOR BOTH PRESENT AND FUTURE PUBLIC POLICY ISSUES WHICH EFFECT THE ELDERLY.

WHEN WE CONSIDER THE SOCIAL AND ECONOMIC CLIMATE OF TODAY THE THEME OF THIS CONFERENCE TAKES ON EXTRAORDINARY IMPORTANCE AND UUR NEED TO GO BEYOND THE INTERNAL "AGING NETWORK" RELEVANCY. AND DEVELOP NEW RELATIONSHIPS WITH THE VOLUNTARY, PRIVATE AND CORPORATE SECTOR IS A CONCEPT I HAVE LONG ADVOCATED. THIS IS A MAJOR REASON WHY ${
m I}$ have called for a greater commitment to

(SUPPORT PRIVATE SECTOR ...)

SUPPORT PRIVATE SECTOR INVOLVEMENT UNDER THE SENIOR COMMUNITY SERVICES EMPLOYMENT PROJECT OF THE ULDER AMERICANS ACT. IT IS OUR RESPONSIBILITY, AS INDIVIDUALS CONCERNED WITH THE FUTURE OF SERVICES FOR THE ELDERLY TO SEEK OUT AND FOSTER THESE TYPES OF LINKAGES. THE 1973 AMENDMENTS TO THE ULDER AMERICANS ACT, WHICH CREATED THE AREA AGENCY ON AGING SYSTEM, RECOGNIZED THIS NEED BY REQUIRING THE COORDINATION OF UNTAPPED RESOURCES WITHIN PLANNING AND SERVICE AREAS. THE 1978 AMENDMENTS TO THE OAA STRENGTHENED THAT RESPONSIBILITY. THAT CONCEPT HAS BECOME STILL MORE IMPORTANT TODAY, AND I BELIEVE THAT OUR SUCCESS OR FAILURE IN DEVELOPING SUCH RELATIONSHIPS WILL DETERMINE THE FUTURE EXISTENCE OF OUR CURRENT SYSTEM OF SERVICES.

AS EVIDENCED BY THE RECENT 96-0 SENSE OF THE SENATE VOTE

AGAINST THE PRESIDENT'S ORIGINAL PROPOSAL TO RESTRUCTURE SOCIAL

SECURITY AND DRAMATICALLY REDUCE EARLY RETIREMENT BENEFITS, I

BELIEVE WE HAVE CLEARLY DEMONSTRATED THAT THE SENATE WILL NOT BE

STAMPEDED INTO MAKING UNNECESSARY CUTS IN THE BUDGET WHICH WOULD

ADVERSELY AFFECT THE ELDERLY. HOWEVER, I ALSO BELIEVE WE CAN NO

WILL BE FULLY PROTECTED AGAINST INFLATION, LET ALONE FULLY FUNDED

TO MEET THE GROWING NEEDS OF AN INCREASING SENIOR POPULATION.

FOR THIS -- AND OTHER REASONS, THE CHALLENGES THAT CONFRONT US IN

THE DECADE AHEAD DIFFER FROM THOSE OF THE PAST.

WE MUST LOOK AT <u>INNOVATIVE</u> AND <u>CREATIVE</u> WAYS TO DEAL WITH

CHANGING RESOURCE PATTERNS. AS A NATION, OUR PRINCIPAL FOCUS IN

THE <u>PAST</u> HAS BEEN ON THE <u>NEEDS</u> OF OUR SENIOR CITIZENS -- <u>NOT</u> ON

THEIR ABILITY TO CONTRIBUTE TO OUR SOCIETY.

To MEET THOSE NEEDS, WE PUT IN PLACE MEDICARE, MEDICAID,

TITLE XX, SUPPLEMENTAL SECURITY INCOME AND THE OLDER AMERICANS

ACT PROGRAMS.

I THINK IT <u>IS</u> FAIR TO SAY THAT OVER THE PAST FIFTEEN YEARS WE

HAVE COME CLOSER TO BUILDING A SOCIETY THAT DOES <u>JUSTICE</u> TO ITS

ELDERLY CITIZENS.

BUT WE STILL HAVE A LONG WAY TO GO.

THE GREAT ANTHROPOLIGIST MARGARET MEAD, WHO MADE NEARLY
UNRIVALLED CONTRIBUTIONS TO SOCIETY THROUGHOUT HER LONG LIFE,

ONCE OBSERVED THAT <u>PRIMITIVE</u> SOCIETIES TREAT THEIR AGED WITH <u>MORE</u>

RESPECT AND REVERENCE THAN THE SO-CALLED <u>CIVILIZED</u> SOCIETIES.

IN OUR EAGERNESS TO MEET THE NEEDS OF OLDER AMERICANS, WE

MUST BE SENSITIVE TO THE <u>DANGER</u> THAT AMERICANS WILL COME TO VIEW

OUR OLDER POPULATION AS A <u>BURDEN</u>, RATHER THAN A NATIONAL

RESOURCE. Today, as I sound a keynote for this conference, I

WANT TO WARN AGAINST THAT "BURDEN MENTALITY."

The time has come to recognize our older people as our

GREATEST NATIONAL RESOURCE. AND IT IS ESPECIALLY PRECIOUS

BECAUSE IT IS A HUMAN RESOURCE -- AND ITS POTENTIAL A GROWING

ONE.

IN SETTING FUTURE DIRECTIONS FOR AGING PROGRAMS, WE MUST

CREATE A CLIMATE IN WHICH OLDER PERSONS ARE NOT FORCED INTO

DEPENDENCY, BUT RATHER ARE ASSISTED TO LIVE AS <u>INDEPENDENTLY</u> AS

THEIR <u>POTENTIAL</u> PERMITS.

GOVERNMENT ALONE <u>CANNOT</u> ACCOMPLISH THAT GOAL. THE ROLE OF

THE FAMILY -- AND THE ROLE OF THE PRIVATE SECTOR -- MUST ALSO BE

<u>EQUAL</u> CORNERSTONES IN THE BUILDING OF SUCH AN ENVIRONMENT. AS

CHAIRMAN OF THE SENATE SPECIAL COMMITTEE ON AGING, I CAN REPORT
THAT OUR COMMITTEE HAS BEGUN A CONSIDERABLE AMOUNT OF WORK IN
THIS AREA, AND I WOULD LIKE TO SHARE WITH YOU SOME OF THE ISSUES
WHICH MUST BE ADDRESSED.

A MAJOR CONCERN OF ALL OLDER PEOPLE IS ECONOMIC SECURITY.

One way in which that can be assured is through continued

EMPLOYMENT. WE KNOW THAT HALF OF ALL RETIRED PEOPLE SAY THEY

WOULD PREFER TO WORK IN SOME MANNER, YET THEY ARE BEING DENIED

THAT OPPORTUNITY. While some employers are initiating hiring,

RETRAINING, SECOND CAREER AND JOB RETENTION PROGRAMS FOR OLDER

WORKERS, MANY OTHERS DO NOT PERCEIVE THEM IN SUCH A POSITIVE

LIGHT AND OFTEN PRACTICE, CONSCIOUSLY OR UNCONSCIOUSLY, AGE

To Highlight their special employment needs during "Older Americans Employment Opportunity Week", the Special Committee will be holding the first of a series of hearings during the week of September 6 to explore ways in which greater opportunities can

BE MADE AVAILABLE TO OLDER PEOPLE WHO WANT TO WORK EITHER ON A FULL OR PART-TIME BASIS.

BASED ON THOSE HEARINGS, IT IS OUR INTENTION TO TAKE A CLOSE LOOK AT VARIOUS DISINCENTIVES IN PUBLIC POLICY WHICH DISCOURAGE OLDER PERSONS FROM WORKING, AS WELL AS INCENTIVES WHICH MIGHT ENCOURAGE EMPLOYERS TO RETAIN THEIR OLDER WORKERS. WHERE FEASIBLE, WE WILL BE SUGGESTING AREAS OF LEGISLATIVE CHANGE OR NEW INITIATIVES. THE EARNINGS LIMITATION FOR SOCIAL SECURITY BENEFICIARIES IS BUT ONE AND IN THIS CASE, FAMILIAR EXAMPLE.

THE IMPORTANCE OF WORK IN OUR LIVES CANNOT BE UNDERESTIMATED.

BUCKMINSTER FULLER, WHO JUST TURNED 86, WAS RECENTLY ASKED HOW HE COULD CONTINUE TO BE SO INVENTIVE AND PRODUCTIVE. HIS ANSWER WAS "BECAUSE I HAVE A JOB." WHILE NOT EVERY OLDER PERSON WILL WANT TO, OR CAN CONTINUE TO WORK, THE CHOICE SHOULD BE AVAILABLE.

TURNING TO AN ISSUE AREA WHICH CONCERNS YOU DIRECTLY -- THE OLDER AMERICANS ACT WHICH WILL BE REAUTHORIZED THIS YEAR. OUR COMMITTEE ON AGING HAS BEEN VERY MUCH CONCERNED WITH THE

PROCESS, WE HELD AN OVERSIGHT HEARING IN APRIL OF THIS YEAR.

APPROPRIATE TIME FOR ANY EXTENSIVE REVISION OF THE ACT. WE SHOULD NOT LOSE, HOWEVER, THE OPPORTUNITY TO MAKE THOSE CHANGES WHICH WOULD 1) STREAMLINE AND IMPROVE THE EFFICIENCY OF ITS

PROGRAMS, 2) INCREASE LOCAL FLEXIBILITY TO MEET LOCAL NEEDS, AND

3) INCREASE THE PARTICIPATION OF OLDER PEOPLE IN THE OPERATION OF PROGRAMS INTENDED TO SERVE THEM.

BASED ON THE RESULTS OF OUR HEARING AND MY OWN ASSESSMENT OF
THE ISSUES, I HAVE MADE A NUMBER OF STRONG RECOMMENDATIONS TO

SENATOR DENTON'S SUBCOMMITTEE ON AGING, FAMILY AND HUMAN

SERVICES. I WOULD LIKE TO SHARE SEVERAL OF THESE RECOMMENDATIONS

WITH YOU TODAY.

FIRST, THOSE WHO OPERATE PROGRAMS SHOULD HAVE MAXIMUM

FLEXIBILITY TO SET SERVICE PRIORITIES FOR THE ELDERLY IN THEIR

COMMUNITIES. IT IS INAPPROPRIATE AND UNNECESSARILY RESTRICTIVE

TO SET AT THE FEDERAL LEVEL SPECIFIC BINDING SERVICE GOALS FOR

SPECIFIC SERVICES IN THE LAW IS A <u>CONTRADICTION</u> OF THE ROLE OF

STATES AND AREA AGENCIES ON AGING IN PLANNING, NEEDS ASSESSMENT,

AND SETTING PRIORITIES FOR SERVICES. MY RECOMMENDATION THEREFORE

REQUESTED THE <u>REMOVAL OF THE SO-CALLED PRIORITY SERVICES MANDATE</u>.

SECOND, ALONG THE LINES OF INCREASED FLEXIBILITY, I HAVE

ADVOCATED A TOTAL CONSOLIDATION OF THE SEPARATE AUTHORIZATIONS

UNDER THE TITLE III PROGRAMS. A THOROUGH CONSOLIDATION COULD

IMPROVE COORDINATION IN A SUBSTANTIAL WAY, AND INSURE ACCESS, TO

A MUCH WIDER RANGE OF SERVICES TO OLDER PERSONS. MOST

IMPORTANTLY, IT WOULD PLACE RESPONSIBILITY FOR DETERMINING THE

BEST POSSIBLE WAY TO SERVE THE ELDERLY WITH STATE AND LOCAL

PROGRAM MANAGERS -- WHERE IT BELONGS.

THIRD, I HAVE EXPRESSED CONCERNS ABOUT THE <u>ORGANIZATIONAL</u>

PLACEMENT OF THE ADMINISTRATION OF AGING WITHIN THE DEPARTMENT OF

HEALTH AND HUMAN SERVICES, <u>AND</u> ABOUT THE NEED TO MAINTAIN THE

AUTHORITY OF THE COMMISSIONER ON AGING TO ACHIEVE THE GOALS OF

THE OLDER AMERICANS ACT. A RECENT GAO REPORT SUBMITTED TO OUR

COMMITTEE, REVEALED THAT THE DEPARTMENT OF HHS <u>VIOLATED THE ACT</u>
BY PERMITING GRANT AND CONTRACT ADMINISTRATION AND FINANCIAL
MANAGEMENT FUNCTIONS TO BE PERFORMED BY THE OFFICE OF HUMAN
DEVELOPMENT SERVICES. I HAVE RECOMMENDED TO THE ADMINISTRATION,
AND TO THE COMMITTEE ON LABOR AND HUMAN RESOURCES, THAT EFFORTS
SHOULD BE MADE <u>TO ASSURE</u> THAT THE GOALS, INTENT AND LEGAL
MANDATES OF THE ACT ARE CARRIED OUT BY THE DEPARTMENT.

FOURTH, I HAVE RECOMMENDED THAT IMPROVED EMPLOYMENT

OPPORTUNITIES BE ESTABLISHED FOR THE ELDERLY UNDER TITLES III AND

V. BOTH THE PUBLIC AND PRIVATE SECTOR MUST PROVIDE INCREASED

OPPORTUNITIES FOR OLDER WORKERS WHO ARE WILLING AND ABLE TO

REMAIN IN THE LABOR FORCE. THIS CAN BE DONE THROUGH JOB

COUNSELING, REFERRAL AND PLACEMENT, RETRAINING, JOB DEVELOPMENT,

AND JOB RESTRUCTURING. I BELIEVE IT IS ESSENTIAL THAT THE

PRIVATE SECTOR BE ACTIVELY INVOLVED IN THE TITLE V PROGRAM IF WE

ARE TO CHANGE THE HIRING PRACTICES AND ATTITUDES OF PRIVATE

EMPLOYERS.

FINALLY, WE KNOW THAT THE PROPORTIONS OF OLDER PERSONS WHO ARE ACTUALLY EMPLOYED IN OAA PROGRAMS IS VERY LOW, PARTICULARLY IN MANAGEMENT POSITIONS. THEREFORE, I HAVE RECOMMENDED THAT THE ACT INCLUDE LANGUAGE THAT ENCOURAGES A MUCH MORE AGGRESSIVE POSTURE BY STATES AND AREA AGENCIES TO FILL STAFF POSITIONS WITH OLDER WORKERS.

THE LAST MAJOR ISSUE I WOULD LIKE TO TOUCH ON IS HEALTH CARE.

IT IS ESTIMATED THAT, BY THE YEAR 2025, THE COST OF MEDICARE AND MEDICAID FOR TREATING THE ELDERLY WILL INCREASE TENFOLD -- TWO

TIMES AS FAST AS THE RAPID INCREASE WE ARE SEEING IN SOCIAL

SECURITY. EVEN SO, LET ME NOTE, IT IS EVIDENT THAT FUNDING ALONE HAS NOT ELIMINATED THE WORRY AND CONCERN ABOUT THE COST AND AVAILABILITY OF HEALTH CARE THAT ACCOMPANIES AGING. ALTHOUGH MILLIONS OF OLDER PERSONS HAVE GAINED ACCESS TO MEDICAL CARE

THROUGH THESE PROGRAMS, THERE ARE TODAY STILL MANY UNMET NEEDS.

I BELIEVE THE GREATEST SHORTFALL OF OUR HEALTH CARE PROGRAM
IS ITS FAILURE TO PROVIDE THE ELDERLY WITH ADEQUATE PROTECTION
AGAINST THE CATASTROPHIC COSTS OF NURSING-HOME AND ESSENTIAL

(LONG-TERM CARE SERVICES. ...)

LONG-TERM CARE SERVICES. MEDICARE'S FAILURE TO ADDRESS THE ISSUE OF LONG-TERM CARE ULTIMATELY FORCES TOO MANY ELDERLY INTO INAPPROPRIATE LEVELS OF CARE OR LEAVES THEM STRANDED WITH NO SERVICES AT ALL. I BELIEVE AN IMPORTANT FIRST STEP IN ADDRESSING THE HEALTH CARE NEEDS OF OLDER PERSONS IS LEGISLATION, SUCH AS I RECENTLY INTRODUCED, 1) TO ENCOURAGE COMPETITION AMONG HEALTH CARE PROVIDERS AND INSURERS, AND 2) TO IMPROVE THE QUALITY OF CARE FOR CONSUMERS. BY INTRODUCING GREATER COMPETITION AMONG HEALTH CARE PROVIDERS, WE WILL BEGIN TO HELP CONTAIN HEALTH CARE COSTS AND, AT THE SAME TIME, THE ELDERLY WILL HAVE A MUCH GREATER FREEDOM OF CHOICE IN SELECTING A PLAN TO MEET THEIR NEEDS.

EVEN SO, MONEY IS GOING TO REMAIN A PROBLEM FOR MEDICARE, WHICH LEADS ME TO A SECOND IDEA WORTH CONSIDERING REGARDING THE FINANCING OF THE MEDICARE FUND. LET ME BE MORE SPECIFIC.

OVER THE LAST SEVERAL YEARS, THE U.S. SURGEON GENERAL-AND A BROAD RANGE OF PUBLIC HEALTH GROUPS-HAVE TRIED TO CONVINCE CIGARETTE SMOKERS THAT THEIR HABIT IS UNHEALTHY. LAST YEAR ALONE OVER \$3 BILLION IN MEDICARE AND MEDICAID BILLS RESULTED FROM

TOBACCO RELATED ILLNESSES, SUCH AS LUNG CANCER, HEART DISEASE,
AND RESPIRATORY AILMENTS.

THE QUESTION THEN IS SIMPLY PUT:

WHY SHOULDN'T PEOPLE WHO INSIST ON SMOKING AND WHO FREELY

ACCEPT THE HIGH HEALTH RISKS PAY A GREATER SHARE OF THE COST

SOCIETY INCURS? ONE WAY TO ACCOMPLISH THIS WOULD BE TO INCREASE

THE FEDERAL EXCISE TAX ON CIGARETTES.

AN INCREASE IN THE EXCISE TAX ON CIGARETTES BY 10 CENTS A

PACK WOULD GENERATE APPROXIMATELY \$3 BILLION IN ADDITIONAL

REVENUE-OR ENOUGH TO OFFSET THE DRAIN TO MEDICARE AND MEDICAID OF

DISEASES ATTRIBUTED TO SMOKING. I WOULD LIKE TO KNOW WHETHER

ANYONE BELIEVES IT IS UNWISE OR UNFAIR TO REQUIRE SMOKERS TO PAY

A GREATER SHARE OF SOCIETY'S COST OF INSURING THEM AGAINST THEIR

HIGHER RATE OF ILLNESS. I WOULD ALSO OBSERVE THAT THREE BILLION

DOLLARS CAN GO A LONG WAY TOWARD STRENGTHENING THE ABILLITY OF THE

MEDICARE TRUST FUND TO PAY FOR NECESSARY HEALTH SERVICES TO OLDER

PERSONS. THE ONLY OTHER KNOWN ALTERNATIVES ARE BENEFIT

REDUCTIONS OR OTHER INCREASED TAXES.

(LET ME RETURN TO THE ...)

LET ME RETURN TO THE THEME OF THIS CONFERENCE. IN DISCUSSING

LINKING AGING INTERESTS, ALL OF YOU ARE ONCE AGAIN HELPING TO

PROVIDE THE LEADERSHIP THAT IS NECESSARY IF WE ARE TO STOP

LOOKING AT NEEDS AND PROBLEMS IN A PIECEMEAL WAY, AND DEVELOP A

MORE HOLISTIC APPROACH. TREATING ONE ASPECT OF A PERSON, NO

MATTER WHAT AGE, DOES NOT ALLOW THAT PERSON TO BE VIEWED AS A

WHOLE, UNIQUE INDIVIDUAL. BY PROVIDING GREATER CHOICE FOR THE

ELDERLY THEMSELVES IN MEDICAL CARE, IN EMPLOYMENT OPPORTUNITIES

AND IN THE DETERMINATION OF AND ACCESS TO SERVICES, WE CAN MOVE

BEYOND THIS FRAGMENTED VIEW.

IT IS IN THIS CONTEXT THAT WE MUST SEEK A COORDINATED

APPROACH, WITH THE INVOLVEMENT OF THE FAMILY, THE PUBLIC AND

VOLUNTARY SECTORS, AND THE PRIVATE SECTOR.

MANY OF YOU WHO ARE HERE TODAY WERE IN THE FOREFRONT OF THE BATTLES WAGED -- AND WON -- TO PROVIDE ECONOMIC SECURITY,

IMPROVED HEALTH CARE, AND SERVICES FOR THE ELDERLY. YOU ARE THE PEOPLE WHO DEVELOPED MANY OF OUR EXISTING PROGRAMS AND WHO HAVE GIVEN TIRELESSLY OF YOURSELVES IN THAT EFFORT. YOU HAVE

(FIRSTHAND EXPERIENCE IN ...)

FIRSTHAND EXPERIENCE IN WORKING WITH OLDER PEOPLE IN OUR

COMMUNITIES -- EXPERIENCE WHICH IS ESSENTIAL TO ALL OF US WHO ARE

CONCERNED WITH THE DEVELOPMENT OF PUBLIC POLICY AFFECTING OLDER

AMERICANS. AND WE LOOK TO YOU FOR CONTINUED LEADERSHIP AS WE

ENTER A NEW ERA.

LADIES AND GENTLEMEN, A TIME OF CHALLENGE IS ALSO A TIME OF

OPPORTUNITY -- I BELIEVE WE CAN AND WILL RISE TO THE CHALLENGE

AND FIND NEW AND MORE EFFECTIVE WAYS OF BOTH MEETING THE NEEDS

AND CREATING NEW OPPORTUNITIES FOR OLDER AMERICANS. I LOOK

FORWARD TO WORKING WITH YOU TOWARD THAT GOAL.