The 2016 OAA Act reauthorizes programs for FY 2017 through FY 2019. It includes provisions that aim to protect vulnerable elders by strengthening the Long-Term Care Ombudsman program and elder abuse screening and prevention efforts. It also promotes the delivery of evidence-based programs, such as falls prevention and chronic disease self-management programs.

An overview of key changes follows. (Please note that this summary does not include changes related to the Title V “Community Service Senior Opportunities Act,” which is administered by the U.S. Department of Labor). The italicized citations refer to the section(s) where the highlighted change can be found in the OAA. The official compilation of the OAA of 1965, as amended through P.L. 114-144, can be found here.

Aging and Disability Resource Centers (ADRCs)

- Seeks to improve ADRC coordination with area agencies on aging and other community-based entities in disseminating information regarding available home- and community-based services for individuals who are at risk for, or currently residing in, institutional settings. 102(4); 202(a)(31); 202(b)(8)
- Updates the definition of “Aging and Disability Resource Center” to be consistent with current practice, including an emphasis on independent living and home and community-based services. 102(4)

Authorization Levels

- Sets authorization levels approximately two percent above FY 2016 funding levels for FY 2017; and approximately two percent increases above the previous year for FY 2018 and FY 2019. 216(a)&(b); 303; 311(e); 411(b); 643(1)&(2); 702(a)&(b))

Care Coordination

- Clarifies the Assistant Secretary’s responsibilities to provide technical assistance to, and coordinate sharing of best practices with, states, area agencies on aging, and service providers regarding coordination with health care entities, in order to improve care coordination for individuals with multiple chronic illnesses. 202(a)(31)

Demonstration Authority

- Authorizes the Senior Medicare Patrol (SMP) program in Title IV. 411(a)(13)
- Eliminates three Title IV demonstration programs: Computer Training; Multidisciplinary Centers & Multidisciplinary Systems; and Ombudsman & Advocacy Demonstration Projects. Repeals 415; 419; 421
• Updates definitions of “adult protective services,” “abuse,” “exploitation and financial exploitation,” and “elder justice” to be consistent with the Elder Justice Act. 102(1),(3), (17)&(18)
• Promotes best practices for responding to elder abuse, neglect, and exploitation in long-term care facilities through the Administration on Aging. 201(d)(3)(M)
• Promotes states’ submission of data concerning elder abuse. 102(3)(A); 721(b)(5)
• Directs the Administration on Aging to include, as appropriate, training on elder justice, including abuse prevention and screening, for states, area agencies on aging, and service providers. 202(d)(4)(g)
• Requires area plans to include efforts to increase public awareness of elder abuse, neglect, and exploitation. 306(a)(6)(H)

Funding Formula for Titles III B, C & D
• No state shall be allotted less than: 99% of the allotment for the previous year for each of FY2017-FY2019, or 100% of the FY2019 allotment for FY2020 and each subsequent fiscal year. 304(a)(3)(D)

Health and Economic Needs
• Clarifies the Assistant Secretary’s responsibilities for the development of plans, program implementation, and preparation and dissemination of educational materials on the health and economic needs of older individuals. 202(a)(5)&(7)

Health Promotion and Disease Prevention
• Ensures that, in accordance with current practice, disease prevention and health promotion programs funded under Title III-D are evidence-based. 361(a)
• Adds “oral health” to the Title I definition of Disease Prevention and Health Promotion services. This addition highlights the importance of oral health as an important component of older adult health. 102(a)(14)(B)

Holocaust Survivors
• Directs the Assistant Secretary to develop guidance on serving Holocaust survivors through Older Americans Act programs. Section 10 of the Older Americans Act Reauthorization Act of 2016 (stand-alone provision)

Home Care
• Directs the Assistant Secretary to develop a consumer-friendly tool, when feasible, to assist older individuals and their families in choosing home- and community-based services, with a particular focus on ways for consumers to assess how providers protect the health, safety, welfare, and rights of older individuals. 202(b)(5)(D)

Long-Term Care Ombudsman Program
• Authorizes Long-Term Care (LTC) Ombudsman programs to serve all LTC facility residents, regardless of their age. 711(6)
• Clarifies that the state LTC Ombudsman is responsible for the fiscal management of the Office of the State LTC Ombudsman. 712(a)(2)
• Clarifies that LTC Ombudsman programs may work to resolve complaints on behalf of residents unable to communicate their wishes, including those lacking an authorized representative. 712(a)(3)(A)(i) & (a)(5)(vi)

• Requires state LTC Ombudsmen to ensure that residents have private, unimpeded access to the program. 712(a)(3)(D)

• Requires LTC Ombudsman programs to actively encourage, and assist in the development of, resident and family councils in long-term care facilities. 712(a)(3)(H)(iii) & (a)(5)(vii)

• Authorizes LTC Ombudsman programs to serve residents transitioning from a LTC facility to a home-care setting, when feasible. 712(a)(3)(I)

• Clarifies that the LTC Ombudsman program is considered a “health oversight agency” for purposes of the Health Insurance Portability and Accountability Act (HIPAA). 712(b)(3)

• Applies OAA disclosure provisions to all LTC Ombudsman program information (rather than only “files and records”) and clarifies exceptions for disclosure of information relating to residents unable to communicate their wishes, including those lacking an authorized representative. 712(d)(2)(c)

• Provides specific examples of individual and organizational conflicts of interest, requiring remediation or removal of such conflicts. 712(f)

• Requires that each state LTC Ombudsman or his/her designee participate in training provided by the National Ombudsman Resource Center. 712(h)(4)

• Requires the Director of the Office of Long-Term Care Ombudsman Programs to collect and analyze promising practices related to responding to elder abuse, neglect, and exploitation in long-term care facilities. 201(d)(3)(M)

Mental Health
• Updates and clarifies references of mental health to also include “behavioral health,” as appropriate, to reflect the Aging Network’s current practice of including substance abuse and suicide prevention in these topics. 102(a)(14)(G); 102(a)(36)&(47); 201(f)(1); 202(a)(5); 306(a)(2)(A); 306(a)(6)(F); 321(a)(1)&(8); 321(a)(14)(B); 321(a)(23)

National Family Caregiver Support Program (NFCSP)
• Clarifies current law that older adults caring for adult children with disabilities and older adults raising children under 18 are eligible to participate in the National Family Caregiver Support Program. These new definitions allow the NFCSP to be more inclusive in serving older-relative caregivers, including people who are age 55 or older and parents of individuals with disabilities. 372(a)

• Clarifies that a state may use not more than 10 percent of the total (federal and non-federal share) available to the state to provide support services to older-relative caregivers. 373(g)(2)(C)

Nutrition Services
• Clarifies that, as appropriate, supplemental foods may be part of a home-delivered meal at the option of a nutrition services provider. 336(1)

• Clarifies that a state shall utilize the expertise of a dietician or other individual with equivalent education and training in nutrition science. 339(1)

• Where feasible, encourages the use of locally grown foods in meals programs. 339(2) (L)
**Senior Centers**
- Directs the Assistant Secretary to provide information and technical assistance to support identification of best practices for the modernization of multipurpose senior centers. 202(a)(30)
- Encourages efforts to modernize multipurpose senior centers and promote intergenerational shared-site models in area agency on aging plans. 306(a)(1); 321(b)&(c)

**Supportive Services**
- Clarifies that supportive services funding can be used for referral, chronic condition self-care management, and falls prevention services. 321(a)(1)
- Clarifies that health screening includes mental and behavioral health screening and falls prevention screening to detect or prevent illnesses and injuries that occur most frequently in older individuals. 321(a)(8)

**Transportation Services**
- Directs the Assistant Secretary to provide information and technical assistance to states, area agencies on aging, and service providers on providing efficient, person-centered transportation services, including across geographic boundaries. 202(a)(29)