



Federal Appropriations Committees Advance Budget Bills

Several points of difference exist in the U.S. House and Senate Appropriations Committees Fiscal Year (FY) 2017 federal budget proposals for aging services. These differences will need to be reconciled before funding levels are finalized. While it is likely that the FY 2017 federal budget won't be completed until after the November election, these proposals mark a significant step in the budget process. The items below highlight the key differences between the funding proposals.

Medicare/Medicaid Assistance Program (State Health Insurance Program): Senate eliminates all funding, flat funding in the House. The Senate proposes eliminating funding for the State Health Insurance Program, in Michigan known as the Medicare/Medicaid Assistance Program or MMAP. To learn more about how this funding helps thousands of Medicare and Medicaid beneficiaries in Region 1-B, see the fact sheet on the next page of *The Advocate*.

Senior Community Service Employment Program (SCSEP): Senate cuts, flat funding in the House. The SCSEP is a community service, work-based, job training program for low-income, unemployed seniors. The Senate proposes an 8% cut to this program over FY 16 levels (-\$34 million).

Older Americans Act Supportive Services: No cuts proposed, House proposes increase. Supportive Service funding is used for programs, including in-home services, legal services, and information and assistance, that enable seniors to continue living at home. The House proposed a \$5.3 million (1.5%) increase.

Senior Nutrition Programs: No cuts proposed, House proposes increase of \$13.8 million. The House proposes a \$13.8 million (1.7%) increase in senior nutrition program funding over both FY 16 levels and the Senate's FY 17 proposal, bringing total funding to \$848 million (\$5.8 million increase for congregate meals and \$8.1 million increase for home-delivered meals).

Grants for Native Americans: Senate cuts, House proposes modest increase. Differences proposed in funding for Native American Nutrition, Supportive Services and Caregiver programs. The Senate proposes a \$5 million (13%) reduction while the House seeks to increase funding by \$75,000 (0.2%).

Low-Income Home Energy Assistance Program (LIHEAP): No cuts proposed, House increases. House proposed an increase of \$100 million (3%).

Elder Justice Programs: No cuts proposed, Senate increases. The Senate proposed a \$2 million (20%) increase for Elder Justice Programs, which would raise total funding to \$12 million.

Advocates should reach out to Senator Debbie Stabenow (D) and Senator Gary Peters (D) to ask for flat or increased funding for the State Health Insurance Assistance Program which connects thousands of seniors to appropriate health benefits each year and the Senior Community Service Employment Program which helps low-income older adults through job training and work experience.

Senator Debbie Stabenow (D) Phone: (202) 224-4822

Senator Gary Peters (D) Phone: (202) 224-6221

Protect funding for the

SENIOR HEALTH INSURANCE PROGRAM

We need your support to preserve the nation's State Health Insurance Program (SHIP) by opposing the Senate Appropriations Subcommittee on Labor and Health and Human Services' 2017 budget proposal, which would eliminate all funding for this program.

Michigan's SHIP, called the Medicare Medicaid Assistance Program (MMAP) provides local, in-depth, health insurance counseling and assistance to Medicare and Medicaid beneficiaries, their families, and caregivers.

SHIP IS COST EFFECTIVE

\$233,000
in federal SHIP funding enabled the Area Agency on Aging 1-B's MMAP program to serve

48,922
Medicare and Medicaid beneficiaries in Fiscal Year 2015

138
trained volunteers, along with staff, assisted beneficiaries in the MMAP program

1 in every 10
Medicare beneficiaries living in Region 1-B was served by the Area Agency on Aging 1-B's MMAP program last year

\$44 Million
was saved by beneficiaries who used MMAP to choose better coverage, an average savings of **\$908** per person!

BENEFICIARIES NEED SHIP



-Without assistance from MMAP volunteers, many beneficiaries would be calling paid Medicare staff for support and be served at a much greater cost.



-Eliminating SHIP funding would reduce the personal contact and quality of health insurance counseling, while increasing federal costs.



-Approximately one-third of all referrals to SHIP originate from government sources, including Medicare.