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# Older Americans Act: COVID-19 Response

June 22, 2023

**Congressional Research Service**

<https://crsreports.congress.gov>

R47602



## Older Americans Act: COVID-19 Response

Compared with younger people, older adults have been at higher risk of severe illness due to Coronavirus Disease 2019 (COVID-19), including hospitalization and death. The Older Americans Act (OAA) supports a wide range of social services and programs for older individuals. In response to the COVID-19 pandemic, additional discretionary and mandatory appropriations provided \$1.120 billion in FY2020 funding and \$1.609 billion in FY2021 funding for OAA programs and activities to prevent, prepare for, and respond to COVID-19. These amounts were in addition to the annual OAA funding levels of \$2.145 billion and \$2.179 billion, for FY2020 and FY2021, respectively.

As part of the federal government's response to COVID-19, Congress also enacted legislation to provide new authorities and types of federal assistance to address the pandemic. These provisions define their applicability by reference to COVID-19 pandemic declarations made by the former Secretary of HHS, Alex M. Azar, on January 31, 2020. Secretary Azar determined the pandemic to be a public health emergency (PHE) pursuant to Section 319 of the Public Health Service Act (PHSA). On May 11, 2023, HHS allowed the PHE authority declaration to expire.

Legislation enacted in FY2020 and FY2021 provided additional appropriations, as well as certain policy changes to facilitate administration of OAA services and activities through the Aging Network, which is composed of federal, state, and local entities and service providers. This report summarizes provisions from four COVID-19 response measures:

- the Families First Coronavirus Response Act (FFCRA; P.L. 116-127);
- the Coronavirus Aid, Relief, and Economic Security Act (CARES; P.L. 116-136);
- the Additional Coronavirus Response and Relief, Division N of the Consolidated Appropriations Act, 2021 (P.L. 116-260); and
- the American Rescue Plan Act of 2021 (ARPA; P.L. 117-2).

During the first months of the COVID-19 pandemic, the Aging Network was faced with closures of congregate nutrition sites, where meals are served in group settings, and the need to rapidly expand home-delivered nutrition services to older individuals. COVID-19 relief legislation provided additional funding and OAA statutory flexibilities that allowed the Aging Network to quickly expand delivery of home-delivered nutrition services, as well as to address food shortages through the use of frozen meals, shelf-stable meals, and grocery delivery, among other activities.

In addition to summarizing provisions from the four COVID-19 response measures listed above, this report also summarizes selected Administration for Community Living (ACL) administrative activities regarding implementation of COVID-19 relief legislation and public health emergency and disaster response to COVID-19. The report further describes the Aging Network's response to COVID-19 with respect to administration and implementation of OAA programs and activities.

When the public health emergency for COVID-19 expired on May 11, 2023, the specific OAA legislative flexibilities also expired. Furthermore, with the publication of notice in the *Federal Register* announcing the closure of the incident periods for major disaster declarations under the Stafford Act for COVID-19, state units on aging (SUAs) must begin unwinding disaster relief flexibilities used under the OAA. In March 2020, at the beginning of the COVID-19 pandemic, Congress passed and the President signed legislation to reauthorize the OAA for a five-year period through FY2024. Congress may continue to assess the Aging Network's response to the COVID-19 pandemic and unwinding activities to determine what, if any, OAA program modifications or innovations might be considered with future OAA reauthorizations.

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June 22, 2023

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Compared with younger people, older adults have been at higher risk of severe illness due to Coronavirus Disease 2019 (COVID-19), including hospitalization and death.<sup>1</sup> In response to the COVID-19 pandemic, additional discretionary and mandatory appropriations provided \$1.120 billion in FY2020 funding and \$1.609 billion in FY2021 funding for Older Americans Act (OAA) programs and activities to prevent, prepare for, and respond to COVID-19 (see the **text box** below). These amounts were in addition to the annual OAA funding levels of \$2.145 billion and \$2.179 billion, for FY2020 and FY2021, respectively.<sup>2</sup>

### Older Americans Act: Overview of Current Law

The Older Americans Act (OAA) supports a wide range of social services and programs for older individuals, defined as those aged 60 years or older. These include supportive services, congregate nutrition services (i.e., meals served at group sites such as senior centers, community centers, schools, churches, and senior housing complexes), home-delivered nutrition services, family caregiver support, the long-term care ombudsman program, and services to prevent the abuse, neglect, and exploitation of older persons. The OAA also provides part-time opportunities in community service activities for unemployed low-income individuals aged 55 and older. Except for Title V, Community Service Employment for Older Americans (CSEOA), all programs are administered by the Administration on Aging (AOA) in the Administration for Community Living (ACL) within the Department of Health and Human Services (HHS). Title V is administered by the Department of Labor's (DOL's) Employment and Training Administration. The OAA statutory language contains the following seven titles, which authorize various programs and activities:

- **Title I** sets policy objectives and defines terms.
- **Title II** establishes administrative functions for the executive branch under the AOA.
- **Title III** authorizes grants to states and U.S. territories that in turn fund local entities that provide supportive services, nutrition services (home-delivered and congregate nutrition), disease prevention, and family caregiver services and supports for individuals aged 60 and older.
- **Title IV** authorizes grants for training, research, and demonstration projects in the field of aging.
- **Title V** authorizes grants to states, U.S. territories, and national organizations to promote part-time opportunities in community service activities for unemployed low-income older individuals aged 55 and older.
- **Title VI** authorizes grants to tribal organizations for supportive and nutrition services to older Native Americans.
- **Title VII** authorizes grants to states and U.S. territories for vulnerable elder rights protection activities, including the long-term care ombudsman program.

For more information, see CRS Report R43414, *Older Americans Act: Overview and Funding*.

As part of the federal government's response to COVID-19, legislation was enacted to provide new authorities and types of federal assistance to address the pandemic. With respect to new authorities under the OAA, these provisions define their applicability by reference to COVID-19 pandemic declarations made by the former Secretary of HHS, Alex M. Azar, on January 31, 2020. Secretary Azar determined the pandemic to be a public health emergency (PHE) pursuant to Section 319 of the Public Health Service Act (PHSA). Since that initial issuance, Secretary Azar, and subsequently Secretary Xavier Becerra, renewed this PHE declaration every 90 days.<sup>3</sup> On May 11, 2023, HHS allowed the PHE authority declaration to expire.<sup>4</sup>

<sup>1</sup> Centers for Disease Control and Prevention, *Risk for COVID-19 Infection, Hospitalization, and Death By Age Group*, <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-age.html>.

<sup>2</sup> For more information, see CRS Report R43414, *Older Americans Act: Overview and Funding*.

<sup>3</sup> See HHS Secretary, Xavier Becerra, *Renewal of Determination That a Public Health Emergency Exists* (January 11, 2023), <https://aspr.hhs.gov/legal/PHE/Pages/covid19-11Jan23.aspx>.

<sup>4</sup> HHS, *COVID-19 Public Health Emergency*, <https://www.hhs.gov/coronavirus/covid-19-public-health-emergency/index.html>.

The following sections summarize legislation enacted in FY2020 and FY2021 that provided additional appropriations, as well as certain policy changes to facilitate administration of OAA services and activities through the Aging Network. The Aging Network is composed of the Administration for Community Living (ACL) at the federal level; state agencies, referred to as state units on aging (SUAs); local area agencies on aging (AAAs); and thousands of service providers that receive federal funding under the OAA. Provisions from four COVID-19 response measures are summarized below, as follows:

- the Families First Coronavirus Response Act (FFCRA; P.L. 116-127);
- the Coronavirus Aid, Relief, and Economic Security Act (CARES; P.L. 116-136,);
- the Additional Coronavirus Response and Relief, Division N of the Consolidated Appropriations Act, 2021 (P.L. 116-260); and
- the American Rescue Plan Act of 2021 (ARPA; P.L. 117-2).

For a summary of these additional OAA appropriations for COVID-19 response, according to law and appropriation year, see **Table A-1**.

## Families First Coronavirus Response Act

On March 18, 2020, the President signed the Families First Coronavirus Response Act (FFCRA; P.L. 116-127), which provided a total of \$250.0 million in discretionary supplemental funding for expanded food assistance for OAA nutrition services to states, U.S. territories, and tribal organizations, among other activities. Funding was provided to the Administration for Community Living (ACL) Aging and Disability Services Programs, to remain available until September 30, 2021. Specifically, the FFCRA provided the following amounts:

- \$80.0 million for congregate nutrition services to states and U.S. territories,
- \$160.0 million for home-delivered nutrition services to states and U.S. territories, and
- \$10.0 million for nutrition services to Native Americans.<sup>5</sup>

For these funds, the FFCRA eliminated the 15% state matching requirements that apply to OAA Title III formula grants for supportive services and nutrition services (OAA Sections 304(d)(1)(D) and 309(b)(2)).

## Coronavirus Aid, Relief, and Economic Security (CARES) Act

On March 27, 2020, the President signed the Coronavirus Aid, Relief, and Economic Security Act (CARES; P.L. 116-136), which provided a total of \$870.0 million in discretionary supplemental funding to states, U.S. territories, and tribal organizations for OAA nutrition services, supportive services, family caregiver services, Aging and Disability Resource Centers (ADRCs), and elder rights protection activities. Funding was provided to the Administration for Community Living

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<sup>5</sup> State and tribal organization allocation tables for the Families First Coronavirus Response Act (P.L. 116-127) and CARES Act (P.L. 116-136) are at ACL, *Older Americans Act (OAA)*, <https://acl.gov/about-acl/older-americans-act-ooa>.

(ACL) Aging and Disability Services Programs, to remain available until September 30, 2021. Specifically, the CARES Act provided the following amounts:

- \$480.0 million for nutrition services to states and U.S. territories,<sup>6</sup>
- \$20.0 million for nutrition services to Native Americans,
- \$200.0 million for supportive services,
- \$100.0 million for family caregiver services,
- \$50.0 million for ADRCs, and
- \$20.0 million for elder rights protection activities, including the long-term care ombudsman program.<sup>7</sup>

With respect to the CARES Act supplemental funding, the act provided an SUA the authority to transfer up to 100% of its CARES Act Title III nutrition services funds between the congregate and home-delivered nutrition services programs. For these CARES Act funds, the 15% state matching requirements for OAA Title III formula grants for supportive services and nutrition services did not apply.

In addition to supplemental funding provided under the CARES Act, certain provisions under the act made policy changes to various OAA programs during any portion of the COVID-19 public health emergency declared under Section 319 of the Public Health Service Act (PHSA). These changes were similar to those applied to the CARES Act supplemental funding. However, these provisions also applied to other appropriations measures for the duration of the public health emergency and allowed for additional flexibilities.

Specifically, Section 3222 of the CARES Act provided an SUA or AAA, without prior approval, the authority to transfer up to 100% of its OAA Title III nutrition services funds between the congregate and home-delivered nutrition programs. This 100% transfer authority applied to Title III nutrition services funding regardless of whether the funds were from COVID-19 supplemental acts or from regular annual appropriations acts and extended until the PHE declared by the HHS Secretary ended. Under current law, only SUAs have the authority to establish a process for transferring funding between nutrition programs and are prohibited from delegating transfer authority to AAAs or other entities. Specifically, the OAA authorizes SUAs to transfer up to 40% of allocations between congregate and home-delivered nutrition programs, with approval from the Assistant Secretary for Aging. SUAs may request a waiver from the Assistant Secretary for Aging to transfer an additional 10% of funds between these programs.<sup>8</sup>

Section 3222 of the CARES Act further clarified participant requirements for home-delivered nutrition services to include those unable to obtain nutrition due to social distancing as a result of the emergency. Section 3222 also authorized the Assistant Secretary for Aging to waive certain

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<sup>6</sup> ACL allocated the entire \$480.0 million for nutrition services to states and U.S. territories for home-delivered nutrition. For more information, see “ACL State by State Total for CARES Act Funding,” April 21, 2022, <https://acl.gov/sites/default/files/about-acl/2020-04/ACL%20State%20by%20State%20Tribe%20and%20CIL%20CARES%20Supplemental%20Awards%20Tables%2004.21.20.pdf>.

<sup>7</sup> P.L. 116-136, the Coronavirus Aid, Relief, and Economic Security (CARES) Act, provided \$480.0 million in supplemental funding for OAA Title III nutrition services that ACL allocated to states and territories under their home-delivered nutrition programs and provided \$20.0 million for OAA Title VII services that ACL allocated to the long-term care ombudsman program. State and tribal organization allocation tables for the CARES Act (P.L. 116-136) are at ACL, *Older Americans Act (OAA)*, <https://acl.gov/about-acl/older-americans-act-oaa>.

<sup>8</sup> OAA Section 308(b)(4).

dietary requirements for nutrition services during the COVID-19 public health emergency.<sup>9</sup> Under current law, senior nutrition program meals must meet nutrition requirements established under Dietary Reference Intakes (DRIs) and Dietary Guidelines for Americans (DGAs).<sup>10</sup>

Section 3223 of the CARES Act provided additional authority for the Secretary of Labor with respect to the administration and implementation of OAA Title V, Community Service Employment for Older Americans (CSEOA), due to the effects of the COVID-19 public health emergency declared under PHSA Section 319, if determined appropriate.<sup>11</sup> This additional authority included extending individual program participation beyond 48 months in the aggregate, increasing the average participation cap for eligible individuals that is applied to grantees, and increasing the limit on administrative expenses to 20% of the grant amount.<sup>12</sup>

## Consolidated Appropriations Act, 2021

On December 27, 2020, the President signed the Consolidated Appropriations Act, 2021 (P.L. 116-260). Division N, the Additional Coronavirus Response and Relief, provided a total of \$175.0 million in mandatory supplemental funding for OAA nutrition services to states, U.S. territories, and tribal organizations. Specifically, Section 731 of Division N provided the following amounts:

- \$168.0 million for nutrition services to states and U.S. territories, and
- \$7.0 million for nutrition services to tribal organizations.<sup>13</sup>

Of the \$168.0 million to states and U.S. territories for nutrition services, ACL allocated the entire amount to home-delivered nutrition services.<sup>14</sup> This supplemental funding was to remain available through September 30, 2022.<sup>15</sup>

For the Division N funds, Section 731 eliminated the 15% state matching requirements that usually apply to OAA Title III formula grants for supportive services and nutrition services.

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<sup>9</sup> National Resource Center on Nutrition and Aging, *Understanding Nutrition Requirements During COVID-19 for Senior Nutrition Programs*, updated June 2021, [https://acl.gov/sites/default/files/2021-06/Understanding%20Nutrition%20Requirements%20During%20COVID-19\\_FINAL.docx](https://acl.gov/sites/default/files/2021-06/Understanding%20Nutrition%20Requirements%20During%20COVID-19_FINAL.docx); ACL, *COVID-19 Response: Funding Flexibilities for Senior Nutrition Programs*, updated October 2021, [https://acl.gov/sites/default/files/nutrition/SNP\\_FundingFlexibilities\\_2021OCT.pdf](https://acl.gov/sites/default/files/nutrition/SNP_FundingFlexibilities_2021OCT.pdf).

<sup>10</sup> For further information, see National Academies, *Summary Report of the Dietary Reference Intakes*, <https://www.nationalacademies.org/our-work/summary-report-of-the-dietary-reference-intakes>, and *Dietary Guidelines for Americans*, <https://www.dietaryguidelines.gov>.

<sup>11</sup> For information on the CSEOA program, see CRS Report R45626, *Older Americans Act: Senior Community Service Employment Program*.

<sup>12</sup> For more information on OAA Title V, CSEOA programs, see CRS Report R45626, *Older Americans Act: Senior Community Service Employment Program*; U.S. Department of Labor, Employment and Training Administration, *COVID-19 Frequently Asked Questions*, <https://www.dol.gov/agencies/eta/coronavirus#SCSEP>; U.S. Department of Labor, Employment and Training Administration, *Training and Employment Guidance Letter No. 22-19: Program Year (PY) 2020 Planning Instructions and Allotments for Senior Community Service Employment Program (SCSEP) State, Territory, and National Grantees; and Implementation of SCSEP Provisions of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act)*, May 28, 2020, <https://www.dol.gov/agencies/eta/advisories/training-and-employment-guidance-letter-no-22-19> (this guidance letter is no longer active).

<sup>13</sup> State and tribal organization allocation tables for Consolidated Appropriations Act, 2021, Division N, are at [https://acl.gov/sites/default/files/about-acl/2021-02/Supp%205%20-%20Title%20III%20and%20Title%20VI\\_01292021\\_CM%20Table%20of%20States-Territories-Tribes.pdf](https://acl.gov/sites/default/files/about-acl/2021-02/Supp%205%20-%20Title%20III%20and%20Title%20VI_01292021_CM%20Table%20of%20States-Territories-Tribes.pdf).

<sup>14</sup> Email communication with ACL Budget Director, January 7, 2021.

<sup>15</sup> ACL issued further guidance on OAA funding under P.L. 116-260 on January 28, 2021; see <https://acl.gov/sites/default/files/common/AoA%20-%20Fiscal%20FAQs%20Supplement%205.pdf>.

Section 732 of Division N (P.L. 116-260) further provided that of the Title III-C home-delivered and congregate nutrition services program funds that they received in FY2021, SUAs and AAAs could transfer up to 100% of the funds between the two programs without prior approval.<sup>16</sup> Similar to the CARES Act, Section 732 further clarified participant requirements for home-delivered nutrition services to include those unable to obtain nutrition due to social distancing as a result of the public health emergency and authorized the Assistant Secretary to waive certain dietary requirements for nutrition services.

## American Rescue Plan Act of 2021

On March 12, 2021, the President signed the American Rescue Plan Act of 2021 (ARPA; P.L. 117-2). Title II, Subtitle L, provided a total of \$1.434 billion in mandatory funding for OAA programs, to remain available until expended. Specifically, Section 2921, Supporting Older Americans and their Families, provided the following amounts:

- \$750.0 million to states and U.S. territories for nutrition services;
- \$460.0 million for supportive services, to include COVID-19 vaccination outreach (including transportation) and activities to prevent and mitigate social isolation related to COVID-19;
- \$145.0 million for family caregiver services;
- \$44.0 million for disease prevention;
- \$25.0 million to tribal organizations for nutrition services, supportive services, and family caregiver services; and
- \$10.0 million for the long-term care ombudsman program.<sup>17</sup>

Of the \$750.0 million to states for nutrition services, ACL allocated \$450.0 million to home-delivered nutrition services and \$300.0 million to congregate nutrition services.<sup>18</sup> Of the \$25.0 million to tribal organizations, ACL allocated \$16.7 million to supportive and nutrition services and \$8.3 million to family caregiver services.<sup>19</sup> In contrast to supplemental funding provided under earlier relief acts, ARPA *did not* eliminate the 15% state matching requirements that apply to OAA Title III formula grants for supportive services and nutrition services.

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<sup>16</sup> Ibid.

<sup>17</sup> State allocation tables for ARPA are at <https://acl.gov/sites/default/files/about-acl/2021-05/FY%202021%20ARP%206%20Programs%204-30-21%20Values%20Only%20version%202.pdf>. USAspending.gov, a database of federal awards, lists ACL's tribal ARPA awards at <https://www.usaspending.gov/search/?hash=e85c2f6388842115b24dbe2f99f5d07c>. For background on USAspending.gov, see CRS Report R46491, *Resources for Tracking Federal COVID-19 Spending*.

<sup>18</sup> Email communication with ACL Budget Director, March 15, 2021.

<sup>19</sup> Ibid. Of the Title III-C home-delivered and congregate nutrition services program funds that they received in FY2021, SUAs and AAAs may transfer up to 100% of the funds between the two programs without prior approval, per P.L. 116-260, Division N, Section 732.



# Administration for Community Living (ACL) Activities

The following sections summarize selected ACL administrative activities regarding implementation of COVID-19 relief legislation and public health emergency and disaster response to COVID-19 under OAA programs and activities.<sup>20</sup>

## COVID-19 Relief Funding Allocations

ACL provided additional OAA funding appropriated through COVID-19 relief legislation to states, U.S. territories, and tribal organizations based on the statutory formulas authorized under the OAA. These allocations were based on each state or territory's relative share of the total U.S. population aged 60 years and older (with the exception of the National Family Caregiver Support Program, which was based on the relative share aged 70 years and older). To be eligible for OAA funding, tribal organizations must include at least 50 Native American elders aged 60 or older.<sup>21</sup> States and U.S. territories were required to distribute this additional funding based on each state's or territory's intrastate funding formula, approved by the Assistant Secretary for Aging. This funding formula (1) takes into account the geographical distribution of older individuals in the state or territory; and (2) the distribution among planning and service areas of older individuals with greatest economic need and older individuals with greatest social need, with particular attention to low-income minority older individuals.<sup>22</sup>

## Disaster Relief

In addition to the COVID-19 relief legislation that provided new OAA authorities and expanded administrative flexibilities, as previously described, the OAA also contains authority for disaster relief reimbursement pursuant to an emergency determination under Section 501(b) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act ("Stafford Act"; 42 U.S.C. §§5121-5207). On March 13, 2020, the President declared that the COVID-19 pandemic was of sufficient severity and magnitude to warrant an emergency determination under the Stafford Act, effective nationwide. Under the declaration, states, U.S. territories, and tribes were authorized to consider requests for a declaration of a "major disaster" under Section 401(a) of the Stafford Act. A major disaster declaration under the Stafford Act triggers the disaster relief authority in the OAA, should a state (including a U.S. territory) or tribe (OAA Title VI grantee) request and receive such declaration. Subsequently, President Trump, and later President Biden, issued major disaster

<sup>20</sup> Additional COVID-19 funding was provided to state Long-Term Care Ombudsman Programs and Adult Protective Services Programs under statutory authority for grants authorized under Section 2043(a) of Title XX of the Social Security Act, referred to as the Elder Justice Act. Funding for these programs and activities is outside the scope of this report. Additional information can be found at ACL, *COVID-19 Response: Long-Term Care Ombudsman Programs, Coronavirus Response and Relief Supplemental Appropriations Act of 2021*, February 1, 2021, <https://acl.gov/sites/default/files/common/LTCOP%20Coronavirus%20RR%20Sup%20Aprop%20Act%202-1-21-%20Final.pdf>, and ACL, *COVID-19 Response: Coronavirus Response and Relief Supplemental Appropriations Act of 2021: Grants to Enhance Adult Protective Services to Respond to COVID-19, Frequently Asked Questions*, Updated February 12, 2021, [https://acl.gov/sites/default/files/common/ACL\\_APS\\_Grants\\_FAQ\\_02.11.21.Final\\_.pdf](https://acl.gov/sites/default/files/common/ACL_APS_Grants_FAQ_02.11.21.Final_.pdf).

<sup>21</sup> Tribal organization allocation tables are at ACL, *Older Americans Act (OAA)*, <https://acl.gov/about-acl/older-americans-act-oaa>.

<sup>22</sup> OAA Section 305(a)(2)(C); [42 U.S.C. §3025(a)(2)(C)]; ACL, *COVID-19 Response, Fiscal FAQ COVID-19 Emergency*, <https://acl.gov/sites/default/files/common/AoA%20-%20Fiscal%20FAQs%20Supplement%205%201-28-2021.pdf>; ACL, *COVID-19 FAQ, American Rescue Plan (Fiscal Questions and Answers)*, [https://acl.gov/sites/default/files/2021-05/ARP%20Fiscal%20FAQ\\_4\\_30\\_2021.pdf](https://acl.gov/sites/default/files/2021-05/ARP%20Fiscal%20FAQ_4_30_2021.pdf).

declarations for every state, five territories, the District of Columbia, and three tribes with respect to the pandemic under the Stafford Act.<sup>23</sup>

Specifically, the disaster relief authority under OAA Section 310 (42 U.S.C. §3030) allows states to use any portion of funding made available under any and all sections of the OAA for disaster relief for the delivery of supportive services provided to older individuals.<sup>24</sup> It also provides a very limited ability for states and tribal organizations to receive reimbursements for the delivery of supportive services (and related supplies) during a major disaster declaration, with total payments to all entities not to exceed 2% of the total amount appropriated and available for OAA Title IV (an estimated \$80.7 million in FY2020).

## COVID-19 Response Guidance

According to a review by GAO and interviews with ACL officials, ACL provided guidance, on-line information, and technical assistance to states regarding the use of the COVID-19 funds and approaches to modify services.<sup>25</sup> For example, ACL posted COVID-19 related guidance for OAA grantees and service providers online at ACL, *Coronavirus disease 2019 (COVID-19)*.<sup>26</sup> In addition, ACL held regular calls with states on how to use and report COVID-19 relief funds, provided written responses to frequently asked questions, and served as a forum for information sharing among stakeholders in the form of webinars and other on-line resource sharing.

## Program Reporting Requirements

The OAA requires states to report data annually to the Assistant Secretary about services provided under the act. These reporting requirements are set forth by ACL in annual State Program Reports (SPR). SPRs require states to enter program data in a uniform template that captures specific data fields associated with outcome measures such as the number of clients served, service units provided (e.g., meals or service hours), and expenditures by certain services (e.g., case management or homemaker expenditures). For FY2020, ACL maintained these SPR requirements but asked states to report on their use of the additional COVID-19 funds by including an open-ended “narrative” with their annual SPR.<sup>27</sup>

ACL stated that these additional reporting requirements allowed the agency and states to adopt a simple and flexible reporting method.<sup>28</sup> According to a review of four selected state reports, GAO found inconsistent details provided in the narratives, which made it difficult to compare spending across states.<sup>29</sup> GAO also noted that, after receiving these initial reports for FY2020, ACL took

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<sup>23</sup> For specific presidential declarations for COVID-19, see *COVID-19 Disaster Declarations*, FEMA, <https://web.archive.org/web/20230511110621/https://www.fema.gov/disaster/coronavirus/disaster-declarations>, and *Disasters*, FEMA, <https://www.fema.gov/disasters>.

<sup>24</sup> For further information, see ACL guidance issued March 16, 2020 at <https://acl.gov/sites/default/files/common/OAA%20DISASTER%20RELIEF%20REIMBURSEMENTS-310%203-16-2020.docx>, and ACL guidance issued April 8, 2020, at [https://acl.gov/sites/default/files/common/AoA%20-%20Major%20Disaster%20Declaration%20Fiscal%20FAQ%20FINAL%204-8-2020\\_0.docx](https://acl.gov/sites/default/files/common/AoA%20-%20Major%20Disaster%20Declaration%20Fiscal%20FAQ%20FINAL%204-8-2020_0.docx).

<sup>25</sup> U.S. Government Accountability Office, *COVID-19: Selected States Modified Meal Provision and Other Older Americans Act Services to Prioritize Safety*, GAO-22-104425, December 2021.

<sup>26</sup> ACL, *For the Aging and Disability Networks: COVID-19 Response*, <https://acl.gov/covid19/aging-and-disability-networks> (scroll to “Guidance for ACL Programs”: “Older Americans Act programs”).

<sup>27</sup> U.S. Government Accountability Office, *COVID-19: Selected States Modified Meal Provision and Other Older Americans Act Services to Prioritize Safety*, GAO-22-104425, December 2021.

<sup>28</sup> Ibid.

<sup>29</sup> Ibid.

steps to obtain more consistent and reliable data from states. To gain consistency and assist with funding oversight, ACL developed a template for states to use when reporting additional COVID-19 funding in their FY2021 SPRs. In addition to the annual SPRs, ACL uses other existing oversight processes to track COVID-19 funds, such as financial reports and single audits, according to ACL officials.<sup>30</sup>

## Other Activities

On March 29, 2023, HHS announced a partnership between the Centers for Disease Control and Prevention (CDC) and ACL to provide \$50 million in grants to the Aging Network to assist with increasing vaccinations among older adults and their caregivers.<sup>31</sup> Similar to the additional COVID-19 funding, ACL awarded funds to SUAs based on the statutory formulas authorized under the OAA, and the SUAs distributed this funding to AAAs based on each state's or territory's intrastate funding formula.

## Aging Network Activities

During the COVID-19 pandemic, SUAs and AAAs adapted to public health and safety concerns by modifying nutrition services programs and temporarily suspending other OAA services.<sup>32</sup> For example, due to the health risks for older participants, in-person programming was paused at congregate nutrition sites (i.e., meals served in a group setting), senior centers, adult day health centers, and other in-person services. SUAs and AAAs expanded options for home-delivered nutrition services, as well as telephone and virtual programming, among other activities. COVID-19 relief legislation provided additional funding and OAA statutory flexibilities that allowed the Aging Network to quickly expand delivery of home-delivered nutrition services and address food shortages through use of frozen meals, shelf-stable meals, and grocery delivery. According to a survey of AAAs conducted by USAging in May of 2020, the vast majority of respondents (90%) transitioned congregate nutrition clients to home-delivered nutrition programs (see **Figure 1**).<sup>33</sup>

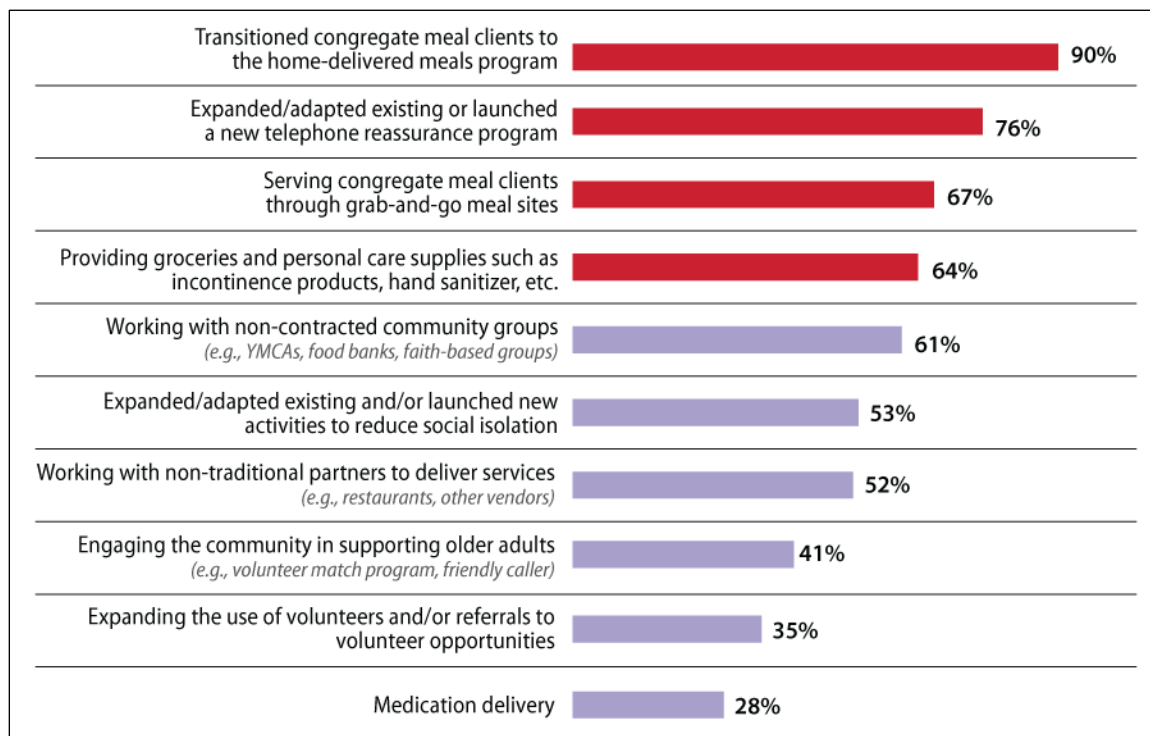
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<sup>30</sup> Ibid.

<sup>31</sup> ACL, *COVID-19 Response: Purpose of Funding*, April 9, 2021, <https://acl.gov/sites/default/files/about-acl/2021-04/CDC%20AoA%20Expanding%20Access%20to%20Vaccines%20FAQ-4-8-21.pdf>.

<sup>32</sup> U.S. Government Accountability Office, *COVID-19: Selected States Modified Meal Provision and Other Older Americans Act Services to Prioritize Safety*, GAO-22-104425, December 2021.

<sup>33</sup> For specific examples of how local AAAs and tribal organizations adapted existing programs and services, or established new programs and services, to continue to provide services to older individuals during the COVID-19 pandemic, see USAging, *Examples from the Field*, at <https://www.usaging.org/covid19fieldexamples>.

**Figure 1. Actions that Area Agencies on Aging (AAAs) Have Taken in Response to COVID-19**

**Source:** USAging (formerly N4A, the National Association of Area Agencies on Aging), #AAAsAtWork for Older Adult: A Snapshot of Area Agency on Aging Responses to COVID-19, July 2020, [https://www.usaging.org/Files/n4a\\_MemberSurveyReport2020\\_Web\\_07July2020.pdf](https://www.usaging.org/Files/n4a_MemberSurveyReport2020_Web_07July2020.pdf).

According to the same survey, more than two-thirds of AAAs (67%) also reported serving congregate nutrition clients through a grab-and-go model of food distribution (see **Figure 1**). Some sites continued to offer congregate meals by pairing grab-and-go meal delivery with virtual socialization or in-person socialization in nontraditional congregate settings such as parks and other outdoor venues. Some service providers expanded their networks by partnering with restaurants to distribute meals to older adults; others established new partnerships with nonprofit organizations that provide emergency food assistance or partner with public housing authorities for service delivery. According to GAO, states reportedly spent more on providing nutrition services because meal costs increased.<sup>34</sup> However, some states and local AAAs were able to use additional funding to enroll new clients.

With the cancellation of in-person activities and the need for personal protective equipment (PPE), more than six in 10 AAAs (64%) reported expanding service delivery to include essential supplies (e.g., medications and hygiene kits) and safety kits with PPE such as masks and sanitizers. More than three-fourths of AAAs (76%) also reported establishing telephone reassurance and wellness check-ins and moved to virtual programming to combat social-isolation. Moreover, the Aging Network was a resource for vaccine education and information to older

<sup>34</sup> U.S. Government Accountability Office, *COVID-19: Selected States Modified Meal Provision and Other Older Americans Act Services to Prioritize Safety*, GAO-22-104425, December 2021.

adults, helping them secure vaccine appointments, providing support services and transportation to vaccine appointments, and hosting clinics at senior centers and other age-friendly locations.<sup>35</sup>

## Concluding Observations

The expiration of the public health emergency for COVID-19, effective May 11, 2023, also ended the specific legislative flexibilities under the OAA for senior nutrition programs. As described above, these flexibilities allowed SUAs and AAAs to transfer up to 100% between OAA nutrition programs, to expand the populations eligible for home-delivered nutrition, and to provide authority for the Assistant Secretary to waive certain dietary requirements for nutrition services. Furthermore, with the publication of notice by FEMA in the *Federal Register* announcing the closure of the incident periods for major disaster declarations under the Stafford Act for COVID-19,<sup>36</sup> SUAs began unwinding disaster relief flexibilities used under the act. According to ACL, SUAs are strongly encouraged to unwind all OAA flexibilities for disaster relief by September 30, 2023.<sup>37</sup>

In March 2020, at the beginning of the COVID-19 pandemic, Congress passed and the President signed legislation to reauthorize the OAA for a five-year period through FY2024.<sup>38</sup> Congress may continue to assess the Aging Network’s response to the COVID-19 pandemic and unwinding activities to determine what, if any, OAA program modifications or innovations might be considered with future OAA reauthorizations. According to GAO, “ACL officials do not believe that states will continue to need the flexibilities after the pandemic eases due to the inherent flexibilities within the OAA, but state, local, and national aging association officials had mixed views on whether the flexibilities would remain helpful in the future.”<sup>39</sup>

For example, under current law, states determine eligibility for home-delivered nutrition services and may waive established requirements—a flexibility that states had prior to the COVID-19 pandemic.<sup>40</sup> In addition, Congress may consider whether current transfer authority for certain program funding is sufficient, whether there are existing barriers to current transfer authority, and whether additional entities should have such authority. Under current law, only SUAs (and not AAAs, as expanded under certain COVID-19 relief measures) have statutory authority to transfer funds between certain programs. Congress may also assess increased demand for OAA nutrition services, particularly home-delivered nutrition services, and whether additional funding may have allowed some programs to serve clients who were waitlisted for services prior to the pandemic. Congress may also consider the circumstances under which dietary requirements could or should be waived, and whether increases in the costs of food may affect service providers’ ability to meet

<sup>35</sup> USAging (formerly N4A, the National Association of Area Agencies on Aging), *Roles of Area Agencies on Aging in the Vaccination of Older Adults*, February 9, 2021, <https://www.usaging.org/Files/AAA%20Roles%20in%20the%20Vaccination%20of%20Older%20Adults%202.9.21%20Final%20to%20Share.pdf>.

<sup>36</sup> Department of Homeland Security, Federal Emergency Management Agency, “Major Disaster Declarations and Related Determinations: Expiration of COVID–19-Related Measures,” 88 *Federal Register* 8884-8886, February 10, 2023.

<sup>37</sup> ACL, *COVID-19 Relief: Unwinding Guidance to State Units on Aging, Older Americans Act Formula Grants – PHE for COVID-19 & MDD for COVID-19*, March 14, 2023, <https://acl.gov/sites/default/files/2023-03/AoA%20-%20Unwinding%20PHE%20and%20MDD%20for%20COVID-19.pdf>.

<sup>38</sup> CRS Report R46439, *Older Americans Act: 2020 Reauthorization*.

<sup>39</sup> U.S. Government Accountability Office, *COVID-19: Selected States Modified Meal Provision and Other Older Americans Act Services to Prioritize Safety*, GAO-22-104425, December 2021.

<sup>40</sup> Administration for Community Living, *Older American’s Act COVID-19 Guidance: Comprehensive Guidance Reference*, July 8, 2020, [https://acl.gov/sites/default/files/common/Posted%20-%20COVID-19%20AoA\\_Guidance%20Collections%20from%20ACL%20website\\_Final\\_07082020.pdf#page=21](https://acl.gov/sites/default/files/common/Posted%20-%20COVID-19%20AoA_Guidance%20Collections%20from%20ACL%20website_Final_07082020.pdf#page=21).

future demand. Such efforts could better inform policymaker's decisions about program funding levels and funding adequacy.

During the course of the pandemic, many Aging Network service providers at the state and local levels expanded partnerships with public health and emergency management entities, as well as emergency food assistance programs and public housing authorities, among others. Such partnerships may continue post-pandemic. These partnerships could provide new types of assistance and service delivery models capable of expanding the reach of services to diverse senior populations. Several stakeholders have pointed to the need for technology services for seniors, both for greater access to the internet and for devices such as tablets and other hardware, as well as one-on-one technology assistance. In addition, issues such as volunteer recruitment and engagement, combatting social isolation and addressing mental health among seniors, and provider support to family or informal caregivers will likely remain key issues affecting the Aging Network and the broader health and well-being of older adults post-pandemic.

Additional discretionary and mandatory appropriations provided through various COVID-19 relief measures provided \$1.120 billion and \$1.609 billion for OAA programs and activities in FY2020 and FY2021, respectively. These amounts were in addition to the annual OAA funding levels of \$2.145 billion for FY2020 and \$2.179 billion for FY2021, and represent a significant increase above annual funding levels. Moreover, by 2040, the population aged 65 and older is projected to increase to 80.8 million (22% of the U.S. population), an increase from 55.6 million (17% of the U.S. population) in 2020. To the extent that the Aging Network was able to use both supplemental and annual funding to enroll new clients, expand existing services, and offer new services, Congress may consider future funding adequacy. For example, federal policymakers could consider the extent to which funding levels for OAA programs and activities are adequate or needed to sustain the expansion and innovation necessitated by COVID-19 in a post pandemic era, as well as the funding implications of keeping up with the potential growth in demand for OAA services due to the increasing number and proportion of older adults in the near future.

## Appendix. COVID-19 Response Funding for Older Americans Act Programs

**Table A-1** shows discretionary and mandatory funding for OAA programs under the following laws that were enacted in response to the COVID-19 pandemic:

- **Families First Coronavirus Response Act**—On March 18, 2020, the President signed the Families First Coronavirus Response Act (FFCRA; P.L. 116-127), which provided a total of \$250 million in discretionary supplemental funding for expanded food assistance for OAA nutrition services to states and tribal organizations, to be made available until September 30, 2021.
- **Coronavirus Aid, Relief, and Economic Security Act**—On March 27, 2020, the President signed the Coronavirus Aid, Relief, and Economic Security Act (CARES; P.L. 116-136), which provided a total of \$870 million in discretionary supplemental funding for OAA nutrition services, supportive services, family caregiver services, Aging and Disability Resource Centers (ADRCs), and elder rights protection activities, to be made available until September 30, 2021.
- **Consolidated Appropriations Act, 2021**—On December 27, 2020, the President signed the Consolidated Appropriations Act, 2021 (P.L. 116-260). Division N provides a total of \$175 million in additional mandatory funding for OAA nutrition services to states and tribal organizations. (No funding deadline or expiration date is specified in the law.)
- **American Rescue Plan Act of 2021**—On March 12, 2021, the President signed American Rescue Plan Act of 2021 (ARPA; P.L. 117-2). Title II, Subtitle L, provides a total of \$1.434 billion in mandatory funding for OAA nutrition services; supportive services, including COVID-19 vaccination outreach (e.g., transportation to vaccination sites) and activities to prevent and mitigate social isolation related to COVID-19; family caregiver services; disease prevention; grants for tribal organizations; and the long-term care ombudsman program, to be made available until expended.

**Table A-1. COVID-19 Additional Funding for Older Americans Act Programs, FY2020-FY2021**

(\$ in millions)

OAA Programs	FY2020 Laws			FY2021 Laws			Total COVID Additional Funding	Total COVID Additional Funding
	P.L. 116-127, FFCRA	P.L. 116-136, CARES Act	Total FY2020 COVID Supplementals	P.L. 116-260, Division N	P.L. 117-2, American Rescue Plan Act	Total FY2021 COVID Additional Funding		
<b>Title II: Administration on Aging</b>	0	\$50.000	\$50.000	0	0	0	\$50.000	
Aging and Disability Resource Centers	0	\$50.000	\$50.000	0	0	0	\$50.000	
<b>Title III: Grants for State and Community Programs on Aging</b>	\$240.000	\$780.000	\$1,020.000	\$168.000	\$1,399.000	\$1,567.000	\$2,587.000	
Supportive services and centers	0	\$200.000	\$200.000	0	\$460.000	\$460.000	\$660.000	
Family caregivers	0	\$100.000	\$100.000	0	\$145.000	\$145.000	\$245.000	
Disease prevention/health promotion	0	0	0	0	\$44.000	\$44.000	\$44.000	
Nutrition services	\$240.000	\$480.000	\$720.000	\$168.000	\$750.000	\$918.000	\$1,638.000	
Congregate meals (nonadd)	\$80.000	0	\$80.000	0	\$300.000 <sup>a</sup>	\$300.000	\$380.000	
Home-delivered meals (nonadd)	\$160.000	\$480.000 <sup>b</sup>	\$640.000	\$168.000 <sup>c</sup>	\$450.000 <sup>a</sup>	\$618.000	\$1,258.000	
<b>Title VI: Grants for Native Americans</b>	\$10.000	\$20.000	\$30.000	\$7.000	\$25.000	\$32.000	\$62.000	
Supportive and nutrition services	\$10.000	\$20.000	\$30.000	\$7.000	\$16.670	\$23.670	\$53.670	
Native American family caregivers	0	0	0	0	\$8.330	\$8.330	\$8.330	
<b>Title VII: Vulnerable Elder Rights Protection Activities</b>	0	\$20.000	\$20.000	0	\$10.000	\$10.000	\$30.000	
Long-term care ombudsman program	0	\$20.000 <sup>d</sup>	\$20.000	0 <sup>e</sup>	\$10.000	\$10.000	\$30.000	
<b>Total Older Americans Act Programs</b>	<b>\$250.000</b>	<b>\$870.000</b>	<b>\$1,120.000</b>	<b>\$175.000</b>	<b>\$1,434.000</b>	<b>\$1,609.000</b>	<b>\$2,729.000</b>	

**Source:** Statutory language and email communication with ACL Budget Director, March 25, 2020; January 7, 2021; and March 15, 2021.



- a. The American Rescue Plan Act of 2021 (APRA; P.L. 117-2) provided \$750.0 million in mandatory additional funding to OAA nutrition services under Title III-C. ACL allocated \$300.0 million to congregate nutrition and \$450.0 million to home-delivered nutrition services programs. However, SUAs and AAAs may transfer up to 100% of the funds received in FY2021 between the two programs without prior approval, per P.L. 116-260, Consolidated Appropriations Act, 2021, Division N, Section 732 (email communication with ACL Budget Director, March 15, 2021).
- b. The Coronavirus Aid, Relief, and Economic Security Act (CARES Act; P.L. 116-136) provided \$480.0 million for OAA nutrition programs under Title III-C, which includes both home-delivered meals and congregate meals programs. ACL allocated the entire amount to the home-delivered meals program, but states were allowed to transfer as much as 100% of the funds they received to the congregate meals program. ACL, *ACL State by State Total for CARES Act Funding*, April 1, 2020, <https://acl.gov/sites/default/files/about-acl/2020-04/ACL%20State%20by%20State%20Tribes%20and%20CIL%20CARES%20Supplemental%20Awards%20Tables%2004.21.20.pdf>.
- c. The Consolidated Appropriations Act, 2021, P.L. 116-260, Division N, provided \$168.0 million to OAA nutrition services under Title III-C. ACL allocated the entire amount to home-delivered nutrition services. However, SUAs and AAAs may transfer up to 100% of the funds received in FY2021 between the two programs without prior approval, per Division N, Section 732 (email communication with ACL Budget Director, January 7, 2021).
- d. The CARES Act (P.L. 116-136) provided \$20.0 million “for elder rights protection activities, including the long-term ombudsman program.” ACL allocated the entire amount to the long-term care ombudsman program. ACL, *ACL State by State Total for CARES Act Funding*, April 1, 2020, <https://acl.gov/sites/default/files/about-acl/2020-04/ACL%20State%20by%20State%20Tribes%20and%20CIL%20CARES%20Supplemental%20Awards%20Tables%2004.21.20.pdf>.
- e. In addition to OAA funding, the Consolidated Appropriations Act, 2021 (P.L. 116-260), Division N, appropriated \$100.0 million for activities authorized by the Elder Justice Act to prevent, prepare for, and respond to coronavirus. ACL announced that \$4.0 million of that amount would be available for “Grants to Enhance Capacity of Long-Term Care Ombudsman Programs to Respond to Complaints of Abuse and Neglect of Residents in Long-Term Care Facilities During the COVID-19 Public Health Emergency,” 86 *Federal Register* 7728, February 1, 2021, <https://www.federalregister.gov/documents/2021/02/01/2021-02092/availability-of-program-application-instructions-for-long-term-care-ombudsman-program-funds>.

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## Acknowledgments

Isobel Sorenson, CRS Research Assistant, provided research assistance for this report.

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