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TESTIMONY OF

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BEFORE THE

**U.S. Senate Special Committee on Aging**

**“Digital TV and the Elderly”**

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Good morning, Chairman Kohl, Ranking Member Smith and other distinguished members of the Committee. Thank you so much for the opportunity to talk with you about the kind of assistance older adults will need with the February 2009 digital conversion of television broadcasts. My name is Sandy Markwood and I am Chief Executive Officer of the National Association of Area Agencies on Aging (n4a), which represents the 650 area agencies on aging, or AAAs as they are known, and 240 Title VI Native American aging programs that serve older adults and caregivers around the country.

As you know, the upcoming digital conversion process has begun to set off alarm bells for organizations and advocates who work with older adults and their caregivers. As we work to get up to speed on the issue, local aging organizations have myriad questions and concerns about how the transition, and the way that it is handled nationally, will affect the older adults we serve. And, if you think we have questions and concerns today, you can imagine the extent of the questions that consumers over age 60 will have about the upcoming conversion. Fortunately, there is still time to improve the digital transition process for older adults if local aging groups are consulted — and engaged — to help educate and assist older adults and their caregivers.

### **Needs of Older Adults**

Current data suggest that older adults are more likely to have older, analog television sets and are less likely to have cable television service. Given other realities that many older adults face, such as physical, financial or transportation limitations, it is safe to say that older adults will be significantly affected by the transition.

Older adults will have greater need for upgrades or converter boxes; may not be familiar or comfortable with the technology involved in the conversion; and will have fewer resources, such as regular internet access, to research the issue. They may face transportation hurdles in securing the devices they need and/or may find the out-of-pocket costs involved to be difficult to manage and in some cases, more than their limited budgets can bear. We have particular concerns about older adults residing in

rural or frontier locations, in nursing homes or assisted living facilities, or those who, because of physical or transportation limitations, are unable to leave their homes easily. And, we need to realize that low-income older adults may not be able to afford the converter boxes, even with a government coupon program.

### **AAAs in the Community**

Established under the Older Americans Act (OAA) in 1973, area agencies on aging offer a host of options to help older adults stay in their homes and communities for as long as possible. While our mission is to ensure that individuals can “age in place” where they want to — at home and in the community — this system also reduces long-term care costs to taxpayers by providing alternatives to more expensive institutional care.

The OAA also helps fund Native American aging programs, known as “Title VI,” to meet the unique needs of older American Indians, Alaska Natives, and Native Hawaiians. There are 650 AAAs and 240 Title VI programs that serve older adults in every community in the nation.

Following leadership at the federal level from the U.S. Administration on Aging and the state level from the State Units on Aging, AAAs leverage public and private funds to help older adults remain active and contributing members of their communities as long as they can. They do this by offering a wide range of services that fall into five broad categories: information and access services, community-based services, in-home services, housing and elder rights. Some AAAs provide direct services and some contract with local providers, but they all customize what they offer to reflect local needs and resources.

For example, older adults and their caregivers turn to their local AAAs:

- to arrange for Meals on Wheels home deliveries or attend congregate meals;
- to assess the need for and provide access to home health and other supportive services;
- to secure transportation to doctor’s appointments and other essential trips;
- to get help in a fraud or elder abuse situation;

- to get information and counseling to enroll in Medicare Part D;
- to access needed information and support for caregivers of the elderly; or
- to learn about and access other home and community-based supports that are available locally.

### **Impact of Digital TV Conversion on Aging Network and the Older Adults We Serve**

The working relationships and partnerships AAAs and Title VI programs have with the other entities in the aging network (U.S. Administration on Aging, State Units on Aging, and local providers) make them a perfect access point for reaching the older adults who will be most affected by the digital television conversion.

AAA staff and their provider partners are on the front lines, working daily with the older adults and caregivers in their area, especially those individuals who are most in need of assistance to continue to live independently (e.g., low-income households, adults aged 85 and older, minority elders, the frail and vulnerable). They are the go-to people for elders with questions and concerns or who are in need of assistance. A homebound 77-year-old widow may rely on her Meals on Wheels volunteer for more than the nutritious meal: it may be her only social contact that day. A van driver for a AAA transportation program interacts with his regular customers as he delivers them safely to doctor's visits. The AAA's case managers work with older adults and their families, assisting them in home modification assessments, arranging home health visits, providing enrollment assistance for Medicare Part D, and accessing a host of other coordination and referral services.

**It is these relationships that older adults and their families come to trust and rely upon. It is these professionals, volunteers and agencies that they will turn to if they cannot understand what they need to do for the February 2009 conversion.**

Imagine just a handful of possible scenarios to better understand how the aging network will be on the front lines of this conversion in less than a year.

- As national public service ads start running more frequently on television and/or radio, older consumers will start asking questions of their providers: at the senior center, at AAA-run health fairs, or of any aging professionals and volunteers they see regularly.
- A homebound senior may get a friend to buy her a converter, but then may ask her Meals on Wheels volunteer for help in setting it up.
- Rural seniors may call the AAA to find out which stores in their area are carrying the converters; additionally, they may need transportation to get to the store.
- A family caregiver living a few states away may call her father's AAA case manager to help her sort out the fact that he bought two "coupons" from someone selling a bogus product door-to-door.
- The AAA's information and referral hotline may light up on February 17, when some clients' televisions go dark and spread anxiety and confusion among an already vulnerable population.
- AAAs and providers may start seeing an increase in problems faced by more isolated elders who did not take the necessary steps to convert their televisions prior to February 17, 2009. Lack of access to emergency information, lack of connection to the outside world, and loss of entertainment, weather and news information could have a dramatic effect on the mental and physical health, as well as the personal safety, of such an older adult.

And while AAAs and their provider partners will surely want to do all they can to assist the older adults in their community with the digital conversion, they will be limited by a lack of information and expertise (e.g., there is currently no training or technical assistance provided to this population of service providers) and a total lack of funding.

The amount of funding provided so far by the federal government for public education on the conversion is woefully inadequate. The \$5 million will probably not cover sufficient public service announcements and media events to reach a majority of seniors, much less answer the questions that result. And, more importantly from our perspective, it is likely to provide nothing for the **implementation work** that surely

awaits the aging network. **Government and private industry must not assume that the aging network, or, for that matter, other nonprofit community groups, can take on this work without new and sufficient resources.** Aging professionals have big hearts but their agencies and programs have very thin wallets and already overworked staffs.

For instance, the Older Americans Act funds a wide array of home and community-based services and is a major source of funding for AAAs, Title VI programs and providers. But most of those funds are directly linked to a specific purpose, such as providing congregate meals, supporting family caregivers, training older workers or preventing elder abuse. These limited dollars are not very flexible, with few increases in OAA appropriations over the past decade. Chairman Kohl, Ranking Member Smith and Senator Lincoln have all been tremendous champions for increased funding for OAA programs, and we are hopeful for some modest increases in FY 2008, but for the most part, it is unreasonable to assume that programs funded under OAA have *any* resources to do outreach, education and one-on-one assistance regarding the digital television conversion. Any dollar spent on the conversion program would directly reduce funding for providing a home-delivered meal, a ride to a doctor's office, respite care for the caregiving spouse of a person with Alzheimer's, or an hour of chore services for a frail elder trying to remain independent in his home.

We have learned some hard lessons from the 2005 implementation of Medicare Part D that we believe are relevant to this conversation. AAAs and Title VI programs did, and continue to do, a lot of heavy lifting to ensure the success of the new prescription drug program, from hosting community education events to sitting down one-on-one with confused Medicare beneficiaries to help them find a suitable plan. Yet only a small number of AAAs/Title VI programs received funding for this work, and even that was very limited. The Centers for Medicare and Medicaid Services (CMS) offered no direct funding to the vast majority of aging network agencies. This put agencies in the very difficult spot as they considered whether to 1) turn people away, which, of course, they

did not do, or 2) divert limited dollars and staff time to deal with the crisis, which is what they did do.

Our agencies cannot do that again without responsible and sufficient financial support.

If the federal government wants to ensure that the digital conversion goes smoothly and doesn't leave behind the most vulnerable Americans, like older adults, minorities, people with disabilities, and low-income families, then it needs to direct resources toward consumer education and assistance to these vulnerable populations.

At the same time, private industry has a tremendous amount vested in a successful conversion. Not all older adults are at risk of falling behind in this conversion — and many industries will benefit from higher-income seniors buying new televisions, upgraded cable service or converter boxes. When the financial gain to industry and the government from this conversion is calculated, the figures are in the billions. So it would seem only fair that those stakeholders provide assistance to the agencies who will be left to deal with the hard work of assisting the most challenging populations during the digital conversion.

### **Policy Recommendations**

With this in mind, n4a recommends the following.

**1) Government and industry must reach out to the aging network and other aging advocates for input into any consumer education campaigns.** To date, n4a has not been approached by any industry group, private company or federal agency on this issue — only Congress has sought our opinion and perspective. Our agencies and their colleagues know the challenges older adults, especially those most likely to encounter obstacles, will face with this digital conversion. We can offer our expertise in developing public service ads, marketing strategies, and acting in advance to prevent older adults' televisions from going dark on February 17, 2009. This testimony has outlined just some of the issues we are concerned about with the transition; we hope it will inform the

relevant federal agencies and industry groups and that they will turn to n4a, our members and other aging network entities for further feedback and assistance.

**2) Government and industry must offer thorough training and technical assistance to any community-based aging organizations expected to assist the public in this conversion.** With the Medicare Part D implementation experience still in the forefront of our minds, we ask that materials be made available to aging professionals that allow them to quickly and easily assist older consumers with basic questions about the conversion. Government and/or industry should establish clear sources of consistent consumer information (web site, toll-free number with trained staff to deal with specific questions of callers, etc.); AAAs could then refer their clients to this one-stop shop. If this does not meet the need of all populations (e.g., language barriers, accessibility issues, not elder-friendly), however, then the aging network will need training and technical assistance support (and the funding to implement it) in order to help older adults and their caregivers get the help they will need.

**3) Adequate and direct funding to AAAs, Title VI and the rest of the aging network to support any and all consumer education and assistance efforts it is assumed or requested that we perform.** Without financial resources, the first two recommendations cannot be implemented, nor can our agencies and partners participate effectively in the conversion campaign to ensure that older adults are not left in the dark.

AAAs and the many partner organizations they could work with on this issue — from aging service providers to volunteers to local businesses — can be a tremendous asset to the success of this digital conversion. With adequate resources, our agencies could develop approaches to reach out and assist the most at-risk older adults, support their caregivers with timely and clear information, and possibly develop innovative ways to assist them one on one.



The modernization of the broadcast spectrum must go forward, but industry and government stakeholders must also ensure that we bring *all* Americans along on the journey. We welcome any and all willing partners in this effort, we commend the Senate Special Aging Committee for focusing on this critical issue, and if we have adequate support, will do everything possible to support a successful conversion process for older Americans.

Thank you for the opportunity to testify before you today. I would be pleased to answer any questions you have today or in the future.