OLDER AMERICANS

HHS Should Apply Leading Practices as It Coordinates Overlapping Programs

Report to Congressional Requesters

January 2025
GAO-25-107020
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GAO Highlights

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January 2025

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HHS Should Apply Leading Practices as It Coordinates Overlapping Programs

Why GAO Did This Study

In fiscal year 2024, OAA-funded services received about $2.4 billion in appropriations. These services exist alongside other federal programs that provide social services for older adults. GAO regularly reports on federal programs with potentially fragmented, overlapping, or duplicative efforts, with the goal of improving the efficiency and effectiveness of government.

GAO was asked to review potential duplication between programs authorized under OAA and federal programs authorized under other laws. This report examines (1) the extent to which duplication, overlap, and fragmentation exist between OAA-funded services and other federal programs for older adults; and (2) the steps agencies have taken to manage any duplication, overlap, and fragmentation between OAA-funded services and non-OAA programs.

GAO identified comparable federal programs based on data from the Assistance Listings on SAM.gov and analyzed information collected from the administering agencies to determine the extent of overlap, if any. GAO also spoke to a nonrepresentative selection of seven stakeholder organizations, reviewed relevant policies and documentation, and interviewed agency officials.

What GAO Recommends

GAO is recommending that the Secretary of HHS ensure ACL develop a written plan for its work with the Coordinating Committee that incorporates leading practices on interagency collaboration. HHS agreed and said it will create a plan with input from the Coordinating Committee.

What GAO Found

Services funded under the Older Americans Act of 1965 (OAA), as amended, overlap with 36 other federal programs but do not duplicate the social services and assistance they provide to older adults, according to GAO's analysis. GAO found that these programs differ in the population served, goals and services provided, or both. The overlapping programs can complement OAA-funded services, for example by providing more specialized services relevant to an agency's expertise. The areas of need served by these programs include health, nutrition, transportation, and employment. Nine departments and agencies administer the 36 non-OAA programs, which indicates there is fragmentation of services for older adults.

The Department of Health and Human Services (HHS), Administration for Community Living (ACL), which administers most OAA programs, is taking steps to manage fragmentation by coordinating with other federal agencies that serve older adults. Coordination among federal agencies can enhance complementary efforts and

mitigate potential negative effects of fragmentation. ACL acts as the lead agency of the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities (Coordinating Committee), which began work in 2023 after receiving initial funding. The Coordinating Committee is composed of 18 federal agencies—including the Departments of Agriculture, Labor, Transportation, and Housing and Urban Development—which have taken initial steps to work together to avoid duplicative work and leverage resources (see figure). For example, in May 2024 the Coordinating Committee published a strategic framework as a basis to develop a national set of recommendations to advance healthy aging and age-friendly communities for older adults. The Coordinating Committee is in the process of further developing strategic goals, in part, by hosting listening sessions that include older adults. GAO has identified leading practices for effective interagency collaboration, including defining common outcomes and ensuring accountability, which could inform ACL's work with the Coordinating Committee. Incorporating these practices could increase the effectiveness of the coordination in managing fragmentation of services.

Key Milestones of the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities

Source: GAO analysis of Administration for Community Living information. | GAO-25-107020

Accessible Data for Key Milestones of the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities

Date	Event
March 2020	The Committee on Aging is revised into the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities (Coordinating Committee).
2023	The Coordinating Committee began work after receiving initial funding in fiscal year 2023.
May 2024	The Coordinating Committee released its strategic framework.
May–Sept. 2024	The Coordinating Committee hosted listening sessions across the nation.
TBD	The Coordinating Committee's ongoing work may involve a White House Conference on Aging in 2025.

Source: GAO analysis of Administration for Community Living information. | GAO-25-107020

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Abbreviations	Definition
ACL	Administration for Community Living
CDC	Centers for Disease Control and Prevention
Coordinating Committee	Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities
DOL	Department of Labor
ETA	Employment and Training Administration
FY	fiscal year
HHS	Department of Health and Human Services
HUD	Department of Housing and Urban Development
OAA	Older Americans Act of 1965
SCSEP	Senior Community Service Employment Program
USDA	U.S. Department of Agriculture

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U.S. GOVERNMENT ACCOUNTABILITY OFFICE
441 G St. N.W.
Washington, DC 20548

January 8, 2025

The Honorable Bill Cassidy, M.D.
Chairman
Committee on Health, Education, Labor, and Pensions
United States Senate

The Honorable Mike Lee
United States Senate

As of 2022 there were approximately 78.9 million Americans aged 60 and older, an increase of 29 percent over 2012, according to the Administration for Community Living (ACL). Many older adults are likely to need services and support as they age, such as nutrition assistance, community programs, and help in their homes. Demand for these services will continue to grow rapidly over the next 30 years as the U.S. population continues to age. Federal support for this population includes services funded under the Older Americans Act of 1965 (OAA), as amended. For example, OAA authorizes funding to states to support delivering food to older adults' homes, serving meals at group sites such as senior centers, and providing transportation to medical appointments.

The Department of Health and Human Services (HHS) administers most of the OAA funding through ACL. OAA-funded services received a total $2.372 billion in appropriated funding for fiscal year 2024. OAA services exist alongside other federal programs that may provide social services specifically for older adults as well as programs that provide services to a broader population including older adults.

We regularly report on federal programs with potentially fragmented, overlapping, or duplicative efforts, with the goal of improving the efficiency and effectiveness of government. For example, in 2022 we found that agencies should manage fragmentation through better information sharing among nine overlapping programs aimed at preventing falls among older adults and adults with disabilities.[1]

You asked us to review potential duplication between OAA-authorized programs and federal programs authorized under other laws. This report examines (1) the extent to which duplication, overlap, and fragmentation exist between OAA-funded services and other federal programs for older adults; and (2) the steps agencies have taken to manage any duplication, overlap, and fragmentation between OAA-funded services and non-OAA programs.

To address our first objective, we inventoried potentially duplicative or overlapping programs and compared them to the characteristics of OAA-funded services. We initially identified non-OAA programs for the inventory by searching program objectives in the Assistance Listings on SAM.gov for federal programs that specifically support older adults as of November 2023, which was the most current data at the time we conducted our

[1]GAO, *Older Adults and Adults with Disabilities: Federal Programs Provide Support for Preventing Falls, but Program Reach is Limited*, GAO-22-105276 (Washington, D.C.: July 27, 2022). Also see our most recent annual report on duplication, overlap, and fragmentation in the federal government: GAO, *2024 Annual Report: Additional Opportunities to Reduce Fragmentation, Overlap, and Duplication and Achieve Billions of Dollars in Financial Benefits*, GAO-24-106915 (Washington, D.C.: May 15, 2024).

search.[2] To focus on potential duplication or overlap, we excluded from our analysis certain programs serving older adults that we considered not comparable to OAA-funded services. Specifically, we excluded from our analysis large contributory programs (such as Social Security and Medicare); broad income-based programs (such as Medicaid and Section 8 Housing Choice Vouchers); and certain employment programs for individuals over 55 requiring specialized skills. We assessed the reliability of the SAM.gov data by reviewing related documentation and previous reports using those data and by speaking to knowledgeable officials. We determined that the data are sufficiently reliable for the purposes of our audit objectives.

We collected additional data on these programs from the administering agencies using a standardized set of questions. This included asking agencies to identify any additional programs they administer that provide services to older adults, which we then incorporated into our final inventory.[3] For more information on our inventory of non-OAA programs for older adults, see appendix I. For comparison, we also collected comparable data on OAA-funded services from ACL and the Department of Labor's (DOL) Employment and Training Administration (ETA).[4]

We used these data to compare each non-OAA program with the characteristics of OAA-funded services using our duplication, overlap, and fragmentation framework.[5] Specifically, we compared the specific population served by the non-OAA program with the population eligible for OAA-funded services and compared the goals and services provided by the non-OAA program with those funded under OAA. In instances where programs have identical target populations, goals, and services to OAA-funded services, we would label this duplication. In instances where programs have target populations, goals, or services that are similar but not identical to the OAA-funded services, we would label this overlap. We also considered whether there were overlapping programs across different agencies, in which case we would say there is overall fragmentation of services for older adults.

To address our second objective, we identified the steps ACL was taking to coordinate with other agencies providing services to older adults. Specifically, we asked the agencies administering the non-OAA programs in our inventory about their coordination with ACL and other agencies, and reviewed those responses. We reviewed documents from ACL and from the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities (Coordinating Committee). We also reviewed leading practices for enhancing

[2]The General Services Administration manages SAM.gov, which is a source of information on working with the federal government. The Assistance Listings on SAM.gov are detailed descriptions of federal programs that provide grants, loans, and other types of financial assistance. During the time of our analysis, the Office of Management and Budget published an inventory of federal programs. The inventory defined a "program" as a federal financial assistance listing and used existing data from SAM.gov to identify these programs. The new inventory does not yet include all federal programs or required information. See GAO, *Federal Programs: OMB Needs a Structure to Govern and a Plan to Develop a Comprehensive Inventory*, GAO-24-107656 (Washington, D.C.: Sept. 25, 2024).

[3]We did not independently verify the information provided by the agencies or conduct a legal analysis to confirm the descriptions of the programs included in this report.

[4]ETA administers one program under Title V of OAA.

[5]GAO, *Fragmentation, Overlap, and Duplication: An Evaluation and Management Guide*, GAO-15-49SP (Washington, D.C.: Apr. 14, 2015).

interagency collaboration and federal standards for internal control, specifically, the attribute that management should document responsibilities through policies.[6]

To address both objectives, we interviewed knowledgeable officials from ACL and ETA. We also spoke to a nongeneralizable selection of seven national stakeholder groups.[7] We selected these groups to reflect a range of experience with providing OAA-funded services, including the perspectives of state and local government, and expertise on related policy issues.

We conducted this performance audit from August 2023 to January 2025 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Background

OAA Structure and Funding

OAA authorizes funding for a wide range of health and health-related social services for older adults, which OAA generally defines as those 60 years old and older.[8] This includes supportive services such as personal care, chore services, and transportation; congregate nutrition services (i.e., meals served at group sites such as senior centers); home-delivered nutrition services; family caregiver support; and services to prevent the abuse, neglect, and exploitation of older adults.

OAA is divided into seven titles. ACL administers all titles except Title V.[9] Titles I and II set out broad policy objectives and the responsibilities of federal officials, while the other titles authorize funding for specific purposes. Figure 1 shows the distribution of fiscal year 2024 OAA appropriations by title, according to analysis from the Congressional Research Service.[10]

[6]GAO, *Government Performance Management: Leading Practices to Enhance Interagency Collaboration and Address Crosscutting Challenges*, GAO-23-105520 (Washington, D.C.: May 24, 2023) and *Standards for Internal Control in the Federal Government*, GAO-14-704G (Washington, D.C.: Sept. 2014).

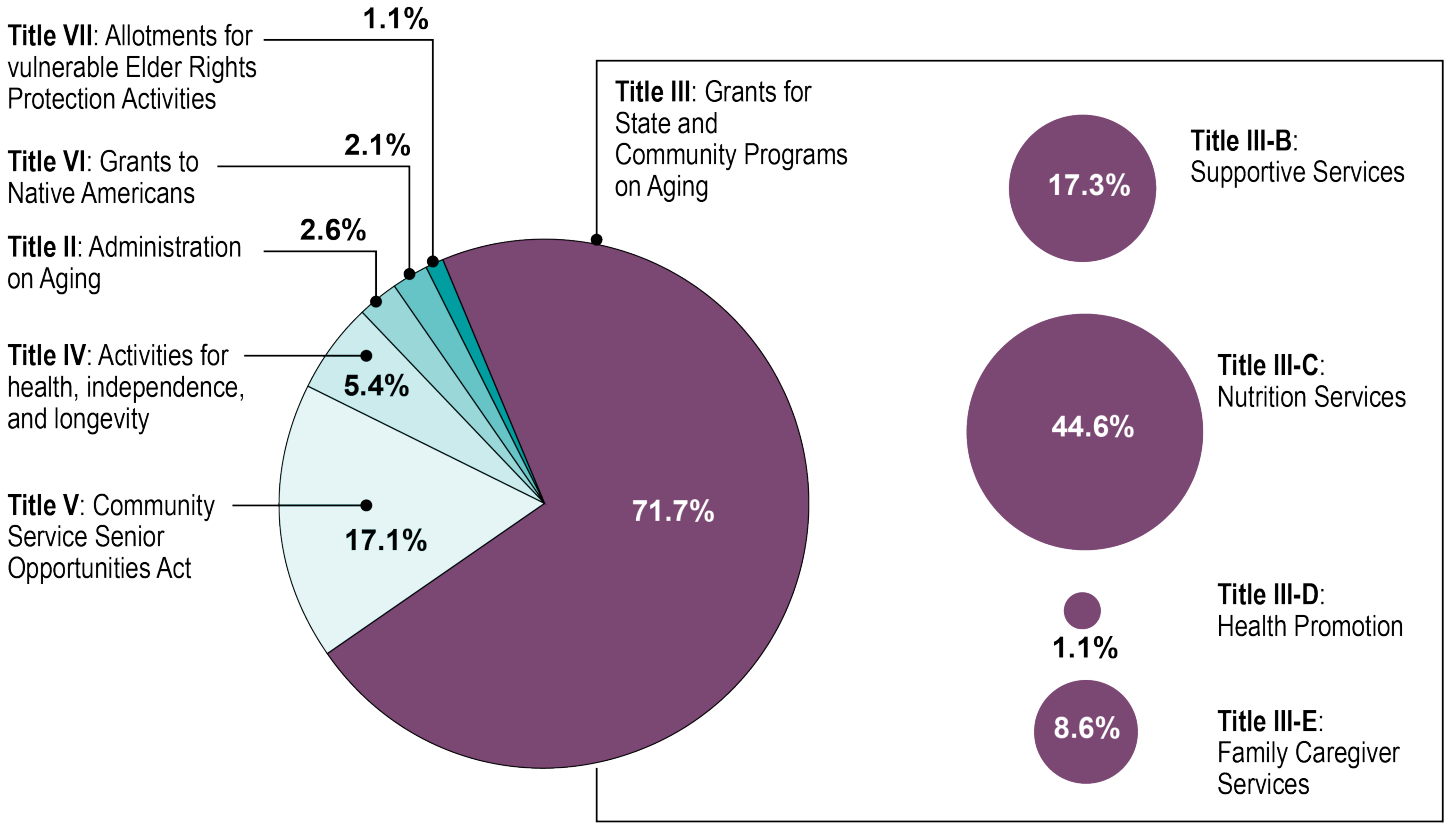
[7]Specifically, we spoke to representatives of AARP, the AARP Foundation, ADvancing States (which represents state aging and disability agencies), Meals on Wheels America, the National Association of Nutrition and Aging Services Providers, the National Council on Aging, and USAging (which represents Area Agencies on Aging).

[8]OAA uses the term older individual for those 60 and older. To avoid confusion, in this report we use older adults to refer to the general population served by OAA and other similar federal programs that might use a different definition. OAA also authorizes support for family caregivers of older adults, who may themselves be younger.

[9]OAA establishes the Administration on Aging, which is a component of ACL alongside the Administration on Disabilities and other offices. It is headed by the Assistant Secretary for Aging, who also serves as Administrator of ACL. However, in this report we attribute agency actions to ACL rather than the Administration on Aging, consistent with agency practice. Title V deals with employment support for older adults and is administered by ETA rather than ACL.

[10]K.J. Colello and A. Napili, *Older Americans Act: Overview and Funding*, CRS Report R43414 (Washington, D.C.: Congressional Research Service, May 6, 2024).

Figure 1: Components of the Older Americans Act of 1965, as amended, by Share of Total Fiscal Year 2024 Appropriations



Source: Congressional Research Service. | GAO-25-107020

Accessible Data for Figure 1: Components of the Older Americans Act of 1965, as amended, by Share of Total Fiscal Year 2024 Appropriations

Category	Percentage
Title VII: Allotments for vulnerable Elder Rights Protection Activities	1.1%
Title VI: Grants to Native Americans	2.1%
Title II: Administration on Aging	2.6%
Title IV: Activities for health, independence, and longevity	5.4%
Title V: Community Service Senior Opportunities Act	17.1%
Title III: Grants for State and Community Programs on Aging	71.7%
• Title III-B: Supportive Services	• 17.3%
• Title III-C: Nutrition Services	• 44.6%
• Title III-D: Health Promotion	• 1.1%
• Title III-E: Family Caregiver Services	• 8.6%

Source: Congressional Research Service. | GAO-25-107020

The majority of OAA funding is authorized by Title III, which authorizes grants to states for supportive services, nutrition services, disease prevention and health promotion services, and family caregiver support. States receive allotments of Title III funding according to a statutory funding formula based on a state's share of older

adults. States send their Title III funds to local entities called Area Agencies on Aging that provide services directly or through local service providers.

Separately, ETA administers Title V, which authorizes the Senior Community Service Employment Program (SCSEP). This program helps low-income, unemployed adults aged 55 and older find part-time community service jobs and prepares participating older adults for unsubsidized employment. SCSEP includes formula grants to states and territories as well as competitive grants to national organizations.

Duplication, Overlap, and Fragmentation

Since 2010, we have been required to report anually on duplicative programs in the federal government, and in 2015 we developed an evaluation and management guide for this area.[11] This body of work uses three key concepts:

- Duplication occurs when two or more agencies or programs engage in the same activities or provide the same services to the same beneficiaries.
- Overlap occurs when multiple agencies or programs have similar goals, engage in similar activities or strategies to achieve them, or target similar beneficiaries.
- Fragmentation refers to those circumstances in which more than one federal agency (or more than one organization within an agency) is involved in the same broad area of national need.

These concepts are related and can occur in combination across programs. For example, fragmentation exists when multiple agencies are involved in the same area, and a subset of the programs could be overlapping or duplicative depending on how similar the programs are to each other. Duplication, overlap, and fragmentation among programs is not necessarily problematic. In some cases, it may be appropriate or beneficial for multiple agencies or entities to be involved in the same programmatic or policy area due to the complex nature or magnitude of the federal effort.

OAA-Funded Services and Non-OAA Programs Support Older Adults through Overlapping Services That Can Be Complementary

Our analysis of an inventory of 36 non-OAA programs found that they are fragmented across nine departments and agencies, and that they all overlap with OAA-funded services to varying degrees. They do not duplicate OAA-funded services, however, because each program differs from OAA in the population served, its goals and services, or both.[12] We also found that some overlapping programs complement OAA programs, such as by helping ensure needs are met when resources are limited or by providing more specialized services to meet the needs of older adults.

Consistent with our assessment, most stakeholders we spoke to, as well as ACL officials, said that non-OAA programs do not duplicate OAA-funded services and are complementary. Specifically, all seven stakeholder

[11]GAO-15-49SP.

[12]To focus on potential overlap, we excluded from our analysis certain programs serving older adults that we considered not comparable with OAA-authorized programs, such as the large contributory programs Social Security and Medicare.

groups we spoke to said that there is no duplication of OAA programs that they are aware of, and six of seven said OAA and non-OAA programs can be complementary. Five of seven stakeholder groups also said that OAA funding is limited compared to the need, meaning that not all older adults are able to participate in every program for which they are eligible. The existence of multiple programs may increase the likelihood that an individual will receive at least some assistance.[13] In addition, ACL officials said that OAA-funded services do not duplicate other programs for older adults. They also said that OAA grantees are required to use the funds to supplement rather than replace other federal funding, which they said leads agencies to complement rather than duplicate efforts.

According to our analysis, all 36 non-OAA programs overlap to some extent with OAA-funded services in terms of the population served because they share OAA's goal of serving older adults. There is partial overlap of the population served in a subset of cases:

- Some non-OAA programs serve older adults alongside another population in need. For example, programs related to transportation access support older adults as well as adults with disabilities.
- Some non-OAA programs define the population of older adults differently. For example, ACL reported that its Medicare Enrollment Assistance Program serves individuals 65 and older—matching the general age for Medicare eligibility—whereas OAA-funded services generally serve adults 60 and older.
- Some non-OAA programs serve older adults as a subset of much broader populations. For example, HHS's Social Services Block Grant and the U.S. Department of Agriculture's (USDA) Food Distribution Program on Indian Reservations can directly support older adults though they are available to much broader populations.[14]

We also found that 31 of 36 non-OAA programs we analyzed overlap with OAA in terms of the goals and services provided.[15] These overlapping programs can be complementary with OAA and serve various areas of need among older adults, including health and nutrition, housing and transportation, employment and community service, and elder justice and finance. (For more information on our inventory of programs that overlap the goals and services of OAA programs in different areas of need, see app. I.)

Health and nutrition. OAA-funded services overlap with 12 other federal programs related to health and nutrition assistance for older adults, according to our analysis. ACL or another component of HHS administers

[13]OAA-funded services are not entitlements. We recently reported on unmet needs among older adults based on 2020 and 2021 data. See GAO, *Older Americans Act: Updated Information on Unmet Need for Services*, GAO-24-107513 (Washington, D.C.: May 17, 2024).

[14]We included these programs in our review because they can fund services at the local level that are aimed directly at older adults. We excluded from our analysis large contributory programs (such as Social Security and Medicare); broad income-based programs (such as Medicaid and Section 8 Housing Choice Vouchers); and certain employment programs for individuals over 55 requiring specialized skills.

[15]The remaining five of 36 programs that do not overlap in terms of objectives and services support older adults very differently from OAA programs. For example, the Department of Housing and Urban Development (HUD) has two programs that support older adults in the housing finance market: Home Equity Conversion Mortgages for Seniors and Section 231 Mortgage Insurance for Rental Housing for the Elderly.

six of these programs, while USDA administers five programs, and the Department of Justice administers one.[16]

The seven overlapping health-related programs include a wide range of services and generally complement each other, according to ACL officials and stakeholders. For example, the National Institute on Aging (part of HHS's National Institutes of Health) conducts research on aging-related health issues, and the Centers for Disease Control and Prevention (CDC) supports broad public health efforts, both of which can inform OAA health promotion activities. Six of the seven stakeholder groups we spoke to also said that overlap between OAA-funded services and health programs can be particularly beneficial. For example, stakeholders said that OAA was an important part of the COVID-19 vaccination effort. OAA-funded Area Agencies on Aging complemented the public health work of CDC because they had existing community partnerships and resources that were needed to get the vaccines to older adults.

The five USDA programs provide older adults with nutrition assistance through food packages and vouchers, among other means, while OAA funds home-delivered and congregate meals. Both USDA and OAA-funded providers offer nutrition assistance. However, they can complement each other by serving adults in different circumstances and helping to ensure needs are met.

Housing and transportation. OAA-funded services overlap with eight federal programs related to housing and transportation for older adults, according to our analysis. The Department of Housing and Urban Development (HUD) administers four housing programs, and the Department of Transportation's Federal Transit Administration administers four transportation programs.

The overlapping housing programs are distinct and designed in some ways to support each other. For example, ACL officials said that OAA-funded service providers can offer information about housing to older adults, while HUD provides direct housing support. The four HUD programs focus on direct housing support as well as assistance for those already in public housing. Two of these programs connect older public housing residents with supportive services, which may include OAA-funded services to meet residents' nonhousing needs.

OAA and Department of Transportation programs aim to enhance mobility for older adults, focusing on different kinds of transportation. For example, OAA-funded providers can offer rides to appointments and grocery stores. By contrast, the four Federal Transit Administration programs focus on improving older adults' access to transportation services more broadly, including access to public transit systems.

Employment and community service. SCSEP—the employment component of OAA that is administered by ETA—overlaps with six other federal programs related to employment and community service opportunities for older adults, according to our analysis. AmeriCorps administers four of these programs, and the Environmental Protection Agency administers the other two.

These programs all subsidize work or volunteer opportunities for individuals 55 and older but they differ in their specific goals and can complement each other by serving different groups of older adults. For example, ETA officials said SCSEP is intended in part to help participants develop basic career skills and be able to find

[16]The health-related Department of Justice program is the Kevin and Avonte Program, which aims to reduce the number of deaths and injuries among individuals with dementia, among others, by funding local agencies to use technology to locate such individuals if they wander from safe areas.

unsubsidized employment. By contrast, the Environmental Protection Agency programs support employment in environmental fields for older adults who already have specialized skills.

Elder justice and finance. OAA-funded services overlap with three programs related to elder justice and financial issues, according to our analysis. HHS, the Department of Justice, and the Internal Revenue Service each administer one of these programs.

Non-OAA financial and elder justice programs generally focus on specific needs for older adults. For example, the Internal Revenue Service program provides the specific service of free tax preparation for older adults, while OAA Title VII funding is available to promote financial literacy more broadly to help prevent exploitation of older adults.

Multiple areas of need. Finally, OAA-funded services overlap with two programs administered by HHS and the Department of Education serving multiple areas of need. HHS's Social Services Block Grant allows states and grantees to determine how to use its funding. They may use grant funds to complement OAA funding where there are areas of particular need, for example by helping home-delivered meal programs reach more people. Also, the Department of Education has a program that offers a wide range of services to support independent living—as with OAA—but is specific to the needs of older adults who are blind.

ACL and Federal Partners Have Begun Coordinating Services for Older Adults Using Leading Practices

ACL is taking steps to coordinate with other federal agencies that serve older adults, including the agencies administering programs that overlap with OAA-funded services. Specifically, ACL coordinates with these and other agencies through three different mechanisms: an interagency coordinating committee, formal workgroups, and other partnerships. This coordination among federal agencies can enhance complementary efforts and mitigate potential negative effects of fragmentation. As we have previously reported, coordination among agencies can help ensure that they benefit from fragmentation, by, for example, focusing resources on specific aspects of a goal or bringing specific expertise to a topic, while mitigating the risks associated with fragmentation, such as working at cross-purposes or wastefully duplicating efforts.[17]

[17]Our prior work shows that coordination between agencies can produce more public value than could be produced when organizations act alone. GAO-23-105520. We did not assess agencies' efforts against leading practices because they are still in the early stages of developing a national plan on aging.

Federal Partners of the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities

- Department of Health and Human Services
  - Administration for Community Living
  - Agency for Healthcare Research and Quality
  - Centers for Disease Control and Prevention
  - Centers for Medicare and Medicaid Services
  - Health Resources and Services Administration
  - National Institutes of Health
  - Office of the Assistant Secretary for Health
  - Office of the Assistant Secretary for Planning and Evaluation
  - Substance Abuse and Mental Health Services Administration
- AmeriCorps Seniors
- Consumer Financial Protection Bureau
- Department of Agriculture
- Department of Education
- Department of Housing and Urban Development
- Department of Labor
- Department of Transportation
- Department of Veteran Affairs
- Social Security Administration

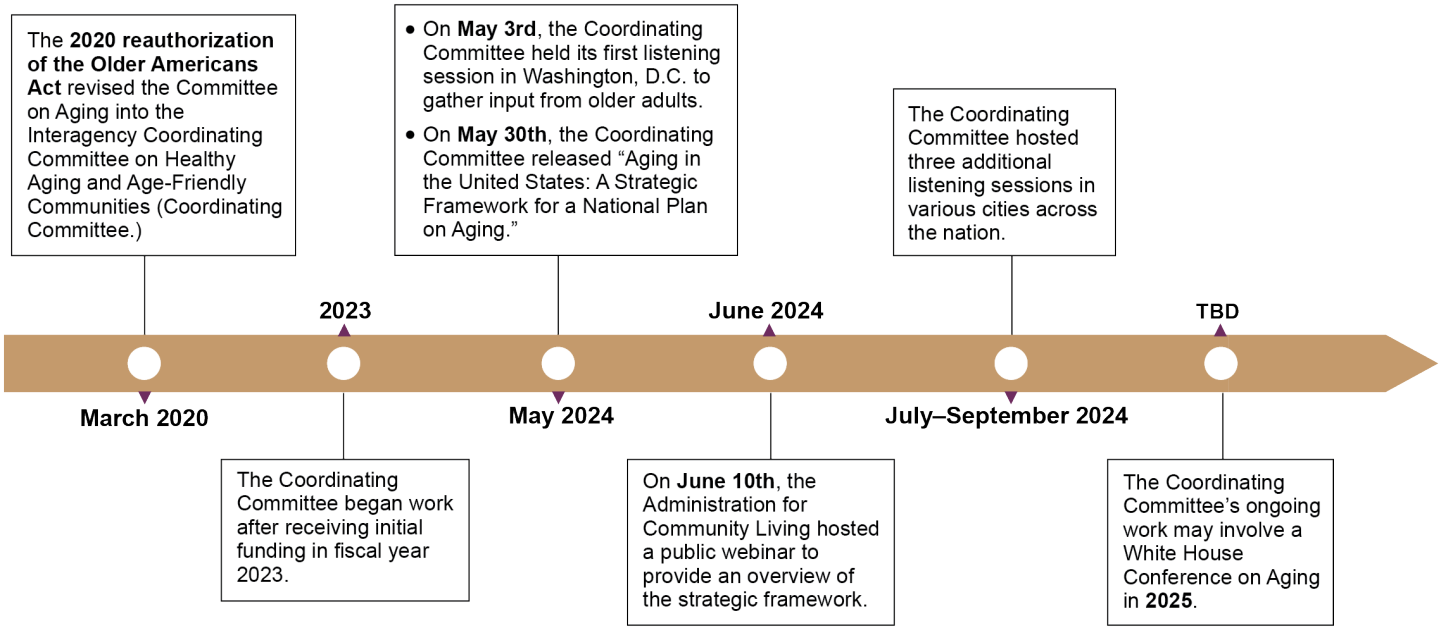
Source: GAO analysis of Administration for Community Living information. | GAO-25-107020

Interagency Coordinating Committee. ACL acts as the lead agency of the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities (Coordinating Committee), which the 2020 reauthorization of OAA revised.[18] Current membership includes 18 federal agencies, which are supported by a public-private partnership.[19] The statutory role of the Coordinating Committee is to focus on the coordination of agencies with respect to aging issues and develop a national set of recommendations to support the ability of older individuals to age in place and access social and health services. The Coordinating Committee also aims to avoid duplicative work, efficiently leverage resources, share lessons learned, and develop new approaches to meet the needs of older adults. See figure 2 for key milestones of the Coordinating Committee.

[18]Supporting Older Americans Act of 2020, Pub. L. No. 116-131, 134 Stat. 240, 249.

[19]In addition to coordinating with federal partners, the Coordinating Committee is working in partnership with the National Plan on Aging Community Engagement Collaborative, which consists of the SCAN Foundation, The John A. Hartford Foundation, and the West Health Policy Center.

Figure 2: Timeline of Key Milestones of the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities



Source: GAO analysis of Administration for Community Living information. | GAO-25-107020

Accessible Data for Figure 2: Timeline of Key Milestones of the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities

Date	Event
March 2020	The 2020 reauthorization of the Older Americans Act revised the Committee on Aging into the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities (Coordinating Committee.)
2023	The Coordinating Committee began work after receiving initial funding in fiscal year 2023.
May 2024	• On May 3rd, the Coordinating Committee held its first listening session in Washington, D.C. to gather input from older adults. • On May 30th, the Coordinating Committee released "Aging in the United States: A Strategic Framework for a National Plan on Aging."
June 2024	On June 10th, the Administration for Community Living hosted a public webinar to provide an overview of the strategic framework.
July–September 2024	The Coordinating Committee hosted three additional listening sessions in various cities across the nation.
TBD	The Coordinating Committee's ongoing work may involve a White House Conference on Aging in 2025.

Source: GAO analysis of Administration for Community Living information. | GAO-25-107020

ACL opened membership in the Coordinating Committee to agencies required by the OAA statute and agencies that expressed interest, according to officials.[20] According to ACL and the Congressional Research Service, the Coordinating Committee received initial funding of $1 million for fiscal year 2023 and received an additional $1 million in fiscal year 2024. Also, according to ACL, the initial appropriation also tasked the

[20]OAA requires DOL and HUD to be part of the Coordinating Committee and names other federal agencies that may be included.

Coordinating Committee to focus on falls prevention and to inform a potential White House Conference on Aging.

After receiving appropriations to support the Coordinating Committee for the first time in fiscal year 2023, ACL convened leaders and experts across federal agencies and departments to develop a strategic framework. In May 2024 the Coordinating Committee published its strategic framework, which details opportunities and challenges created by the aging U.S. population and defines goals and objectives for addressing critical aging issues.[21] The strategic framework discusses current efforts across the federal government related to older adults, including human services, transportation, the federal response to homelessness, research on Alzheimer's treatment and diagnosis, and support of family caregivers. The strategic framework outlines four priority areas related to aging based on the OAA statute: (1) age-friendly communities, (2) coordinated housing and supportive services, (3) increased access to long-term services and supports, and (4) aligned health care and supportive services. The strategic framework will inform a national set of recommendations for advancing healthy aging and age-friendly communities for older adults.

In addition, the Coordinating Committee is in the process of further developing strategic goals. To do so they are gathering input from stakeholders through listening sessions that include older adults. According to ACL officials, the Coordinating Committee began holding these sessions to ensure the perspectives of older adults, including those with the greatest economic and social need, are reflected in future recommendations and implementation plans. ACL said that these listening sessions also included local, state, and national stakeholders.

Through the Coordinating Committee, ACL has taken steps to collaborate with other federal agencies involved in providing services for older adults. Effective collaboration between agencies and coordination of services is important for managing fragmentation and addressing long-standing challenges facing older adults. In previous work, we identified eight leading practices for federal agencies to enhance interagency collaboration (see fig. 3).[22]

[21]The Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities, *Aging in the United States: A Strategic Framework for a National Plan on Aging* (Washington, D.C.: May 2024).

[22]GAO-23-105520.

Figure 3: GAO's Leading Interagency Collaboration Practices and Key Considerations

Leading Collaboration Practices	Key Considerations
Define Common Outcomes	• Have the crosscutting challenges or opportunities been identified? • Have short- and long-term outcomes been clearly defined? • Have the outcomes been reassessed and updated, as needed?
Ensure Accountability	• What are the ways to monitor, assess, and communication progress toward the short- and long-term outcomes? • Have collaboration-related competencies or performance standards been established against which individual performance can be evaluated? • Have the means to recognize and reward accomplishments related to collaboration been established?
Bridge Organizational Cultures	• Have strategies to build trust among participants been developed? • Have participating agencies established compatible policies, procedures, and other means to operate across agency boundaries? • Have participating agencies agreed on common terminology and definitions?
Identify and Sustain Leadership	• Has a lead agency or individual been identified? • If leadership will be shared between one or more agencies, have roles and responsibilities been clearly identified and agreed upon? • How will leadership be sustained over the long term?
Clarify Roles and Responsibilities	• Have the roles and responsibilities of the participants been clarified? • Has a process for making decisions been agreed upon?
Include Relevant Participants	• Have all relevant participants been included? • Do the participants have the appropriate knowledge, skills, and abilities to contribute? • Do participants represent diverse perspectives and expertise?
Leverage Resources and Information	• How will the collaboration be resourced through staffing? • How will the collaboration be resourced through funding? If interagency funding is needed, is it permitted? • Are methods, tools, or technologies to share relevant data and information being used?
Develop and Update Written Guidance and Agreements	• If appropriate, have agreements regarding the collaboration been documented? – A written document can incorporate agreements reached for any or all of the practices. • Have ways to continually update or monitor written agreements been developed?

Source: GAO (data and icons). | GAO-25-107020

Accessible Data for Figure 3: GAO's Leading Interagency Collaboration Practices and Key Considerations

Leading Collaboration Practices	Key Considerations
Define Common Outcomes	• Have the crosscutting challenges or opportunities been identified? • Have short- and long-term outcomes been clearly defined? • Have the outcomes been reassessed and updated, as needed?
Ensure Accountability	• What are the ways to monitor, assess, and communication progress toward the short- and long-term outcomes? • Have collaboration-related competencies or performance standards been established against which individual performance can be evaluated? • Have the means to recognize and reward accomplishments related to collaboration been established?
Bridge Organizational Cultures	• Have strategies to build trust among participants been developed? • Have participating agencies established compatible policies, procedures, and other means to operate across agency boundaries? • Have participating agencies agreed on common terminology and definitions?
Identify and Sustain Leadership	• Has a lead agency or individual been identified? • If leadership will be shared between one or more agencies, have roles and responsibilities been clearly identified and agreed upon? • How will leadership be sustained over the long term?
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Develop and Update Written Guidance and Agreements	• If appropriate, have agreements regarding the collaboration been documented? o A written document can incorporate agreements reached for any or all of the practices. • Have ways to continually update or monitor written agreements been developed?

Source: GAO (data and icons). | GAO-25-107020

ACL was aware of these leading practices and incorporated them in the early stages of the Coordinating Committee's work, according to an ACL official. For example, the official said that the Coordinating Committee has begun to define common outcomes through the development of its strategic framework and leverage resources by relying on those with existing expertise related to aging populations. Defining and documenting outcomes according to leading practices could help ACL ensure better coordination, particularly as it transitions to HUD as chair of the Coordinating Committee for a 2-year term. This is consistent with federal standards for internal control, which call for agencies to document responsibilities in written policies. Even when it is not acting as chair, ACL is tasked by OAA with advocating for older adults across the federal government. Having a written plan that incorporates leading practices into its ongoing efforts could increase the Coordinating Committee's ability to manage fragmentation of services for older adults.

Formal workgroups. In addition to the Coordinating Committee, ACL leads coordination efforts through other formal workgroups that focus on older adults. For example, ACL leads:

- the Elder Justice Coordinating Council, which was established under the 2010 Elder Justice Act to coordinate activities across the federal government related to elder abuse, neglect, and exploitation; and
- coordination efforts between the Advisory Council to Support Grandparents Raising Grandchildren and the RAISE Family Caregiving Advisory Council to address the increasing numbers of older adults who are expected to need caregiver assistance in the future.[23]

Partnerships. Outside of formal mechanisms, ACL also coordinates with other agencies through other partnerships. For example:

- ACL partners with USDA on nutrition programs focusing on older adults. Specifically, ACL and USDA partnered to develop informational tip sheets for older Americans, including "Finding Food for Older Adults" and "Farmers' Market Tips and Tricks."
- ACL partners with several federal agencies through the Direct Care Workforce Strategies Center to build the nation's capacity to support community living that serves older adults and people with disabilities.
- ACL and DOL joined a project led by the HHS Office of the Assistant Secretary for Planning and Evaluation to address paid and unpaid workforces who provide care and assistance to people with disabilities and older adults. The agencies developed recommendations to improve data collection on home and community-based services, which would provide national estimates of wages, recruitment and retention, experiences with clients, and job satisfaction, among other characteristics.
- ACL, USDA, and other federal agencies partnered with HUD to address access to affordable housing options among older adults and other populations through the Housing and Services Resource Center. This center serves people working in organizations and systems that provide housing, homelessness, health, independent living, and other supportive services that help people live successfully and stably in the community.
- ACL officials said that ACL reviews and comments on proposed rules and regulations from other agencies where they affect older adults. They said this is based on a provision of OAA that requires agencies to consult with ACL prior to establishing and when administering programs and services related to OAA's objectives.

Conclusions

Federal support for older adults will continue to be important as the U.S. population ages. This support is provided through OAA and a range of other government programs that overlap with each other by supporting older adults in different ways. This introduces complementarity and potential positive benefits but also a need for effective coordination. As the agency with primary responsibility for OAA, ACL collaborates with other agencies and this collaboration can help the government achieve the benefits of complementary programs while mitigating the risks associated with fragmentation. In particular, ACL and its partners on the Coordinating Committee are tasked with coordinating on issues related to aging. Following identified leading practices could

[23]ACL provided technical assistance to the advisory councils to develop the 2022 National Strategy to Support Family Caregivers, which included the partnership of several federal agencies and addresses caregiver assistance of older adults. ACL also hosts joint meetings between the two advisory councils.

help ACL and its partners on the Coordinating Committee enhance the effectiveness of their collaborative efforts, thereby benefitting older adults in need of support.

Recommendation for Executive Action

The Secretary of HHS should ensure that ACL, in consultation with other member agencies as appropriate, develop a written plan for its work with the Coordinating Committee that incorporates the eight leading practices on enhancing interagency collaboration. (Recommendation 1)

Agency Comments

We provided a draft of this report to HHS and DOL for review and comment. In its comments, reproduced in appendix II, HHS agreed with the recommendation, stating that it will share the leading practices with members of the Coordinating Committee and develop a written plan with members' input. HHS also provided technical comments that we incorporated as appropriate. DOL did not have any comments on the report.

We are sending copies of this report to the appropriate congressional committees, the Secretary of Health and Human Services, the Acting Secretary of Labor, and other interested parties. In addition, the report is available at no charge on the GAO website at https://www.gao.gov.

If you or your staff members have any questions about the report, please contact me at (202) 512-7215 or larink@gao.gov. Contact points for Offices of Congressional Relations and Public Affairs may be found on the last page of this report. GAO staff who made key contributions to this report are listed in appendix III.

Kathryn A. Larin
Director, Education, Workforce, and Income Security Issues

Appendix I: Federal Programs for Older Adults that Overlap with Older Americans Act Funded Services

The tables below list current federal programs with populations served or goals and services that overlap with those of programs authorized by the Older Americans Act of 1965 (OAA), as amended. Tables 1–5 list the programs that overlap the goals and services of OAA programs in different areas of need. These broad areas do not correspond to specific parts of OAA, which mostly serve the same needs in different ways, and non-OAA programs often overlap with more than one part of OAA. Table 6 lists the remaining programs we examined, which overlap with OAA in terms of the older adult population served but not in terms of goals and services.

The inventory is based on our review of information reported by federal agencies in the Assistance Listings on SAM.gov as of November 15, 2023, which was the most current data at the time we conducted our search, and information subsequently provided by the lead agencies. To focus on potential overlap, we excluded from our analysis programs that we determined were not comparable with OAA programs. This included large contributory programs (such as Social Security and Medicare); broad income-based programs (such as Medicaid and Section 8 Housing Choice Vouchers); and certain employment programs for individuals over 55 requiring specialized skills. We did not independently verify the information provided by the agencies or conduct a legal analysis to confirm the descriptions of the programs included in this appendix.

Table 1: Non-Older Americans Act Health and Nutrition Programs Serving Older Individuals, by Agency

Program name	General program objectives	Fiscal year 2023 obligations (millions of dollars)
U.S. Department of Agriculture, Food and Nutrition Service: Child and Adult Care Food Program	The Child and Adult Care Food Program provides reimbursements for meals and snacks served to eligible children enrolled for care at participating child-care homes and centers, afterschool programs, and emergency shelters. In addition, the program provides reimbursements for meals and snacks served in eligible adult day-care centers.	3,713.6
U.S. Department of Agriculture, Food and Nutrition Service: Commodity Supplemental Food Program	The Commodity and Supplemental Food Program works to improve the health of low-income elderly persons at least 60 years of age by supplementing their diets with nutritious U.S. Department of Agriculture (USDA) Foods. USDA purchases food and makes it available to state agencies and Indian tribal organizations along with funds for administrative costs. These agencies perform eligibility determinations, distribute USDA Foods, and provide nutrition education.	383.0
U.S. Department of Agriculture, Food and Nutrition Service: Food Distribution Program on Indian Reservations	The Food Distribution Program on Indian Reservations provides USDA foods to income-eligible households living on Indian reservations, and to American Indian households residing in approved areas near reservations or in Oklahoma. The program serves all ages, with eligibility determined by income and residency.	155.6
U.S. Department of Agriculture, Food and Nutrition Service: The Emergency Food Assistance Program	The Emergency Food Assistance Program is a federal program that helps supplement the diets of low-income Americans, including elderly people, by providing them with emergency food assistance at no cost.	94.7
U.S. Department of Agriculture, Food and Nutrition Service: Senior Farmers' Market Nutrition Program	The Senior Farmers' Market Nutrition Program awards grants to states, U.S. territories, and federally recognized tribal governments to provide low-income seniors with coupons that can be exchanged for eligible foods at farmers' markets, roadside stands, and community-supported agriculture programs.	24.7
Department of Health and Human Services: Administration for Community Living: Medicare Enrollment Assistance Program	The Medicare Enrollment Assistance Program provides enhanced outreach to eligible Medicare beneficiaries regarding their preventive, wellness, and limited-income benefits; application assistance to individuals who may be eligible for low-income subsidies or Managed Service Providers; and outreach activities aimed at preventing disease and promoting wellness.	47.4
Department of Health and Human Services: Administration for Community Living: Empowering Older Adults and Adults with Disabilities through Chronic Disease Self-Management Education Programs—financed by Prevention and Public Health Funds	Empowering Older Adults and Adults with Disabilities through Chronic Disease Self-Management Education Programs financed by Prevention and Public Health Funds involves cooperative agreements with state agencies, area agencies on aging, nonprofits, universities, and tribes. These agreements are intended to increase the number of chronic disease self-management education program participants, while concurrently increasing the sustainability of these proven programs in the aging and disability networks. Funds are used to develop capacity for, bring to scale, and sustain evidence based chronic disease self-management education programs.	8.0

Program name	General program objectives	Fiscal year 2023 obligations (millions of dollars)
Department of Health and Human Services: Administration for Community Living: Evidence-Based Falls Prevention Programs Financed Solely by Prevention and Public Health Funds	The Administration for Community Living's evidence-based falls prevention program brings to scale and sustains evidence-based falls prevention programs that have been proven to reduce falls, fear of falling, and fall-related injuries in older adults. Cooperative agreements are intended to increase the number of evidence-based falls prevention programs available to older adults while concurrently increasing the sustainability of these proven programs in the aging and disability networks.	5.1
Department of Health and Human Services: Centers for Disease Control and Prevention: Building Our Largest Dementia Infrastructure	Through the Building Our Largest Dementia Infrastructure programs, the Centers for Disease Control and Prevention supports three Public Health Centers of Excellence and 43 Public Health Department programs. The three Centers of Excellence work to identify, translate, and disseminate best practices on dementia caregiving, early detection of dementia, and dementia risk reduction. The Building Our Largest Dementia Infrastructure programs are developing and implementing strategic plans to address dementia in their jurisdictions.	9.7
Department of Health and Human Services: Centers for Disease Control and Prevention: The Healthy Brain Initiative: Technical Assistance to Implement Public Health Actions Related to Cognitive Health, Cognitive Impairment, and Caregiving at the State and Local Levels	The Healthy Brain Initiative aims to develop and implement public health strategies to promote brain health across the lifespan, address cognitive impairment, including Alzheimer's disease and related dementias, and support the needs of caregivers. It offers guidance for public health agencies in how to approach public health campaigns and other forms of outreach and awareness of public health entities.	3.7
Department of Health and Human Services: National Institutes of Health: Aging Research	The National institutes of Health has aging research programs to encourage biomedical, social, and behavioral research and research training directed toward greater understanding of the aging process and the diseases, special problems, and needs of people as they age.	4,412.1
Department of Justice, Office of Justice Programs: Kevin and Avonte Program: Reducing Injury and Death of Missing Individuals with Dementia and Developmental Disabilities	The Kevin and Avonte Program supports local jurisdictions' efforts to reduce the number of deaths and injuries of individuals with forms of dementia such as Alzheimer's disease or developmental disabilities such as autism who, due to their condition, wander from safe environments. It provides funding to agencies to implement locative technologies to track missing individuals; and to develop or operate programs to prevent wandering, increase individuals' safety, and facilitate rescues.	2.6

Source: GAO analysis of information from listed agencies. | GAO-25-107020

Notes: We did not independently verify the information provided by the agencies or conduct a legal analysis to confirm the descriptions of the programs included in this table. In some cases, the general program objectives provided by agencies were edited for brevity and more standard reporting across programs.

Table 2: Non-Older Americans Act Housing and Transportation Programs Serving Older Individuals, by Agency

Program name	General program objectives	FY 2023 obligations (millions of dollars)
Department of Housing and Urban Development: Assistant Secretary for Housing and Federal Housing Commissioner: Multifamily Housing Service Coordinators	The Multifamily Housing Service Coordinators link elderly or disabled nonelderly assisted housing and neighborhood residents to supportive services in the general community in order to prevent premature and unnecessary institutionalization and enable residents to stay in the community longer.	95.8
Department of Housing and Urban Development: Assistant Secretary for Housing and Federal Housing Commissioner: Section 202 Supportive Housing for the Elderly	The Supportive Housing for the Elderly program provides for the construction or rehabilitation of affordable housing units and ongoing rental assistance for elderly, very low-income residents.	35.1 (FY 2022; agency did not report an FY 2023 figure)
Department of Housing and Urban Development: Assistant Secretary for Public and Indian Housing: Resident Opportunity and Self Sufficiency Service Coordinators	The Resident Opportunity and Self Sufficiency Service Coordinators grant program is designed to assist residents of Public and Indian Housing to make progress toward economic and housing self-sufficiency by removing the educational, professional, and health barriers they face.	31.1
Department of Housing and Urban Development: Office of Lead Hazard Control and Healthy Homes: Older Adult Home Modification Grant Program	The Older Adult Home Modification Grant Programs assists experienced nonprofit organizations, state and local governments, and public housing authorities in undertaking comprehensive programs that make low-cost, low barrier, high impact safety and functional home modifications, repairs, and renovations to reduce low-income older adults' risk of falling, improve general safety, increase accessibility, and improve their functional abilities in their home.	14.5
Department of Transportation, Federal Transit Administration: Enhanced Mobility of Seniors and Individuals with Disabilities	The Enhanced Mobility of Seniors and Individuals with Disabilities program provides formula funding to states and designated recipients to improve mobility for seniors and individuals with disabilities.	391.3
Department of Transportation, Federal Transit Administration: Public Transportation Innovation	The Federal Transit Administration's innovative research invests in technology and programs of national significance that improve public transportation.	25.8
Department of Transportation, Federal Transit Administration: National Aging and Disability Transportation Center	The National Aging and Disability Transportation Center promotes the accessibility and availability of transportation options for seniors, individuals with disabilities, and their caregivers and provides technical assistance and resources.	2.5

Program name	General program objectives	FY 2023 obligations (millions of dollars)
Department of Transportation, Federal Transit Administration: Innovative Coordinated Access and Mobility Pilot Program	The Innovative Coordinated Access and Mobility Pilot Program is designed to improve access to public transportation by building partnerships among health, transportation, and other service providers. This program provides competitive funding to support innovative projects for the transportation disadvantaged that will improve the coordination of transportation services and nonemergency medical transportation services for older adults, people with disabilities, and people of low income.	0.8

Source: GAO analysis of information from listed agencies. | GAO-25-107020

Notes: We did not independently verify the information provided by the agencies or conduct a legal analysis to confirm the descriptions of the programs included in this table. In some cases, the general program objectives provided by agencies were edited for brevity and more standard reporting across programs. Where agencies did not provide fiscal year (FY) 2023 obligations, we used FY 2022 obligations from the SAM.gov Assistance Listings if available.

Table 3: Non-Older Americans Act Employment and Community Service Programs Serving Older Individuals, by Agency

Program name	General program objectives	Fiscal year 2023 obligations (millions of dollars)
AmeriCorps (Corporation for National and Community Service): AmeriCorps Seniors Foster Grandparent Program	The AmeriCorps Seniors Foster Grandparent program is an intergenerational program that engages older Americans in national service to provide one-on-one mentoring, tutoring, and social-emotional support to children with exceptional needs or who have academic, social, or economic disadvantage.	120.0
AmeriCorps (Corporation for National and Community Service): AmeriCorps Seniors Senior Companion Program	The AmeriCorps Seniors Senior Companion program provides independent living support and companionship to other older adults and adults with disabilities.	53.0
AmeriCorps (Corporation for National and Community Service): AmeriCorps Seniors Retired and Senior Volunteer Program	The AmeriCorps Seniors Retired and Senior Volunteer Program engages older Americans in addressing a wide range of community needs. Volunteers in the program address food security, recruit and manage older volunteers, mentor and tutor children, support workforce and job readiness skill development, provide disaster preparedness and mitigation assistance, and serve veterans and military families, among other community needs.	51.6
AmeriCorps (Corporation for National and Community Service): AmeriCorps Seniors Senior Demonstration Program	The Senior Demonstration Program authorizes the AmeriCorps Seniors Director to invest in innovative projects that demonstrate how older American volunteers may contribute to new objectives or certain national priorities. This demonstration authority allows organizations the flexibility to develop new ideas and creative programming that addresses community needs without some of the constraints applied to traditional AmeriCorps Seniors programs.	15.8
Environmental Protection Agency: Senior Environmental Employment Program	The Senior Environmental Employment Program utilizes the talents of older Americans in projects of pollution prevention, abatement, and control supporting the Environmental Protection Agency and interagency agreements.	33.0
Environmental Protection Agency: State Senior Environmental Employment Program	The State Senior Environmental Employment Program utilizes the talents of older Americans in projects of pollution prevention, abatement, and control supporting states.	0.5

Source: GAO analysis of information from listed agencies. | GAO-25-107020

Notes: We did not independently verify the information provided by the agencies or conduct a legal analysis to confirm the descriptions of the programs included in this table. In some cases, the general program objectives provided by agencies were edited for brevity and more standard reporting across programs.

Table 4: Non-Older Americans Act Elder Justice and Finance Programs Serving Older Individuals, by Agency

Program name	General program objectives	Fiscal year 2023 obligations (millions of dollars)
Department of Health and Human Services, Administration for Community Living: Elder Justice Act—Adult Protective Services	Elder Justice Act—Adult Protective Services formula grants to state adult protective services programs enhance, improve, and expand the ability of the programs to receive reports of, and investigate, allegations of abuse, neglect, and exploitation of older adults and adults with disabilities.	15.0
Department of Justice, Office on Violence Against Women: Training and Services to End Abuse in Later Life Program	The Training and Services to End Abuse in Later Life Program provides funding to Tribal, state, and local governments and certain nonprofit organizations to implement a comprehensive approach to addressing abuse in later life, including domestic violence, dating violence, sexual assault, stalking, neglect, abandonment, economic abuse, or willful harm committed against victims who are 50 years of age or older.	1.7
Department of the Treasury, Internal Revenue Service: Tax Counseling for the Elderly Program	The Tax Counseling for the Elderly Program provides free tax preparation services to Americans over the age of 60 as authorized by Congress. The Internal Revenue Service enters into agreements with private or public non-profit agencies or organizations to provide training and technical assistance to prepare volunteers to provide tax counseling aid.	11.0

Source: GAO analysis of information from listed agencies. | GAO-25-107020

Notes: We did not independently verify the information provided by the agencies or conduct a legal analysis to confirm the descriptions of the programs included in this table. In some cases, the general program objectives provided by agencies were edited for brevity and more standard reporting across programs.

Table 5: Non-Older Americans Act Programs Serving Multiple Needs of Older Individuals, by Agency

Program name	General program objectives	FY 2023 obligations (millions of dollars)
Department of Education, Office of Special Education and Rehabilitative Services, Rehabilitation Services Administration: Independent Living Services for Older Individuals Who Are Blind	The Independent Living Services for Older Individuals Who Are Blind program provides older individuals who are blind or visually impaired with the services that will enable them to continue to live independently in their communities.	33.3
Department of Health and Human Services, Administration for Children and Families: Social Services Block Grant	The Social Services Block Grant is a flexible funding source that allows each state and territory to tailor social services to its population's needs. Through the grant, states provide essential social services that help achieve a myriad of goals to reduce dependency and promote self-sufficiency; protect children and adults from neglect, abuse, and exploitation; and help individuals who are unable to take care of themselves to stay in their homes or to find the best institutional arrangements.	1,603.1 (FY 2022; agency did not report an FY 2023 figure)

Source: GAO analysis of information from listed agencies. | GAO-25-107020

Notes: We did not independently verify the information provided by the agencies or conduct a legal analysis to confirm the descriptions of the programs included in this table. In some cases, the general program objectives provided by agencies were edited for brevity and more standard reporting across programs. Where agencies did not provide fiscal year (FY) 2023 obligations, we used FY 2022 obligations from the SAM.gov Assistance Listings if available.

Table 6: Non-Older Americans Act (OAA) Programs That Do Not Overlap OAA Services, by Agency

Program name	General program objectives	Fiscal year 2023 obligations (millions of dollars)
Department of Health and Human Services, Health Resources and Services Administration: Geriatrics Workforce Enhancement Program	The Geriatrics Workforce Enhancement Program educates and trains the primary care and geriatrics workforces and other appropriate specialties to provide age-friendly and dementia-friendly care for older adults in integrated geriatrics and primary care sites/delivery systems.	41.6
Department of Health and Human Services, Health Resources and Services Administration: Nursing Workforce Diversity	The Nursing Workforce Diversity program aims to build a high-quality registered nurse workforce reflecting the diversity of communities served. The program funds student stipends, scholarships, pre-entry preparation and retention activities, and opportunities for further education to persons who are underrepresented among registered nurses, including racial and ethnic minorities.	22.4
Department of Health and Human Services, Health Resources and Services Administration: Geriatric Academic Career Awards	The Geriatric Academic Career Awards program provides training focused on interprofessional and team-based care across the educational continuum (students, faculty, providers, direct-service workers, patients, families, and lay and family caregivers) to build capacity to provide high-quality health care to older Americans.	2.3
Department of Housing and Urban Development, Assistant Secretary for Housing and Federal Housing Commissioner: Home Equity Conversion Mortgages for Seniors	Home Equity Conversion Mortgages for Seniors is the Federal Housing Administration's reverse mortgage program that enables homeowners, age 62 and older, to withdraw a portion of their home's equity to use for home maintenance, repairs, or general living expenses. Borrowers choose how to withdraw their funds, whether in a fixed monthly amount, a line of credit, or a combination of both.	32.0
Department of Housing and Urban Development, Assistant Secretary for Housing and Federal Housing Commissioner: Section 231 Mortgage Insurance for Rental Housing for the Elderly	The Section 231 program provides mortgage insurance guarantees to the Federal Housing Administration lender for the new construction or substantial rehabilitation of multifamily housing for a senior population and/or persons with disabilities.	0.0

Source: GAO analysis of information from listed agencies. | GAO-25-107020

Notes: We did not independently verify the information provided by the agencies or conduct a legal analysis to confirm the descriptions of the programs included in this table. In some cases, the general program objectives provided by agencies were edited for brevity and more standard reporting across programs.

Appendix II: Comments from the Department of Health and Human Services

DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF THE SECRETARY

Assistant Secretary for Legislation
Washington, DC 20201

December 12, 2024

Kathryn A. Larin
Director, Education, Workforce, and
Income Security Issues
U.S. Government Accountability Office
441 G Street NW
Washington, DC 20548

Dear Ms. Larin:

Attached are comments on the U.S. Government Accountability Office's (GAO) report entitled, **"OLDER AMERICANS: HHS Should Apply Leading Practices as It Coordinates Overlapping Programs"** (GAO-25-107020).

The Department appreciates the opportunity to review this report prior to publication.

Sincerely,

Melanie Anne Egorin

Melanie Anne Egorin, PhD
Assistant Secretary for Legislation

Attachment

TECHNICAL COMMENTS FROM THE DEPARTMENT OF HEALTH & HUMAN SERVICES ON THE GOVERNMENT ACCOUNTABILITY OFFICE'S DRAFT ENTITLED – OLDER AMERICANS: HHS SHOULD APPLY LEADING PRACTICES AS IT COORDINATES OVERLAPPING PROGRAMS (GAO-25-107020)

The U.S. Department of Health & Human Services (HHS) appreciates the opportunity from the Government Accountability Office (GAO) to review and comment on this draft report.

Recommendation

The Secretary of HHS should ensure that ACL, in consultation with other member agencies as appropriate, develops a written plan for its work with the Coordinating Committee that incorporates the eight leading practices on enhancing interagency collaboration.

HHS Response

HHS concurs with GAO's recommendation to develop a written plan for its work with the Coordinating Committee that incorporates the eight leading practices on enhancing interagency coordination. ACL will:

- Share the eight leading practices on enhancing interagency coordination with members of the Committee and seek their input in the development of a written plan.
- Incorporate the input from Committee members and develop a written plan for its work with the Coordinating Committee that incorporates the eight leading best practices.
- Share the written plan for its work with the Coordinating Committee members.

Accessible Text for Appendix II: Comments from the Department of Health and Human Services

DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF THE SECRETARY

Assistant Secretary for Legislation
Washington, DC 20201

December 12, 2024

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Assistant Secretary for Legislation

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- Share the written plan for its work with the Coordinating Committee members.

Appendix III: GAO Contact and Staff Acknowledgments

GAO Contact

Kathryn A. Larin, (202) 512-7215 or larink@gao.gov

Staff Acknowledgments

In addition to the contact named above, Danielle Giese (Assistant Director), Kimberley Granger (Assistant Director), Daniel Dye (Analyst in Charge), Charles Ford, Tangere Hoagland, and Anna Pechenina made key contributions to this report. Also contributing to this report were Jessica Ard, Seto Bagdoyan, Andrew Bellis, Dean Campbell, Alexandra Edwards, Serena Lo, Susan Murphy, Gabriel Nelson, Mimi Nguyen, Liam O'Laughlin, Patricia Powell, Steven Putansu, Sabrina Riddick, Joy Solmonson, and Adam Wendel.

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