BENJAMIN ROSE INSTITUTE ON AGING

Washington Update

September 2025

September is packed with awareness campaigns focused on older adults, including Senior Center Month and National Kinship Care Month. Within this broader focus, the month features two key awareness weeks with legislative backing.

Malnutrition Awareness Week (September 8-12, 2025) resolutions were introduced by Senator Chris Murphy (D-CT) (S.Res.378) and Representative Suzanne Bonamici (D-OR) (H.Res.683).

Falls Prevention Week (September 22-26, 2025) connects to recent legislative action by Senator Angus King (I-ME), who introduced S.2833, a bill to strengthen falls prevention research and programs under the Older Americans Act.

In late July, the Senate Appropriations Committee passed their FY2026 budget for health, education, and labor programs, keeping most aging services funding at current levels with small increases for family caregiver support and respite care. In September the House Appropriations Committee passed their version, providing small increases for elder abuse programs, Title VI Native Americans Nutrition and Supportive Services, and senior housing. Neither have been approved by the full Senate or House.

Program	FY25 Final	FY26 Trump	FY26 Senate	FY26 House
Older Americans Act Programs				cut ACL 10mil
Title III-B Home and Community-Based Services	$410 million	$410 million	$410 million	$414 million
Title III-C Nutrition Total	$1.058 billion	$1.059 billion	$1.058 billion	$1.058 billion
III-C-1 Congregate Meals	*$565 million*		*$565 million*	*$565 million*
III-C-2 Home-Delivered Meals	*$381 million*		*$381 million*	*$381 million*
III-C Nutrition Services Incentive Program (NSIP)	*$112 million*		*$112 million*	*$112 million*
Title III-D Preventive Health	$26.3 million	$26 million	$26 million	$26 million
Title III-E Family Caregiver Support Program	$207 million	$207 million	$209 million	$207 million
Title V Senior Community Service Employment Program (SCSEP/CSEOA-DOL)	$405 million	0	$395 million	0
Title VI Native Americans Nutrition/Supportive Services	$38.2 million	$38.2 million	$38.2 million	$40.3 million
Title VI Native Americans Caregiver Program	$12 million	$12 million	$12 million	$14 million
Title VII Long-Term Care Ombudsman + Prevention of Elder Abuse Programs	$26.6 million	$26.6 million	$26.6 million	$26.885 million
Title VII Elder Rights Support Activities Total	$33.9 million	$33.9 million	$33.9 million	$34.005 million
Block Grants				
Social Services Block Grant (HHS-ACF)	$1.7 billion	$1.7 billion	$1.7 billion	$1.7 billion
Community Services Block Grant (HHS-ACF)	$770 million	0	$770 million	$775 million
Community Development Block Grant (HUD)	$3.3 billion	0	$3.1 billion	$3.3 billion
Other Aging Programs				
Americorps Seniors (CNCS)	$236 million		$236 million	
Chronic Disease Self-Management Program (HHS-ACL)	$8 million	0	$8 million	$8 million
Elder Falls Prevention (HHS-ACL)	$7.5 million	$3 million	$7.5 million	$7.5 million
Aging and Disability Resource Centers (HHS-ACL)	$8.6 million	$9 million	$8.6 million	$8.6 million
Aging Network Support Activities (HHS-ACL)	$30.4 million	$30 million	$30.4 million	$30.4 million
Lifespan Respite Care	$10 million	$10 million	$11 million	$10 million
Medicare SHIPs (State Health Insurance Assistance Program) (HHS-ACL)	$55.2 million	$55 million	$55.2 million	$55.2 million
Low-Income Home Energy Assistance Program (LIHEAP) (HHS-ACF)	$4 billion	0	$4 billion	$4 billion
Housing for the Elderly Section 202 (HUD)	$931 million	$0	$972 million	$950 million
Commodity Supplemental Food Program (USDA)	$425 million	$0	$425 million	$425 million
Tenant-based Rental Assistance Section 8 (HUD)	$32 billion	$0	$37.3 billion	$35.2 billion
988 National Suicide Lifeline and Behavioral Health Program (HHS)	$520 million	$520 million	$534 million	$520 million
Senior Farmers Market Nutrition Program (USDA)	$21 million	Retained	$21 million	$21 million

With Fiscal Year 2026 quickly approaching on October 1st, Congress started work on a Continuing Resolution, which would temporarily fund the government at FY25 levels and allow Congress time to work on final appropriations bills. On September 19th, the House passed a Continuing Resolution along party lines to extend funding through November 21st, but the Senate failed to pass this bill or an alternative measure. With the House and Senate out on recess until two days before the end of the fiscal year, time is running out to avoid a government shutdown when current funding expires October 1st.

The Senate Special Committee on Aging held two hearings this month. On September 3rd, they held "Protecting Older Americans: Leveling the Playing Field for Older Workers." On September 17th, they examined "Prescription for Trouble: Drug Safety, Supply Chains, and the Risk to Aging Americans."

The "Protecting Older Americans Act of 2025," (S.2703) introduced by Senators Kirsten Gillibrand (D-NY), Lindsey Graham (R-NC), Dick Durbin (D-IL), and Chuck Grassley (R-IA), would allow workers age 40 and older to choose to take age discrimination cases to court rather than being forced to use private arbitration systems. This would give older workers better access to justice since court proceedings are public and allow for class action lawsuits.

The "Keep Seniors Fed Act," (H.R.4967) introduced by Representative Jill Tokuda (D-HI) would exclude Social Security benefits from being counted as income when determining eligibility for SNAP food assistance. This would allow seniors receiving Social Security to qualify for food stamps even if their Social Security payments would otherwise push them over income limits for the nutrition program. Representative Shontel Brown (D-OH) is an original cosponsor of the bill.

The "Closing the Meal Gap Act of 2025," (S.2792) introduced by Senator Kirsten Gillibrand, would significantly increase SNAP food assistance benefits by changing how they're calculated and eliminating various restrictions. For older adults specifically, the bill would create a standard $140 medical expense deduction that seniors could automatically claim without paperwork, or they could still choose to itemize actual medical costs if higher, making it easier for older adults to maximize their food assistance benefits.

The "Share the Savings with Seniors Act" (S. 2770), introduced by Senators John Cornyn (R-TX), Jacky Rosen (D-NV), Thom Tillis (R-NC), and Peter Welch (D-VT), would require Medicare Part D plans to base cost-sharing for chronic care drugs on the "net price" (after manufacturer rebates and discounts) rather than the higher list price. This would lower out-of-pocket costs for Medicare beneficiaries who take medications for conditions like diabetes, heart disease, and respiratory disorders, as they would benefit from the same manufacturer rebates that insurance plans currently receive.

The "Supporting Our Seniors Act" (S. 2762), introduced by Senators Jacky Rosen (D-NV) and John Boozman (R-AR), would establish a 12-member Commission on Long-Term Care to develop annual policy recommendations on issues affecting seniors and people with disabilities. The commission would focus on areas including long-term care financing for middle-income families, aging in place options, caregiver support, access to palliative and hospice care, and reducing hospitalization costs through expanded home-based services.

Representative Josh Riley's (D-NY) "Increasing Nutrition Access for Seniors Act of 2025" (HR.5055) would simplify SNAP enrollment for older adults and people with disabilities by extending their certification periods from 24 to 36 months if they have no earned income, reducing the frequency of required renewals. The bill would also create a standard medical expense deduction of $155 (adjusted annually for inflation) that seniors and disabled individuals could claim by simply self-attesting to having medical expenses above $35 per month, eliminating the need to provide detailed documentation of medical costs.

Senators Chuck Grassley (R-IA) and Ben Ray Luján (D-NM) have reintroduced the bipartisan "Pharmacy and Medically Underserved Areas Enhancement Act," which would allow Medicare to reimburse pharmacists for basic medical services like health screenings, immunizations, and diabetes management. The legislation would enable older Americans to receive healthcare services from pharmacists they already regularly visit, particularly in rural areas where doctors may be less accessible. The senators are also seeking stakeholder feedback on pharmacists providing chronic care services through a request-for-information with responses due by November 10, 2025.

2025 Medicare Changes: What Caregivers and Advocates Need to Know

Join us for an important conversation with Bob Blancato, Executive Director of the Elder Justice Coalition, as he unpacks the latest changes to Medicare in 2025. This webinar will highlight key updates impacting older adults, caregivers and service providers, and offer insights into how these changes connect to broader advocacy efforts. Participants will gain a clearer understanding of what to expect and how to effectively support the needs of older adults in their communities. Register now!