

May 19, 2023

The Honorable Patty Murray
Chairwoman
Senate Committee on Appropriations

The Honorable Susan Collins
Vice Chairwoman
Senate Committee on Appropriations

The Honorable Tammy Baldwin
Chairwoman
Senate Committee on Appropriations
Subcommittee on Labor, HHS, and Education

The Honorable Shelley Moore Capito
Ranking Member
Senate Committee on Appropriations
Subcommittee on Labor, HHS, and Education

Dear Chairwoman Murray, Vice Chairwoman Collins, Chairwoman Baldwin, and Ranking Member Capito:

The American Geriatrics Society (AGS) is a national non-profit organization comprised of nearly 6,000 geriatrics healthcare professionals and basic and clinical researchers dedicated to improving the health, independence, and quality of life of older Americans. The AGS believes in a just society – one where we all are supported by and able to contribute to communities and where ageism, ableism, classism, homophobia, racism, sexism, xenophobia, and other forms of bias and discrimination no longer impact healthcare access, quality, and outcomes for older adults and their caregivers. We advocate for policies and programs that support the health, independence, and quality of life of all of us as we age and urge you to support at least **\$82 million in FY 2024 for the geriatrics education and training programs under Title VII of the Public Health Service (PHS) Act.**

The AGS appreciates your ongoing support of the Title VII Geriatrics Health Professions Programs at the Health Resources and Services Administration (HRSA) and the increases appropriated in FY 2023. The Geriatrics Workforce Enhancement Programs (GWEPs) and recipients of the Geriatrics Academic Career Awards (GACAs) have been successfully leading and preparing the healthcare workforce, caregivers, and their communities as demonstrated throughout the COVID-19 public health emergency. The GWEPs and GACAs worked with health systems to participate in the outreach to vulnerable and hard-to-reach populations, preventing widening the health disparity gap exacerbated by the pandemic. These programs are critical in providing assistance for proactive public health planning with their geriatrics expertise and knowledge of long-term care and would help ensure states and local governments have improved plans for older adults in disaster preparedness for future pandemics and natural disasters. Furthermore, as the U.S. population rapidly ages, access to a well-trained workforce and appropriate care for medically complex older adults is imperative to maintaining the health and quality of life for this growing segment of the nation's population.

Our healthcare workforce receives little, if any, training in geriatric principles,¹ which leaves us ill-prepared to care for older Americans as health needs evolve. With our nation continuing to face a

¹ Only 3 percent of medical students take even one class in geriatric medicine and fewer than 1 percent of RNs, pharmacists, physician assistants and physical therapists are certified in geriatrics or gerontology. Yet estimates are that by 2030, 3.5 million additional health care professionals and direct-care workers will be needed to care for older adults. 2018 Issue Brief, Eldercare Workforce Alliance, available at: https://eldercareworkforce.org/wp-content/uploads/2018/03/GWEP_OnePager_v2.pdf

severe shortage of geriatrics healthcare providers and academics with the expertise to train these providers, the AGS believes it is urgent that we increase the number of educational and training opportunities in geriatrics and gerontology. The requested increase in funding over FY 2023 levels would help ensure that HRSA receives the funding necessary to expand these critically important programs commensurate with the increasing need.

In the U.S. there is a workforce crisis, with a disappearing supply of primary care physicians, including geriatricians. According to the HRSA, there will only be 6,230 geriatricians by 2025, or approximately one for every 3,000 older adults that require geriatric care, leaving thousands without access to these services.² Additionally, rural populations have more limited access to primary care physicians than residents of urban areas, and generally are older, have a higher incidence of poor health, and face greater socioeconomic barriers to receiving care (e.g., transportation, internet access). These barriers, in addition to systemic inequities, impact the health status of traditionally marginalized communities. Additional funding will allow HRSA to expand the number of GWEPs and GACA recipients and move toward closing the current geographic and demographic gaps in geriatrics workforce training. Given the increasing diversity among older people³ and rapid growth of the older population,⁴ the need for a diverse workforce as well as training in geriatrics and gerontology will continue to increase. The only federal programs that focus on training the workforce to care for older Americans must keep pace with that growth.

Geriatrics Workforce Enhancement Programs. The GWEP is currently the only federal program designed to increase the number of providers in a variety of disciplines with the skills and training to care for older adults. The GWEPs educate and engage primary care physicians, nurses, social workers, the caregiving workforce, and other health care professionals as well as family caregivers, and focus on opportunities to improve the quality of care delivered to older adults, particularly in underserved and rural areas. In Academic Year 2021-2022, GWEPs trained over one million health care professionals, students, patients, and caregivers.⁵ In Academic Year 2020-2021, nearly 52 percent of the health care delivery sites that GWEP awardees partnered with were located in medically underserved communities.⁶ Due to GWEPs' partnerships with primary care and community-based organizations, GWEPs are uniquely positioned to rapidly address the needs of older adults and their caregivers, especially around Alzheimer's disease and related dementias. The GWEP was launched in 2015 by HRSA with 44 three-year grants

² U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. National and Regional Projects of Supply and Demand for Geriatricians: 2013-2025. Published April 2017. Accessed May 1, 2023. <https://bhwh.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/geriatrics-report-51817.pdf>.

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⁴ U.S. Census Bureau International Programs Center. International Database (IDB). Accessed May 1, 2023. https://www.census.gov/data-tools/demo/idb/#/pop?COUNTRY_YEAR=2023&COUNTRY_YR_ANIM=2023&FIPS_SINGLE=US&FIPS=US&popPages=BYAGE&POP_YEARS=2023,2060&menu=popViz&ageGroup=O.

⁵ Department of Health and Human Services. Fiscal Year 2024 Health Resources and Services Administration Justification of Estimates for Appropriations Committees. Published March 13, 2023. Accessed May 8, 2023. <https://www.hrsa.gov/sites/default/files/hrsa/about/budget/budget-justification-fy2024.pdf>.

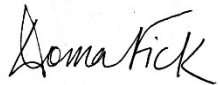
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provided to awardees in 29 states. In 2019, HRSA funded a second cohort of 48 GWEPs across 35 states and two territories (Guam and Puerto Rico) and provided extension grants to 15 former GWEP awardees. **Additional funding would allow 80 GWEPs at \$950,000 per program, enabling every state to have a GWEP and ensure that more rural and underserved areas of the country can have access to geriatrics training and expertise.**

Geriatrics Academic Career Awards. The GACA program is an essential complement to the GWEP. GACAs ensure we can equip early-career clinician educators to become leaders in geriatrics education and research. It is the only federal program designed to increase the number of faculty with geriatrics expertise in a variety of disciplines, providing training in opioid use treatment, health equity/social determinants of health, and more. The program was eliminated in 2015 through a consolidation of several training programs. However, the program was reestablished in November 2018 and most recently, HRSA funded 26 GACAs for four years, through June 30, 2027. **Additional funding would allow 60 GACAs at \$100,000 per award, ensuring we have a larger and more geographically diverse pipeline of geriatrics research and training expertise with the incentives and resources needed to grow the field.**

Thank you for your consideration of this funding request. If you have comments or questions about HRSA funding or other issues related to the healthy aging of older Americans, please contact Anna Kim, Senior Manager, Public Affairs & Advocacy, at 212-308-1414 or akim@americangeriatrics.org.

Sincerely,



Donna M. Fick, PhD, GCNS-BC, AGSF, FGSA, FAAN
President



Nancy E. Lundebjerg, MPA
Chief Executive Officer

May 19, 2023

The Honorable Kay Granger
Chairwoman
House Committee on Appropriations

The Honorable Rosa L. DeLauro
Ranking Member
House Committee on Appropriations
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Subcommittee on Labor, HHS, and Education

The Honorable Robert Aderholt
Chairman
House Committee on Appropriations
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Our healthcare workforce receives little, if any, training in geriatric principles,¹ which leaves us ill-prepared to care for older Americans as health needs evolve. With our nation continuing to face a severe shortage of geriatrics healthcare providers and academics with the expertise to train these providers, the AGS believes it is urgent that we increase the number of educational and training opportunities in geriatrics and gerontology. The requested increase in funding over FY 2023 levels would help ensure that HRSA receives the funding necessary to expand these critically important programs commensurate with the increasing need.

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⁴ U.S. Census Bureau International Programs Center. International Database (IDB). Accessed May 1, 2023. https://www.census.gov/data-tools/demo/idb/#/pop?COUNTRY_YEAR=2023&COUNTRY_YR_ANIM=2023&FIPS_SINGLE=US&FIPS=US&popPages=BYAGE&POP_YEARS=2023,2060&menu=popViz&ageGroup=O.

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