

**Testimony Before the Senate Committees of Health and Human Services,
Aging and Youth, Intergovernmental Operations, and the Human Services
Sub-Committee of the Committee on Appropriations**

May 1, 2017

Presented by Sen. Roy C. Afflerbach, Ret.

Chairladies Baker, Brooks, Bartolotta, Chairman Browne, Members of the Committees and staff, thank you for inviting me to testify today.

As you know, my name is Roy Afflerbach.

In the spirit of full disclosure, I must say that I represent the Pennsylvania Adult Day Services Association (PADSA), the Pennsylvania Association of Senior Centers (PASC), the Meals on Wheels Association of Pennsylvania (MOWAPA), and am a volunteer for the Southwestern Pennsylvania Partnership for Aging (SWPPA). I am not here, however, to speak on behalf of any of these organizations.

I have been asked to present to you the historical events that led to the formation of the Department of Aging as a separate cabinet level department.

My first-hand knowledge of how and why the Department of Aging and several other senior programs were created began when I joined the Senate staff in December 1970. One of my first assignments was to assist in drafting the Lottery Act and the concurrent implementing legislation for property tax relief for the elderly. Two years later I served as Chief of Staff to the Senate Majority Whip and continued to help with amendments to the Lottery Act. In 1977 as Chief of Staff to the Senate Majority Leader I was tasked with helping to guide to passage Act 1978-70 to create the Department of Aging.

The story of the Department of Aging (PDA) begins with the passage of the Older Americans Act of 1965 (OAA), after which the Department of Public Welfare (DPW) was designated as the single state agency to receive OAA funds and to do two principle things: (1) Establish a focus upon services to the elderly; and (2) Establish a network of Planning and Service Areas (PSA) within which an Area Agency on Aging would administer OAA funds to provide the services OAA required, notably the provision of socialization and nutritional meals through congregate settings.

Eight years later in January 1974 DPW established the first 40 PSAs and the AAAs to administer them. It was never clear to us why DPW was unable to more quickly or efficiently implement the requirements of the OAA. Many in the Legislature opined it was because these new duties had been thrust upon a department ill-prepared to receive them, in part because it was wrestling with the overwhelming issues of general welfare, individuals with disabilities, and the Medicare/Medicaid Act which was passed at the same time as the OAA.

By 1978, four years after DPW created 40 PSAs and twelve years after it received responsibility for implementing OAA requirements, it was clear to the Legislature and the Governor that allowing DPW to continue to implement the OAA, and potentially future Lottery funded programs, was simply not working.

Simultaneously, individual seniors and organizations such as the Grey Panthers and the Pennsylvania Association of Older People increasingly called upon Legislators and the Governor to take the Office of Aging out of DPW and establish it as a separate Department. They argued that there were significant differences between the needs, desires, and aspirations of younger individuals with disabilities and the needs, desires, and aspirations of older, aging individuals.

(Several years later DPW also agreed with this argument when it sought and received approval from the Centers for Medicare and Medicaid Services (CMS) to utilize Medicaid funds to provide home and community based services for seniors. Not surprisingly, this program is called the Aging Waiver and was administered by PDA under an interagency agreement with DPW until approximately 2012.)

By 1977 the Legislature and the Governor agreed with the concerns expressed by seniors that the needs of the elderly were completely overshadowed in DPW by the needs of individuals with disabilities and general welfare/Medicaid recipients. Therefore, after the long-debated 1977-78 budget was resolved in December 1977, the Legislature moved to approve Act 1978-70 by votes of 194-3 in the House and 49-0 in the Senate, creating the Department of Aging effective January 1, 1979. Upon taking office in 1979, Governor Dick Thornburgh appointed Gorham L. Black, Jr. to serve as Secretary of the new department and the Senate unanimously confirmed him soon thereafter.

Act 70 of 1978 included language directing that all the programs for the elderly, the staff, and the funding for those programs, be transferred from the Departments of Public Welfare and Transportation to align them within the Department of Aging.

For a variety of reasons, not the least of which was uncertain budgetary times, the new Department was given a sunset date of January 1, 1985, unless renewed by statute. Through the application of subsequent Sunset Act procedures, the deadline was extended to 1988. By 1988 the Legislature had determined PDA was performing as

intended in an efficient and cost effective manner and therefore, with the passage of Act 1988-153 PDA was reestablished with additional powers and responsibilities, including administration of the Pharmaceutical Assistance Contract for the Elderly (PACE), and later PACE-Net.

Now, under the banner of breaking down silos and creating a more efficient delivery of services, the Administration is asking us to return to the pre-1979 days with the hopeful presumption that what did not work before would somehow work today.

Although the language the Administration recently presented to the Legislature in the form of an amendment to the Administrative Code demonstrates it has been listening to concerns expressed about the repeal of the Department of Aging, the fact remains that the programs presently aligned within PDA are to be transferred into different levels of an expanded bureaucracy within a Department of Health and Human Services (DHHS).

The Administration purports that its proposed relocation of programs will “create a structure to reduce bureaucratic hurdles”, “create the ability to coordinate programs”, and “create the ability to reduce duplication and overhead expenses”.

The organizational flow chart published this past week indicates that the programs presently within the Department of Aging would be dispersed among four new Offices and at least ten Bureaus and Divisions within an expanded DHS. The experiences I have recited, raises serious concerns about whether a department the size of the proposed DHHS can absorb and effectively administer the programs it will inherit from PDA.

For example, the public hearing jointly convened by Senator Brooks and Representative Hennessey in October 2016 revealed that DHS either did not understand or did not adequately prepare for the complexity, necessary components, or personal assistance required of the administrative service enrollment function for the elderly when DHS transferred that function from the AAAs and awarded it to a private bidder.

Rather than rushing to repeal the Department of Aging, wouldn't it make more sense to have the Administration and DHS focus upon fully resolving the enrollment issue; Focus upon Implementing its massive and complex Community Health Choices managed care program, which is scheduled to begin here in Southwestern Pennsylvania in January; Focus upon resolving non-uniform IT issues; And focus upon addressing other Harrisburg back office issues, such as human resources and licensing, that are not unique, and need not be unique, to any one department? None of these outstanding issues requires the repeal of the Department of Aging to resolve and focusing upon addressing what can be done with far less controversy and disruption can begin to reduce duplication and overhead costs more quickly.

And none of these issues requires a risky return to a failed structure of the past with a hope that it would somehow work better today.

Finally, we should not mistake the relative quiet of our seniors today as opposed to the activism we experienced in the 1970's. They have been caught by surprise both by the proposal and the speed with which the Administration wants to have it approved. However, they are becoming aware of the proposal, organizing, and I have no doubt we will hear from them.

Thank you for your consideration of my testimony and for your hard work and dedication in evaluating this proposal.



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