



Lifespan Respite Care Act (P.L. 109-442)
FY 14 Appropriations Alert



The Lifespan Respite Care Program (LRCP) provides competitive grants to state agencies working in concert with Aging and Disability Resource Centers and non-profit state respite coalitions or organizations to make quality respite available and accessible to family caregivers regardless of age or disability through the establishment of State Lifespan Respite Systems.

Appropriations Status: The Lifespan Respite Care Program received first-time funding (\$2.5 million) in FY 09 and level funding in FY 2010 - FY 2012. FY 13 funding was reduced below \$2.5 million by the recent sequester.

Implementation Status: Thirty states and DC each received \$200,000 3-year LRCP infrastructure grants from the US Administration on Aging (AoA). Some of these states also received Expansion grants or Integration and Sustainability grants to continue their important work.

- ➔ ***FY14 Funding Request:*** Aware of severe budget constraints facing the Administration and Congress, the Lifespan Respite Task Force and its 200 national, state and local member organizations are reducing their request from last year to \$2.5 million for FY 14.
- ➔ ***ACTION:*** ***Call your House Members and Senators today and ask them to support at least \$2.5 million in the FY 14 Labor/HHS/Education funding bill.***
- ➔ ***Contact:*** ***To identify your Representative, visit www.house.gov. To reach your Representative, call 202-225-3121. To indentify your two Senators, visit www.senate.gov . To reach them, call 202-224-3121.***

Grantees Making a Difference

- ❑ This small amount of funding is allowing grantees to build coordinated systems of respite for all family caregivers and to expand respite to family caregivers who often fall through the cracks.
- ❑ Grantees are delivering services and helping families pay for respite, especially for those caring for someone between the ages of 18-60; children, adults, and the aging on Medicaid waiver waiting lists; grandparents raising grandchildren; rural family caregivers; culturally diverse groups and others identified as having unmet needs in the state.

- ❑ Grantees are building respite capacity through provider training and recruitment. Others have issued small grants to community-based organizations to start new respite programs or initiate unique volunteer and faith-based initiatives to provide respite.

Respite Among Most Critically Necessary and Beneficial Family Support Services

- ❑ ***The nation's 65 million family caregivers provide 80% of long-term care, yet 89% do not receive any respite services.***
- ❑ Caring for the aging population is a growing issue and currently more than half of care recipients (56%) are under age 75, and almost one-third (28%) are under age 50. Caregiving is a lifespan issue.
- ❑ Family caregivers have high mortality rates, rates of acute and chronic conditions, and depression. Respite, the most frequently requested support service among family caregivers, has been shown to provide them with relief necessary to maintain their own health, bolster family stability, keep marriages intact, and avoid or delay more costly nursing home, foster care or other facility-based placements. Yet, respite is in short supply or inaccessible for all age and disability groups.

Respite Can Be a Tool in Economic Recovery

- ❑ In these times of serious budget constraints, the economic value of respite is exceptional. Delaying nursing home or institutional care of just one individual with a chronic condition for several months can save Medicaid, private insurance, or the family tens of thousands of dollars.
- ❑ Researchers at the University of Pennsylvania studied the records of over 28,000 children with autism ages 5 to 21 who were enrolled in Medicaid in 2004. They concluded that for every \$1,000 states spent on respite services in the previous 60 days, there was an 8 percent drop in the odds of hospitalization (Mandell, David S., et al, 2012).
- ❑ According to AARP, the estimated economic value of family caregivers' unpaid contributions was approximately \$450 billion in 2009, up from an estimated \$375 billion in 2007. Including caregiving for children with special needs would add another \$50 to \$100 billion to the economic value of family caregiving (AARP, 2011).
- ❑ American businesses lose \$17.1 to \$33.6 billion annually in lost productivity costs related to caregiving responsibilities (Metropolitan Life (MetLife) Mature Market Institute, 2006).
- ❑ Along with financial assistance for caregiving through direct voucher payments or tax credits, respite is the number one national policy related to service delivery that family caregivers prefer (*NAC and AARP, 2009*).

For more talking points, including the number of family caregivers in your state and the economic value of their family caregiving, please visit the [NRCs Fact Sheets and Talking Points](#).

<http://archrespite.org/national-respite-coalition/national-respite-coalition#FACTS>

Prepared by the ARCH National Respite Coalition. For more information, please contact Jill Kagan at jbkagan@verizon.net, by phone at 703-256-2084 or visit www.archrespite.org. Updated April 2013.