

The Honorable Tom Harkin, Chairman
Labor, HHS Education Appropriations Subcommittee
131 Dirksen Office Building
US Senate
Washington, DC 20510

Dear Chairman Harkin,

As you proceed in drafting a final FY08 Labor, HHS, Education funding bill, we, the undersigned national organizations, are writing to thank you for your leadership on this issue and to urge you to retain language reserving the **\$2 million for the Lifespan Respite Program (PL 109-442) as agreed to in the FY 08 Labor, HHS, Education Appropriations** conference agreement. As you know, the conference agreement sets aside \$2 million in the Department of Health and Human Services Secretary's General Management Fund for the Lifespan Respite Care Act.

The Lifespan Respite Care Act authorizes competitive grants to Aging and Disability Resource Centers in collaboration with a public or private non-profit state respite coalition or organization to make quality respite available and accessible to family caregivers regardless of age or disability. The law allows grantees to identify, coordinate and build on federal, state and local respite resources and funding streams, and would help support, expand and streamline planned and emergency respite, provider recruitment and training, and caregiver training.

The nation's estimated 50 million family caregivers provide 80% of long-term care. Respite, the most frequently requested family support service, has been shown to provide family caregivers with the relief necessary to maintain their own health, bolster family stability, keep marriages intact, and avoid or delay more costly nursing home or foster care placements. No other federal program provides a focus on respite programs, delivery, capacity building or quality assurance for all age groups and conditions.

We know what to do. The Act is based on model State Lifespan Respite Systems in Oregon, Nebraska, Wisconsin and Oklahoma, which provide easy access to an array of affordable, quality respite services; ensure flexibility to meet diverse needs; and assist with locating, training, and paying respite providers. For families and individuals who may not qualify for any other public or private respite funding streams, including children with severe disabilities, teens with serious emotional conditions, and adults with Multiple Sclerosis, ALS, traumatic brain injury, spinal cord injuries, cancer, Alzheimer's and many other chronic conditions, these programs may be holding out the only helping hand.

In these times of serious budget constraints, the economic value of respite is exceptional. Delaying nursing home or institutional placement of just one individual with a chronic condition for several months can save Medicaid, private insurance, or the family thousands of dollars. The value of uncompensated family caregiving services to the U.S. economy is estimated at \$350 billion a year, as much as total spending for the Medicare program (\$342 billion in 2005); more than total spending for Medicaid, including both federal and state contributions and both medical and long-term care (\$300 billion in 2005); and more than the amount of the U.S. budget deficit (\$248 billion in FY 2006). In addition, American businesses lose \$17.1 to \$33.6 billion annually in lost productivity costs related to caregiving responsibilities.

We urge you to retain language in the final FY 08 funding bill reserving the **\$2 million for the Lifespan Respite Program (PL 109-442) as agreed to in the FY 08 Labor, HHS, Education Appropriations** conference agreement and thank you for your ongoing leadership on this issue. The program has strong bipartisan support and the Act passed unanimously in both

chambers in the 109th Congress. Send a message to the nation's family caregivers that we value their health and well-being and that help is on the way.

Sincerely,

ACCSES

Alzheimer's Association

American Association for Geriatric Psychiatry

American Association of Homes and Services for the Aging

American Association on Intellectual & Developmental
Disabilities

American Health Care Association

American Music Therapy Association

American Network of Community Options and Resources

American Psychological Association

American Society on Aging

Association of University Centers on Disabilities

Bazelon Center for Mental Health Law

Easter Seals

Epilepsy Foundation

Family Voices

Jewish Federation of Metropolitan Chicago

National Alliance for Caregiving

National Association for Home Care & Hospice

National Association of Social Workers

National Association of State Head Injury Administrators

National Association of State Directors of Special Education

National Center for Assisted Living

National Center on Caregiving at Family Caregiver Alliance

National Council on Aging

National Down Syndrome Society

National Family Caregiver Association

National Foster Parent Association

National Gerontological Nursing Organization

National Hospice and Palliative Care Organization

National Multiple Sclerosis Society

National Rehabilitation Association

National Respite Coalition

National Spinal Cord Injury Association

Paralyzed Veterans of America

The ALS Association

The Arc of the United States

United Cerebral Palsy

Well Spouse Association