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113TH CONGRESS
2D SESSION

S. 2763

To amend the Older Americans Act of 1965 to create a collaborative network with a single point of entry for services and supports, to improve programs to prevent elder financial exploitation, to create a community care wrap-around support demonstration program, and to create a national campaign to raise awareness of the aging network and promote advance integrated long-term care planning, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JULY 31, 2014

Mr. MERKLEY introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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A BILL

To amend the Older Americans Act of 1965 to create a collaborative network with a single point of entry for services and supports, to improve programs to prevent elder financial exploitation, to create a community care wrap-around support demonstration program, and to create a national campaign to raise awareness of the aging network and promote advance integrated long-term care planning, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Older Americans Community Access Revitalization and Education Act'' or the ''Older Americans CARE Act''.

SEC. 2. DEFINITIONS.

(a) AGING AND DISABILITY RESOURCE CENTER.—

(1) IN GENERAL.—Section 102(4) of the Older Americans Act of 1965 (42 U.S.C. 3002(4)) is amended to read as follows:

''(4) The term 'Aging and Disability Resource Center' means a collaborative network that has a no wrong door single entry point system (as described in section 10202(c)(5)(A) of the Patient Protection and Affordable Care Act (42 U.S.C. 1396d note; referred to individually in this Act as a 'no wrong door system')) and a comprehensive and integrated program that—

''(A) is established by the State agency and administered as identified by the State in the State plan described in section 307 as part of a State system of integrated long-term care for individuals with disabilities and older individuals;

''(B) is planned and implemented in a manner that involves formal partnerships, es-

tablished between aging and disability agencies and organizations—

"(i) that are established so that individuals of all ages with needs for integrated long-term care, can be properly reached and served within their communities, while maximizing self-direction; and

"(ii) each of which is comprised of—

"(I) the State agency and area agencies on aging at the State and local levels, respectively; and

"(II) State and local disability agencies and organizations, including State independent living councils and centers for independent living, entities serving individuals with developmental, physical, mental, or cognitive disabilities, consumers, advocates, and other entities and individuals;

"(C) provides a coordinated system for providing—

"(i) an approach for providing access, information, referrals, and assistance that is person-centered, is a no wrong door system, goes beyond providing access, infor-

mation, referrals, and assistance available under or coordinated through this Act, and serves all individuals regardless of age, income, disability, or state of long-term care services and supports planning;

''(ii) comprehensive information on the full range of available public and private programs of health and integrated long-term care, and options counseling, service providers, and resources for such programs, within a community and within a State, including information on the availability of integrated long-term care;

''(iii) personal and peer counseling to assist individuals in assessing their existing or anticipated needs and goals for integrated long-term care, and assisting the individuals in developing and implementing a plan for integrated long-term care, consistent with their desires and designed to meet their specific priorities, goals, needs, and circumstances; and

''(iv) an approach that supplements consumer access to the full range of publicly supported programs of integrated

long-term care, including home-based and community-based options, for which consumers may be eligible; and

''(D) builds on but does not replace the roles and responsibilities of entities in the State aging network to support people seeking access to community living opportunities, as specified in this Act, or of other aging and disability agencies and organizations.''.

(2) TECHNICAL AMENDMENT.—Section 102(1) of the Older Americans Act of 1965 (42 U.S.C. 3002(1)) is amended by inserting '', except when used as part of the term 'financial abuse','' before ''means''.

(b) LGBT INDIVIDUALS.—

(1) IN GENERAL.—Section 102 of the Older Americans Act of 1965 (42 U.S.C. 3002) is amended—

(A) in paragraph (24)—

(i) in subparagraph (B), by striking ''and'' at the end;

(ii) in subparagraph (C), by striking the period and inserting ''; and''; and

(iii) by adding at the end the following:

''(D) status as an LGBT individual.'';

(B) by redesignating—

(i) paragraphs (36) through (54) as paragraphs (38) through (56), respectively; and

(ii) paragraphs (34) and (35) as paragraphs (35) and (36), respectively;

(C) by inserting after paragraph (33) the following:

''(34) The term 'LGBT', used with respect to an individual, means a lesbian, gay, bisexual, or transgender individual.''; and

(D) by inserting after paragraph (36), as so redesignated, the following:

''(37) The term 'minority', used with respect to an individual, includes a lesbian, gay, bisexual, or transgender individual.''.

(2) CONFORMING AMENDMENT.—Section 215(e)(1)(J) of the Older Americans Act of 1965 (42 U.S.C. 3020e–1(e)(1)(J)) is amended by striking ''minorities'' and inserting ''minority individuals''.

SEC. 3. CREATION OF NATIONAL CAMPAIGN TO RAISE AWARENESS OF THE AGING NETWORK AND PROMOTE ADVANCE INTEGRATED LONG-TERM CARE PLANNING.

(a) IN GENERAL.—Section 202(b) of the Older Americans Act of 1965 (42 U.S.C. 3012(b)) is amended by striking paragraph (6) and inserting the following:

''(6) promote, through a coordinated public education and outreach campaign carried out by the National Eldercare Locator Service described in subsection (a)(21) and in coordination with other appropriate Federal agencies—

''(A) enhanced awareness by the public of the importance of planning in advance for integrated long-term care; and

''(B) the availability of national, State, and local information and resources to assist in such planning, as well as the existence of area agencies on aging and other aging service providers to provide direct assistance with such planning;''.

(b) AUTHORIZATION OF APPROPRIATIONS.—Section 216 of the Older Americans Act of 1965 (42 U.S.C. 3020f) is amended—

(1) by redesignating subsection (c) as subsection (d); and

(2) by inserting after subsection (b) the following:

''(c) NATIONAL CAMPAIGN.—There is authorized to be appropriated to carry out section 202(b)(6), $3,000,000 for each of fiscal years 2015 through 2019.''.

SEC. 4. NO WRONG DOOR NETWORKS.

Section 202(b)(8) of the Older Americans Act of 1965 (42 U.S.C. 2012(b)(8)) is amended—

(1) in the matter preceding subparagraph (A), by striking ''Aging and Disability Resource Centers—'' and inserting ''networks, such as Aging and Disability Resource Centers, that are built on information, referral, and assistance programs run by aging and disability agencies and are collaborative networks with no wrong door systems—'';

(2) in subparagraphs (A), (C), and (D), by striking ''long-term care'' each place it appears and inserting ''integrated long-term care'';

(3) in subparagraph (A), by striking ''community-based care'' and inserting ''community-based care services and supports''; and

(4) in subparagraph (B), by striking ''their care'' and inserting ''their care services and supports''.

SEC. 5. SUPPORTIVE SERVICES AND SENIOR CENTERS PROGRAM.

Section 321(b)(1) of the Older Americans Act of 1965 (42 U.S.C. 3030d(b)(1)) is amended by inserting ''or modernization'' after ''construction''.

SEC. 6. PILOT PROJECT ON SERVICES FOR RECIPIENTS OF FEDERALLY ASSISTED HOUSING.

Part A of title IV of the Older Americans Act of 1965 (42 U.S.C. 3032 et seq.) is amended by adding at the end the following:

''SEC. 423. PILOT PROJECT ON SERVICES FOR RECIPIENTS OF FEDERALLY ASSISTED HOUSING.

''(a) DEFINITION.—In this section, the term 'federally assisted housing' means—

''(1) multifamily housing financed, insured, or subsidized by the Rural Housing Service of the Department of Agriculture or by the Department of Housing and Urban Development; or

''(2) housing provided under the Low Income Housing Tax Credit program carried out under section 42 of the Internal Revenue Code of 1986.

''(b) FUNDING.—The Assistant Secretary may provide funding for a service provided under this Act (including title V) packaged and targeted for residents of federally assisted housing. The Assistant Secretary may provide such funding for a period of 2 years.

''(c) RECIPIENTS.—The Assistant Secretary shall provide funding made available under subsection (b) through area agencies on aging, other entities approved by the Assistant Secretary, or designees of the agencies or entities, to not-for-profit owners or managers of the housing.

''(d) EVALUATIONS AND REPORTS.—

''(1) EVALUATIONS.—Each agency, entity, or designee that receives funding under this section shall evaluate the effectiveness of the services provided through the funding.

''(2) REPORTS.—The agency, entity, or designee shall, not later than 90 days after the end of the funding period, prepare and submit to the Assistant Secretary a report containing the results of the evaluation.

''(e) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section such sums as may be necessary for each of fiscal years 2015 through 2017. Such sums shall remain available through fiscal year 2018 for the purpose of carrying out the evaluations and reports under subsection (d).''.

SEC. 7. COMMUNITY CARE WRAP-AROUND SUPPORT DEMONSTRATION PROGRAM.

Part A of title IV of the Older Americans Act of 1965 (42 U.S.C. 3032 et seq.), as amended by section 6, is further amended by adding at the end the following:

"SEC. 424. COMMUNITY CARE WRAP-AROUND SUPPORT DEMONSTRATION PROGRAM.

"(a) DEFINITIONS.—

"(1) COMMUNITY CARE WRAP-AROUND SUPPORT PARTNERSHIP.—The term 'community care wrap-around support partnership' means a partnership that—

"(A) carries out a program that serves not fewer than 30 eligible older individuals;

"(B) includes—

"(i) a designated care coordinator, who may be a nurse, registered dietitian, case manager, health coach, or social worker, from an eligible entity and who, in consultation with a primary care physician or another relevant specialist described in clause (ii), will be responsible for coordinating services and supports offered under title III for an older individual; and

"(ii) a consulting primary care physician, or other relevant specialist, receiving

compensation for participation in the partnership in a manner determined by the Assistant Secretary; and

''(C) may include an individual—

''(i) who is listed in the plan for the community care wrap-around support partnership described in subsection (c)(2);

''(ii) for whom the eligible older individual gives consent to participate in the community care wrap-around support partnership, as that partnership relates to the eligible older individual; and

''(iii) whose relationship to the older individual is that of—

''(I) a family member, close personal friend, or unpaid designated caregiver;

''(II) a legal or financial advisor;

''(III) a home care provider;

''(IV) a provider of transportation;

''(V) a registered dietitian; or

''(VI) a rehabilitation professional.

''(2) ELIGIBLE ENTITY.—The term 'eligible entity' means—

''(A) an area agency on aging;

''(B) a home or community-based provider of the activities described in subsection (d) (such as a home care agency, or entity operating a senior center or adult day care facility); or

''(C) another qualified entity the Assistant Secretary determines to be appropriate to carry out the activities described in subsection (d).

''(3) ELIGIBLE OLDER INDIVIDUAL.—The term 'eligible older individual' means an older individual who—

''(A) is age 65 or older;

''(B) who is eligible to receive assistance under this Act;

''(C) who elects to enroll in the demonstration program, as described in subsection (e); and

''(D) who—

''(i) has difficulty completing 2 or more activities of daily living;

"(ii) has had at least one nonelective hospital admission within the past 12 months;

"(iii) has received acute or subacute rehabilitation services within the past 12 months; or

"(iv) meets such other criteria as the Assistant Secretary determines to be appropriate.

"(b) PROGRAM AUTHORIZED.—

"(1) IN GENERAL.—The Assistant Secretary shall establish a demonstration program (referred to in this section as the 'demonstration program' and to be commonly known as the 'community care initiative') through which the Assistant Secretary shall make grants to eligible entities in order to enable such eligible entities to—

"(A) establish community care wrap-around support partnerships; and

"(B) support the partnerships, enabling the partnerships to carry out the activities described in subsection (d).

"(2) DURATION.—Each grant awarded under this section shall be for a period of 2 years.

"(c) APPLICATION.—

''(1) IN GENERAL.—Each eligible entity desiring a grant under this section shall submit an application to the Assistant Secretary at such time, in such manner, and accompanied by such information as the Assistant Secretary may reasonably require.

''(2) CONTENTS.—The application described in this subsection shall include, at a minimum—

''(A) a plan describing the individuals, as listed in subsection (a)(1)(C), that will, upon consent of an eligible older individual, participate in the community care wrap-around support partnership as that partnership relates to the eligible older individual;

''(B) a clear description of—

''(i) the protocols the eligible entity will implement to identify the needs of older individuals receiving services and supports through the partnership;

''(ii) the range of intervention and supportive services and supports that the eligible entity will implement; and

''(iii) preliminary evidence of the efficacy or effectiveness of the approach the eligible entity proposes to use in providing

services and supports through the partnership; and

''(C) an assurance that the partnership will collect the information determined by the Assistant Secretary under subsection (h)(1).

''(d) USE OF FUNDS.—An eligible entity that receives a grant under this section shall use the grant funds to establish a community care wrap-around support partnership and support the partnership, including requiring the partnership to—

''(1) connect each participant with the community care wrap-around support partnership;

''(2) assess each eligible older individual using a standardized assessment instrument, such as a comprehensive assessment reporting evaluation;

''(3) establish longitudinal care plans for each eligible older individual; and

''(4) provide comprehensive, coordinated, and continuous virtual or in-person access to the services and supports offered under this Act, tailored to the specific needs of the older individual involved, which may include one or more of the following:

''(A) Medication management.

''(B) Medical nutrition therapy with a registered dietitian for individuals requiring dietary modification for chronic disease management.

''(C) Limited environmental modifications, such as safety equipment for showering, bathing, or toileting or installation of safety, health, and wellness monitoring technologies for an eligible older individual.

''(D) Nutritional and dietary supports, which may include nutrition counseling, education, and the delivery of meals to the home or assistance with purchasing groceries in order to—

''(i) assure an appropriate diet consistent with the medical needs, cultural background, and faith traditions of an eligible older individual; and

''(ii) identify opportunities for socialization within the home or the community of an eligible older individual in order to enhance the ability to participate in healthy nutritional habits.

''(E) Transportation in order to meet the medical and social needs of an eligible older individual.

"(F) Psychosocial supports to prevent isolation and the potential for depression and cognitive decline, which often accompany the lack of human interaction.

"(G) Opportunities for exercise, as tolerable and appropriate, to prevent further physical decline that may lead to preventable disability.

"(H) Opportunities for enjoyment through activities or interactions, in person or virtually, that enhance an eligible older individual's life, relationships, well-being, or sense of productivity, including providing the opportunities through the use of technology products.

"(e) ELECTION TO PARTICIPATE.—The Assistant Secretary shall determine and carry out an appropriate method of ensuring that eligible older individuals have agreed to enroll in a community care wrap-around support partnership program. Enrollment in the demonstration program shall be voluntary.

"(f) COMPLIANCE WITH OTHER LAWS.—

"(1) REGULATIONS.—Notwithstanding any provision of this section, each eligible entity receiving a grant under this section shall ensure that the activities carried out under the grant comply with the reg-

ulations promulgated pursuant to section 264(c) of the Health Insurance Portability and Accountability Act of 1996 (42 U.S.C. 1320d–2 note), the Health Information Technology for Economic and Clinical Health Act (title XIII of division A and title IV of division B of Public Law 111–5), and the amendments made by such Act.

''(2) GUIDANCE.—The Assistant Secretary shall ensure that the activities carried out under this section are consistent with the guidance issued by the Secretary on June 6, 2014, for implementing standards for person-centered planning and self-direction in home and community-based services programs, under section 2402(a) of the Patient Protection and Affordable Care Act (42 U.S.C. 1396n note).

''(g) PARTNERSHIP INFORMATION COLLECTION.—

''(1) DURING THE FIRST YEAR OF THE DEMONSTRATION PROGRAM.—

''(A) IN GENERAL.—During the first year of the demonstration program, the community care wrap-around support partnership, through the designated care coordinator described in subsection (a)(1)(B)(i), shall maintain a record for each eligible older individual who is served through the demonstration program. Such

record shall include detailed information about the services and supports provided to the eligible older individual through the demonstration program and shall be incorporated into the electronic health record of the eligible older individual.

''(B) CONTENTS.—The Assistant Secretary shall determine the information to be collected in each record described in subparagraph (A), which may include information on the types of services and supports provided, referrals, members of the community care wrap-around support partnership, and an impact statement on the health of the eligible older individual served.

''(2) DURING THE SECOND YEAR OF THE DEMONSTRATION PROGRAM.—During the second year of the demonstration program, in addition to maintaining the record described in paragraph (1), the designated care coordinator described in subsection (a)(1)(B)(i) shall ensure that, through the record described in paragraph (1), the community care wrap-around support partnership is able to—

''(A) determine gaps in the provision of services that can assist in the provision of com-

prehensive health and wellness care for the eligible older individual;

"(B) connect the eligible older individual to services under this Act that will address any such gaps; and

"(C) subject to the consent of the eligible older individual, make appointments for the eligible older individual to receive needed services and ensure that such participant's primary care physician and caregiver receive notice of the needs.

"(h) DETERMINATION OF THE DEMONSTRATION PROGRAM EFFECT ON PATIENT OUTCOMES.—

"(1) TRANSFER OF INFORMATION.—Each eligible entity shall collect, from each community care wrap-around partnership supported by the eligible entity, and report to the Assistant Secretary (in such form and manner, and at such frequency, as shall be specified by the Assistant Secretary) such data as the Assistant Secretary determines to be appropriate to monitor and analyze the demonstration program.

"(2) INDEPENDENT ANALYSIS OF THE DEMONSTRATION PROGRAM.—The Assistant Secretary shall enter into an agreement with an entity to con-

duct an independent analysis, in consultation with the Administrator for the Centers for Medicare & Medicaid Services, and make a determination of whether the activities described in subsection (d) result in—

"(A) a reduced number of hospital days (other than days an eligible older individual elects to remain in the hospital);

"(B) reduced hospital readmissions for eligible older individuals;

"(C) reduced emergency room visits for eligible older individuals;

"(D) improved health outcomes commensurate, in each individual case, with the eligible older individual's stage of chronic illness;

"(E) improved efficiency of care, such as a reduction of duplicative diagnostic and laboratory tests, for eligible older individuals;

"(F) a reduced cost of health care services;

"(G) improved or maintained nutrition status, to manage chronic disease;

"(H) any delay of entry of eligible older individuals into institutional care; and

"(I) any other outcomes measures the Assistant Secretary determines to be appropriate.

''(3) IMPACT STUDY.—

''(A) EVALUATION.—The Assistant Secretary, in consultation with the Administrator for the Centers for Medicare & Medicaid Services and using the information and data collected under this subsection and subsection (g), shall conduct an evaluation of the demonstration program, including comparing the well-being and costs of care of participants in a community care wrap-around support partnership program, to the well-being and such costs for patients who have not participated in such a program, to determine the impact of the additional services and supports provided through such a program and shall prepare findings from the evaluation.

''(B) DETERMINATION ON EXPANSION.—Based on the evaluation conducted under subparagraph (A) and the independent analysis conducted under paragraph (2), the Assistant Secretary, in consultation with the Administrator for the Centers for Medicare & Medicaid Services, shall determine whether expansion of the demonstration program is appropriate. If so, the Assistant Secretary, in consultation with

such Administrator, shall prepare a plan specifying—

''(i) whether the expanded program should involve a greater number of grants to eligible entities, for community care wrap-around support partnership programs based on subsections (a) through (g);

''(ii) whether the expanded program should involve grants to regional, statewide, or multi-State combinations of eligible entities to engage corresponding community care wrap-around support partnerships in corresponding areas, for such programs based on subsections (a) through (g); and

''(iii) whether the expanded program should be carried out through the Administration on Aging and the Center for Medicare and Medicaid Innovation.

''(4) REPORT TO CONGRESS.—Not later than 1 year after the end of the demonstration program, the Assistant Secretary shall submit to Congress a report containing the findings, the results of the independent analysis, the determination, and any plan, prepared under paragraphs (1) through (3).

''(5) EXPANDED PROGRAM.—Subject to the availability of appropriations, if the report contains a plan prepared under paragraph (3)(B), the Assistant Secretary may implement the expanded program, in accordance with the plan, not sooner than 6 months after submission of the report.

''(i) IMPLEMENTATION DATE.—Not later than January 1, 2015, the Assistant Secretary shall issue a request for proposals to carry out this section.

''(j) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section such sums as may be necessary for each of fiscal years 2015 through 2019.''.

SEC. 8. PREVENTION OF ELDER ABUSE, NEGLECT, AND EXPLOITATION.

(a) INTERVENTION OR DEVICES.—Section 712(a)(3)(H) of the Older Americans Act of 1965 (42 U.S.C. 3058g(a)(3)(H)) is amended—

(1) in clauses (ii) and (iii), by striking ''and'' at the end;

(2) in clause (iii), by striking ''provide technical support for'' and inserting ''actively encourage and assist in''; and

(3) by adding at the end the following:

''(iv) identify interventions or devices (including adult bed rails) that affect the rights and safety of residents, including the use of chemical and physical restraints; and

''(v) educate providers, residents, and families about the danger of those interventions and devices; and''.

(b) USE OF ALLOTMENTS.—Section 721(e)(2) of the Older Americans Act of 1965 (42 U.S.C. 3058i(e)(2)) is amended, in the matter preceding subparagraph (A), by striking ''report'' and all that follows through ''subsection (b)(9)(B)(ii),'' and inserting ''report described in subsection (b) or a related referral''.

SEC. 9. PREVENTION OF FINANCIAL ABUSE, FRAUD, AND OTHER FINANCIAL EXPLOITATION.

(a) AUTHORIZATION OF APPROPRIATIONS.—Section 702 of the Older Americans Act of 1965 (42 U.S.C. 3058a) is amended—

(1) in subsection (c), by striking ''chapter 4'' and inserting ''chapter 5''; and

(2) by inserting after subsection (b) the following:

''(c) PREVENTION OF FINANCIAL ABUSE, FRAUD, AND OTHER FINANCIAL EXPLOITATION.—There are au-

thorized to be appropriated to carry out chapter 4, such sums as may be necessary for each fiscal year.''.

(b) PROGRAM.—Subtitle A of title VII of the Older Americans Act of 1965 (42 U.S.C. 3058 et seq.) is amended—

(1) by redesignating chapter 4 and section 731 as chapter 5 and section 736, respectively; and

(2) by inserting after chapter 3 the following:

"CHAPTER 4—PROGRAMS FOR PREVENTION OF FINANCIAL ABUSE, FRAUD, AND OTHER FINANCIAL EXPLOITATION

"SEC. 731. PREVENTION OF FINANCIAL ABUSE, FRAUD, AND OTHER FINANCIAL EXPLOITATION.

''(a) ESTABLISHMENT.—In order to be eligible to receive an allotment under section 703 from funds appropriated under section 702 and made available to carry out this chapter, a State agency shall, in accordance with this section, and in consultation with area agencies on aging, develop and enhance programs to address elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation).

''(b) USE OF ALLOTMENTS.—The State agency shall use an allotment described in subsection (a) to carry out, through the programs described in subsection (a), activi-

ties to develop, strengthen, and carry out programs for the prevention, detection, assessment, and treatment of, intervention in, investigation of, and response to elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation), including activities that—

''(1) fund programs that focus on outreach and education to older individuals and their families and support networks, on elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation);

''(2) promote and enhance programs, such as the Gatekeeper program, that train postal carriers, financial institutions, firefighters, meter readers, and other community professionals who are in a position to observe an older individual on a daily or regular basis—

''(A) to identify signs of elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation); and

''(B) to report such signs to the State agency responsible for adult protective services or an area agency on aging;

''(3) create a position for a statewide coordinator on elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation), within each State agency responsible for adult protective services or law enforcement, to act as a liaison with various financial institutions including the State agency responsible for consumer protection;

''(4) provide funding to States and area agencies on aging for trainers who are able to conduct outreach and education for older individuals in their natural living environment on—

''(A) identifying signs of elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation);

''(B) how to respond to practices described in subparagraph (A); and

''(C) how to get help from local resources;

''(5) fund programs that capture data, and perform data analysis, on the prevalence of elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation) at the State and national level;

''(6) provide intake workers or hotlines that are able to take calls directly from older individuals,

their family members, and community professionals in their planning and service areas, about elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation);

''(7) provide funding to States and area agencies on aging for the services of forensic accountants to track and identify elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation);

''(8) fund programs and arrangement that will safeguard victims' or potential victims' finances, such as daily money management programs and conservatorships; and

''(9) fund pilot programs to test innovative practices in local communities, to develop partnerships across disciplines for the prevention, investigation, and prosecution of elder abuse, neglect, and exploitation (including financial abuse, fraud, and other financial exploitation).''.

(c) CONFORMING AMENDMENT.—Section 202(a)(23) of the Older Americans Act of 1965 (42 U.S.C. 3012(a)(23)) is amended by striking ''sections 307(a)(18) and 731(b)(2)'' and inserting ''section 307(a)(13) and section 736''.

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