We all deserve to age as we desire, at home in our communities, and connected to family and friends. We all deserve to be able to meet our basic needs and receive quality health care we can afford.

Unfortunately, for many older Americans, that vision is out of reach. Senior poverty is on the rise across the United States. Over 7.1 million older Americans struggle just to get enough to eat, pay the rent, and visit a doctor. And more older adults are aging into poverty and homelessness every year.

The nation has a system of supports in place and the wealth to solve senior poverty for both today’s older adults and future generations. But we must expand, improve, and protect the system to enable every older American to age with justice. At Justice in Aging, we use impact litigation and administrative and legislative advocacy to fight senior poverty on a systemic level. We also train thousands of advocates a year to help individual seniors.

Because poverty disproportionately impacts those who have experienced discrimination, we focus our efforts primarily on older women, people of color, LGBT+ individuals, and people with limited English proficiency.
Over the past year, low-income older adults have faced a constant onslaught of threats to their health care and economic security. As the only national organization dedicated to fighting senior poverty using the power of law, Justice in Aging was made for moments like this. We’ve been right there on the front lines providing timely analysis and information to advocates serving low-income older adults. We’ve been there alongside our partners speaking out against proposed cuts to critical programs older adults need. We didn’t win every battle, but we did stop some of the worst proposed changes from happening.

This past year, we’ve also had notable successes in advancing proposals to improve upon the current health care system. We convinced the Centers for Medicare and Medicaid Services to make changes that limit illegal billing of dual eligibles. And, as a result of our advocacy, the state of California has reinstated full dental benefits in its Medi-Cal program. These positive changes will impact the lives of millions of seniors.

On the litigation front, in 2017 we began implementing relief in a case against the Social Security Administration for unfair denials of benefits. We are currently litigating a lawsuit against the state of California for denying Medicaid benefits for in-home care. Thousands of older adults will see relief from these cases.

You can read more about these exciting wins in the following pages. We couldn’t have done any of this without our valued donors, funders, and partners. Knowing you are right there with us bolsters us in this work.

*With your support, we can continue to advance Justice in Aging for all.*

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Kevin Prindiville  
Executive Director

Phyllis J. Holmen  
Chair, Board of Directors

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FIGHTING FOR JUSTICE IN AGING

Ortencia is a fighter.

You need to be a fighter to make it to 86 years old and get by on an income of less than $1,000 a month. Ortencia creatively stretches each dollar to pay her rent, buy food and medication, and get to the senior center for hot lunch and companionship. Every day, every week, every month is a quiet fight.

Thankfully, Ortencia doesn’t have to fight alone. Because of the generous support of our donors and funders, Justice in Aging is able to create, improve, and defend a system of public programs that ensure Ortencia has what she needs to make ends meet and get the health care she needs.

We refuse to let this vision of JUSTICE IN AGING FOR ALL be compromised.

The need for a robust safety net is growing, just as policymakers in Washington, DC are working to undermine the programs that seniors like Ortencia need. There are now more than 7.1 million seniors living in poverty across the country. Older women like Ortencia who worked in low-paying jobs and took time to care for their families are particularly at risk.

“I see it’s going to be harder for the next generation. So whenever I can help, I do. Because the next generation’s going to need that help.” – Ortencia

Ortencia is a fighter.
In the face of these federal threats, we’re fighting back. In 2017, Justice in Aging fought back against multiple attempts to cut Medicaid and Medicare. We are gearing up for attempts to cut Social Security, SNAP (food stamps), Supplemental Security Income (SSI), Older Americans Act programs like Meals on Wheels and legal services for seniors, and more attempts against Medicaid and Medicare that would be devastating for older adults and their families. This is the moment when we decide, as a nation, how we’re going to treat older adults today, and for many generations to come.

In the year ahead, we will continue our laser focus on protecting critical programs that make Justice in Aging possible for older adults aging in poverty.

“I see it’s going to be harder for the next generations. So whenever I can help, I do. Someone gonna need that help.” – Ortencia
FIGHTING FOR JUSTICE IN THE COURTS

In 2017, Justice in Aging lawsuits brought much needed relief to thousands of older adults.

Class action litigation is a powerful tool to enact widespread change that directly improves the lives of large groups of individuals who wouldn’t otherwise have access to justice in the courts.

Over the years, our impact litigation has returned billions of dollars in benefits to poor seniors who were unfairly denied the resources they need to survive.

KELLY V. KENT

Mr. Kelly is a 67-year-old veteran with primary progressive multiple sclerosis. Mr. Reed is a 62-year-old man who suffered a stroke, and has multiple sclerosis, Bell’s palsy, and vascular dementia. Both men need 24-hour care, and want to remain at home with their spouses and primary caregivers rather than moving into nursing facilities. We filed a lawsuit against the state of California for denying the men Medicaid benefits in violation of a federal law that aims to help people remain at home and prevents them from having to move into nursing facilities.

Mr. Kelly and Mr. Reed became our named plaintiffs in the lawsuit.

Mr. Kelly and Mr. Reed are both living at home with their spouses. While they have begun to receive needed services, systemic barriers to accessing Medicaid services continue to plague class members. In addition, plaintiffs seek retroactive benefits for the months or years that they were forced to pay for care. Litigation is ongoing.
Mr. Hart was permanently disabled and unable to work as a result of an injury. He moved in with his mother, and, relying on a small monthly Social Security Disability payment, he was able to get by. After a routine disability reevaluation, the Social Security Administration cut off his benefits on the grounds that he was no longer disabled, leaving him with no source of income. The erroneous medical report used to make this determination was written by a doctor who had been disqualified on the basis of faulty medical reports.

As a result of our lawsuit, many of the more than 7,000 individuals who were examined by this doctor and had their benefits denied or discontinued are now getting the opportunity to have their cases reexamined. One plaintiff had such severe medical issues that she was repeatedly hospitalized and unable to work. She waited almost five years after applying for SSI and SSDI benefits before this lawsuit enabled her to get benefits.

HART V. BERRYHILL

Thank you to our 2017 litigation partners, including Bet Tzedek, Disability Rights California, Western Center on Law and Poverty, Legal Aid Society of San Mateo County, and pro bono partners McDermott Will & Emery, and Morrison & Foerster LLP.
Economically vulnerable seniors need assistance connecting to programs that can deliver basic income supports. We help poor seniors qualify for income support programs like Social Security, Social Security Disability Insurance (SSDI), and Supplemental Security Income (SSI), and ensure that those programs are well run. We provide training and case consultations on SSI to thousands of advocates across the country each year. We are working to restore and improve the SSI program both at the federal and state level, improve the SSI appeals process at local offices across the country, and protect the economic security of those who need SSI or SSDI.

Our special project in California—the state with the highest rate of homeless and unsheltered people in the nation—aims to decrease the risk of homelessness among older adults by increasing participation in income support programs like SSI.

The average age of homeless adults is 50 years old. With more than 20 million older adults who are economically vulnerable and 38% of households with an older adult facing a high housing cost burden, millions are at risk of homelessness. And the needs of older homeless adults have become more serious—with individuals experiencing higher rates of disability and illness, which, coupled with poverty, increase the likelihood a senior will become homeless. Justice in Aging is finding innovative ways to prevent homelessness among older adults.

**RESOURCES TO PAY THE RENT**

Economically vulnerable seniors need assistance connecting to programs that can deliver basic income supports. We help poor seniors qualify for income support programs like Social Security, Social Security Disability Insurance (SSDI), and Supplemental Security Income (SSI), and ensure that those programs are well run. We provide training and case consultations on SSI to thousands of advocates across the country each year. We are working to restore and improve the SSI program both at the federal and state level, improve the SSI appeals process at local offices across the country, and protect the economic security of those who need SSI or SSDI.
In order to stay at home, many seniors and people with disabilities need help with everyday activities like bathing, getting dressed, and eating meals. The In-Home Supportive Services (IHSS) program provides essential in-home care to over 500,000 low-income older adults and people with disabilities throughout California. Keeping people at home and in their communities and out of nursing facilities is a priority of IHSS. Despite this benefit, the IHSS program does not offer services to homeless older adults and people with disabilities because they do not have a stable place where they can receive those services.

To bridge the gap for homeless older adults we created an IHSS Bridge Pilot Program in partnership with Alameda County and UCSF. This initiative taps new community resources so homeless older adults with disabilities can access in-home care services as they transition into stable housing.
We use stories from on-the-ground advocates about challenges older adults face in getting health care to push for changes that improve the system for all.

Mr. Lee needed to see his doctor, and was told he would have to pay the 20% Medicare co-insurance as a condition of his appointment. Because Mr. Lee is poor, he is dually eligible for both Medicare and Medicaid. Low-income, dually-eligible individuals like Mr. Lee cannot afford and, by law, are not required to pay most co-pays and other charges. Unfortunately illegal billing is widespread, and puts people like Mr. Lee at risk of hunger and homelessness. After investigating the problem, we learned that it often stems from both providers and beneficiaries not understanding the rules, so we persuaded the agency to include information about the protected status of dual eligibles in notices to both beneficiaries and providers. The agency also agreed to step up enforcement to stop the problem.
Ms. White is a 63-year old former health educator and social worker who, after suffering a significant decline in her health, lost her housing. She suffers from atherosclerosis, a heart disease that causes plaque to build up in her arteries, which blocks blood flow through her heart. She also has significant gum disease, due to her inability to pay for regular dental care. Her cardiologist warned that failing to obtain gum treatment could lead to inflammation in the heart and also increase plaque build-up, putting her at greater risk for a cardiovascular incident. She has Medi-Cal, but when Medi-Cal dental benefits were cut in California, gum treatment was one of the benefits slashed. As a result of Justice in Aging’s advocacy on the issue, the California Senate and Assembly voted to restore full dental benefits to Medicaid as part of its 2018 budget. As a result, Ms. White was able to get the gum treatment she needed in January.
Older adults, especially the growing population of poor older adults, have a complex array of unmet legal needs around health care, economic security, housing, elder abuse, and more. There are 45 million older Americans today, and by 2060, the number of older Americans will more than double to 98 million.

The National Center on Law and Elder Rights (NCLER) was created to meet the growing need for training and technical assistance on the top legal issues impacting older adults. Justice in Aging administers NCLER under contract with the Administration for Community Living at the Department of Health and Human Services.

In the first year, NCLER has empowered thousands of legal services and aging and disability network professionals to meet older adults’ complex legal needs.

- 24 webinars
- 13,000 advocates trained
- 1,000 professionals in 48 states and the District of Columbia received help with individual cases

With an exciting curriculum for 2018, we plan to expand the reach of NCLER to help the aging and legal services network improve the lives of older adults with the greatest needs.
The trainings and case consultations we provide to local advocates all over the country inform all of our work. Through our training program, we hear about the issues low-income older adults face in trying to access the benefits they need, and identify the most widespread, critical issues. We provide the knowledge advocates need to help their individual clients while working at the local and national level to fix the systemic issues.

KNOWLEDGE SHARED
The webinars and materials we distribute to thousands of advocates give them the legal tools and information they need to help millions of seniors. In 2017 we created and distributed materials on a wide variety of topics important to older adults, including Medicaid, Medicare, Social Security, SSI, dual eligibles, nursing home regulations, oral health, illegal billing, the Affordable Care Act, the tax bill, and more.

AWARD RECEIVED
In 2017, The National Consumer Voice for Quality Long-Term Care honored Justice in Aging with the Janet Wells Public Policy Award.
On March 30 we brought together advocates and partners from around Southern California for a fundraising event and award ceremony honoring Fernando Torres-Gil with the Paul Nathanson Distinguished Advocate Award.

2017 marked our 45th year of fighting senior poverty. We celebrated with partners, funders, and donors on both coasts.

On March 30 we brought together advocates and partners from around Southern California for a fundraising event and award ceremony honoring Fernando Torres-Gil with the Paul Nathanson Distinguished Advocate Award.

In Washington, DC on October 3, we celebrated by honoring Senator Ron Wyden (D-OR) with an Impact Award for his lifetime of work on behalf of older adults around the country.
THANK YOU TO OUR DONORS AND FUNDERS

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Justice in Aging means growing older where you wish and how you wish. It means living in a safe, stable home, being able to see a doctor when you need one, sufficient income to buy the medication you need to stay healthy, accessible transportation, having enough of the types of food you like to eat, community interaction, freedom from abuse, and much more.

Justice in Aging is a value that our donors, funders, staff, board, and partners share. Please consider putting that value to work for future generations by remembering Justice in Aging in your planned giving. A legacy gift to Justice in Aging in your will or trust solidifies your commitment to Justice in Aging for millions of older adults, now and in the future.

Contact Vanessa Barrington, Director of Individual Giving at vbarrington@justiceinaging.org to notify us of your intent to make a planned gift, or learn how to get started.
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Total FY2017 Revenue $3,963,878
Total FY2017 Expenses $3,038,047