



April 7, 2026

Dear Chairman Murray & Members of the Senate Health and Human Services Committee,

**RE: S2686**

I strongly support **S2686**. R.I. older adults deserve an independent advocate acting on their behalf and I thank Senator McKenney and the bill's co-sponsors for introducing this forward-looking bill to create an Office of Elder Advocate to protect the rights of our state's older adults.

### **Why an Office of Elder Advocate?**

#### Growing Older Population

I have been involved with aging policy in Rhode Island for many years including serving as Director of Elderly Affairs (DEA) in the 1990's when it was a cabinet level agency. Over these years our state has witnessed a dramatic demographic shift. Between 2010- and 2024- persons 65+ increased by 67,500 (ACS Tables S0103), now comprise 20% of our population and are projected to be one out of four persons by 2030!

#### Constrained State Funding

Despite the dramatic increase in the number of R.I. older adults, resources to provide support programs and services, especially for those living in the community, have not kept pace. In 1994 DEA had 67 FTE's and a revised \$26,548,552 budget (including \$13,872,403 state funds.) In 2011, the department was transitioned to a Division in the Department of Human Services and in 2019 renamed the Office of Healthy Aging. The Office has 33 FTEs and a revised budget FY2025 budget of \$38,279,233, less than half (\$14,364,444) were state funds. To maintain the level of state funds provided to DEA in 1994, state funds would have had to reach \$28,427,055 in 2025!

#### Fragmented Services

Services for older adults are fragmented. Agencies are not always in alignment and often compete for limited resources. The result is too many vulnerable older adults fall through the cracks when trying to deal with such issues as benefits, property rights and guardianship. They may not know where to turn nor be able to afford a private attorney. Older patients can languish in acute care hospitals for months or years due to a lack of appropriate alternatives and legal assistance. We have an excellent long term care ombudsman program but it only deals with persons receiving long term care and not the vast majority of community-dwelling older adults.

#### OHA Legal Assistance Limited

OHA has a volunteer guardian program but it has a huge backlog and only helps with guardian of the person and generally those living in institutions. OHA has no staff attorney to represent individual older adults with complex legal issues.

#### Elder Advocate Office Not duplicative

Why do we need an Office of Elder Advocate when we have the Office of Healthy Aging?

The proposed Office of Elder Advocate is not intended to duplicate nor usurp the duties of the Office of Healthy Aging. OHA has not had an attorney on staff for several years and, even if the funding OHA requested to support a part-time attorney to assist with the Volunteer Guardianship program and other legal tasks is provided, and which I fully support, that would be insufficient to carry out the responsibilities detailed for the Office Elder Advocate including representing individual older adults in courts or administrative hearings in order to protect their rights. Nor, and equally important, would such a part-time staff attorney have the independence needed to advocate for older adults in a systemic and holistic way free of dealing with the many bureaucratic challenges that too often impede action.

Thank you for your consideration of my support for S2686.

Sincerely,  
Maureen Maigret