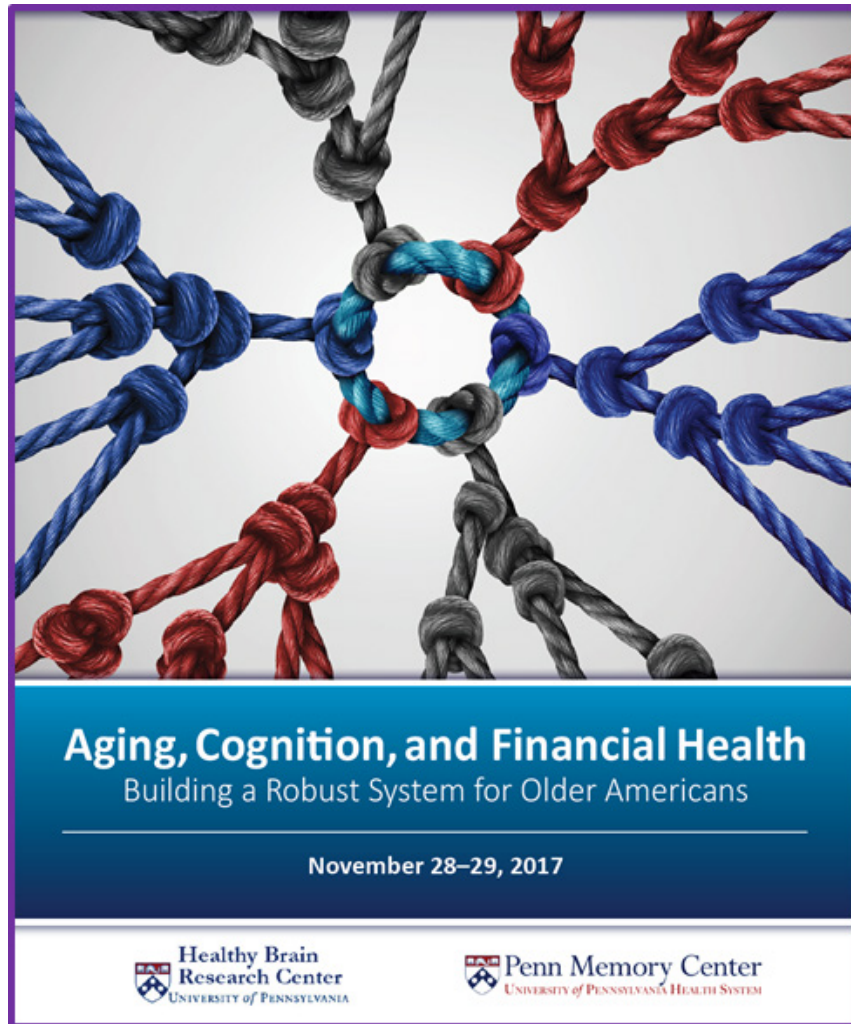




# Conference Summary



## Aging, Cognition, and Financial Health Building a Robust System for Older Americans

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September 2019



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## TABLE OF CONTENTS

I. Executive Summary .....	5
II. Introduction .....	8
III. Our Aging Population and the Road Ahead .....	8
IV. Perspectives on the Financial Needs of Older Adults .....	13
V. Challenges to Addressing Elder Financial Health .....	14
VI. Factors to Consider When Building Your Business Case .....	16
VII. Developing a Right-Sized Program for Your Organization .....	19
VIII. Getting on the Same Page: Standardization Before Aggregation .....	21
IX. Smart Data Collection for Intelligent Monitoring .....	23
X. Leveraging a Strong Data Foundation to Improve Health and Wealth .....	25
XI. Conclusion .....	28
Appendix. Conference Agenda .....	35

## I. Executive Summary

On November 28–29, 2017, the Federal Reserve Bank of Philadelphia’s Consumer Finance Institute cohosted a conference titled Aging, Cognition, and Financial Health: Building a Robust System for Older Americans.

Seven key takeaways emerged from the event.

### *1. Financial institutions should encourage older adults to plan for diminished financial capacity.*

After decades of financial independence, many adults are unable or unwilling to envision a future in which they are no longer able to independently pay their bills, deposit checks, or make sound investment decisions. Thus, they are often unprepared for diminished financial capacity and cognitive decline. They may enter old age lacking legal and financial safeguards, including a power of attorney for finances, a system to detect problems such as unpaid bills, and a trusted contact listed on all financial accounts.

Financial institutions are in a position to nudge older adults to establish these safeguards. For some institutions, doing so is now a requirement. Effective on February 5, 2018, an amendment to Rule 4512 required all Financial Industry Regulatory Authority (FINRA) members to make reasonable efforts to obtain the name and contact information of a trusted contact person when an account is opened for a noninstitutional customer or when a customer’s account information is updated.<sup>1</sup>

Since FINRA membership is limited to individual and corporate brokers and broker-dealers, commercial banks not engaged in securities transactions are not required to adhere to Rule 4512. This creates a significant coverage gap, particularly for older adults who maintain savings in traditional bank accounts (checking and savings accounts, money market accounts, or certificates of deposit).

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<sup>1</sup> FINRA, a nongovernmental organization that regulates member brokerage firms and exchange markets, is the largest independent regulator for all securities firms doing business in the United States.

Regardless of which type of institution older adults bank with, they should ensure that a trusted contact is listed on each account and that the trusted contact is aware of his or her responsibility.

### *2. Cognitive decline contributes to financial exploitation and fraud susceptibility.*

Diminished financial capacity can often be a signal of cognitive decline and may occur long before a doctor is able to detect and diagnose a problem. Dr. Patricia Boyle, professor of behavioral sciences at Rush Alzheimer’s Disease Center in the Rush University Medical Center, noted that, “changes in financial behavior are an early sign that age-related changes may be negatively affecting the brain and that an older person may be at risk for developing Alzheimer’s disease.”

Boyle’s research has found that lower levels of cognitive function and financial literacy in older adults can make them susceptible to financial exploitation and scams. Indeed, any medically diagnosed neurological condition, such as mild cognitive impairment (MCI) or Alzheimer’s disease (AD) — the leading cause of dementia — can make someone more susceptible to scams than a person with no cognitive impairment.

### *3. A banker or financial adviser may be the first to identify changes in a client’s financial capacity or suspect that fraud or financial exploitation is occurring.*

Since changes in financial behavior often precede a medically diagnosed cognitive disorder, a well-trained bank employee or financial adviser may notice an older client exhibiting atypical banking behaviors or initiating transactions consistent with fraud victimization or financial exploitation. For example, the client’s recent transaction history may contain unexplained withdrawals, wire transfers, or debit transactions, ACH transactions to new accounts, or checks issued to new or unusual recipients.

Clients may call their financial adviser several times a day with the same question, asking for the same information, or requesting a password reset. Signs of more nefarious activity may include visits to a branch accompanied by a new friend or caregiver who will not allow the older client to speak without him or her being present.

With consumers doing more banking online, financial institutions could employ monitoring software to detect diminished financial capacity, fraud, and financial exploitation. Laurel Sykes, chief risk officer for Montecito Bank & Trust<sup>2</sup>, identified ways in which financial institutions can leverage existing systems and resources for this purpose. For example, Montecito Bank & Trust embedded a set of automated alerts into its fraud and Bank Secrecy Act/Anti-Money Laundering platforms to identify suspicious account activity, including new channels, such as ACH activity from accounts in which none existed previously, sudden and rapidly diminishing account balances, out-of-pattern ATM transactions, and velocity alerts on check fraud systems.<sup>3</sup>

Elizabeth Loewy, cofounder and general counsel at EverSafe (a technology company focused on preventing elder fraud and identity theft), discussed how more sophisticated monitoring and analytical tools such as machine learning can create customized alerts. EverSafe's machine learning system continuously observes the client's personal financial behavior and can identify deviations that could be indicative of diminished financial capacity, fraud, or exploitation.

*4. Consumer financial data can be used to help doctors diagnose cognitive decline.*

Bankers and physicians are just beginning to recognize the link between money and cognitive health. Financial difficulties do not exist in isolation but are a key component and an early predictor of cognitive decline.

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<sup>2</sup> Sykes is currently executive vice president and chief compliance and risk officer at American Riviera Bank.

<sup>3</sup> A *velocity alert* is a change in the frequency with which the consumer writes checks, for example, from twice a month to twice a week.

Once they occur, it can worsen the effects. In his conference remarks, Dr. Jason Karlawish, geriatrician and professor at the Perelman School of Medicine at the University of Pennsylvania, noted that, “if routine business meant that bankers and financial services providers could reach out to trusted others, or refer clients to doctors at a memory center, older adults could receive medical attention before they and their families — as well as the institutions that once had responsibility for their money — were mired in problems that ruined their wealth.”

While scientists are working to develop tests to predict the likelihood of a person developing MCI or dementia, no single, highly predictive test has yet been produced. Thus, a positive diagnosis typically requires a neurologist or memory specialist to evaluate a variety of tests alongside the patient's medical history and conversations with immediate family. Data from financial transactions provide real-world information describing how well an older adult is managing in his or her environment. Knowing a patient's financial account activity — such as errors or missed payments — would provide doctors with a means to assess a patient's cognitive health.

*5. Financial institutions don't have to reinvent the wheel — or incur significant costs — when developing an elder fraud and financial abuse program.*

Naomi Karp, senior policy analyst at the Consumer Financial Protection Bureau's Office for Older Americans, shared some of the Bureau's recommended best practices for financial institutions. Karp said that each recommendation was relevant to organizations of all sizes and that many of them did not involve costly expenditures. In particular, Karp noted the importance of developing internal protocols for staff training, reporting, and escalation procedures. In addition, they had a means of securing advance consent for information sharing with trusted third parties when the financial institution believes the client may be at risk.

She also suggested that financial institutions make it a policy to report suspected elder fraud and exploitation to federal, state, and local law enforcement agencies and adult protective services (APS), regardless of whether the process is required by state law, and developing collaborative partnerships with those organizations.

Jilene Gunther, director of the BankSafe Initiative for the AARP Public Policy Institute, introduced a new online training program, developed from more than 170 interviews with bankers and credit union employees. The program trains bank staff to understand, identify, and report financial exploitation.

Addressing the perception that a new program might be too costly for smaller banks to develop, Sykes pointed out that financial institutions already possess many of the resources needed to develop a program, including fraud detection and anti-money laundering tools.

*6. Data privacy laws can inhibit financial institutions' ability to assist older clients.*

At the federal level, the Gramm-Leach-Bliley Act governs the circumstances under which a financial institution can share a client's nonpublic personal information (NPI) with nonaffiliated third parties. Although it provides five exceptions under which sharing data is permitted, many financial institutions have taken a cautious approach to interpretation. In his opening remarks, Federal Reserve Bank of Philadelphia President Patrick T. Harker noted that financial institutions are "reluctant to share information about potentially suspicious account activity with other institutions for fear of violating federal and state privacy laws."

Interagency guidance issued in 2013 attempted to clarify the exceptions, stating that a financial institution is permitted to share a client's personal information with federal, state, and local investigators as well as APS agencies when it suspects elder financial fraud or exploitation has occurred.

However, the guidance made no mention of sharing information with family members not listed on an account or with another financial institution to prevent future financial losses to the client.

Thus, in situations in which the financial institution is concerned for the financial security of one of its clients, it would not be permitted to call a trusted contact person associated with the account.

If the financial institution suspects the client is being coerced into sending or transferring money as part of a scam, it may wish to place a hold on the transaction until the institution can speak with the client and any trusted contacts. If the bank is prohibited from calling a trusted contact and the client is unwilling to believe he or she is being scammed, the financial institution may have to process the transaction.

In other situations, a financial institution may want to contact another financial institution regarding a common client, decreasing the likelihood of the client experiencing losses in accounts held at other institutions. If financial institutions are not permitted to share identifying information about that client, they cannot prevent the client's funds held at other financial institutions from being targeted by exploiters.

*7. Policymakers should consider leveraging the Financial Crimes Enforcement Network (FinCEN)'s existing reporting platforms to develop a dedicated interbank data-sharing network for elder financial crimes.*

Title III of the USA PATRIOT Act directed the U.S. Department of Treasury to establish a secure electronic network for communication between financial institutions and law enforcement agencies. That system is a web-based network administered by FinCEN.

In addition, FinCEN collects data on elder financial exploitation through its Suspicious Activity Report (SAR) electronic filing form that, since 2013, has included a specific checkbox for financial institutions to indicate suspicion of elder financial exploitation.

Integrating SARs within the data-sharing system is one way the federal government could provide the financial services industry with a low-cost, federally administered framework for interinstitutional information sharing.

## II. Introduction

On November 28–29, 2017, the Federal Reserve Bank of Philadelphia’s [Consumer Finance Institute](#) (CFI) hosted the Aging, Cognition, and Financial Health: Building a Robust System for Older Americans conference, cosponsored by the University of Pennsylvania’s [Penn Memory Center](#) and [Healthy Brain Research Center](#).

The goal of the conference was to discuss actions that members of the financial services industry can take to address the financial needs of a rapidly aging customer base.

As cognitive abilities decline, older adults may make poor financial judgments and become vulnerable to exploitation and fraud. The potential damage to individual finances as well as to the nation’s financial system will increase as the baby boom generation ages into retirement.

Industry leaders described the process of establishing programs for preventing elder fraud and financial exploitation at their institution. Trade groups and regulatory agencies shared progress reports on broad-based efforts to improve the industry’s ability to prevent financial losses and to promote the financial health of older adults with cognitive difficulties. Researchers highlighted the important role that financial data can play in the early detection of cognitive impairment and in the prevention of losses across older adults’ financial portfolios.

The conference began with a brief [video](#) interview of Philip Marshall, grandson of the late socialite and philanthropist Brooke Astor. In 2006, Philip turned his father in to law enforcement authorities for financially abusing his grandmother. Philip’s father, Anthony Marshall, was convicted of first-degree grand larceny. In the video, Marshall shares the story of his personal experience with elder financial abuse and how it motivated future work to combat ageism, support elders, and seek justice for abusers.

Following the video, Patrick T. Harker of the Philadelphia Fed, delivered [opening remarks](#) to the audience. Citing demographic trends and the increasing risk of elder exploitation, Harker explained that, “this is a set of circumstances ripe to balloon,” but he added “the best guard against a future crisis is building a bulwark in the present.” He urged conference participants not to wait for regulatory action to spur their efforts, suggesting instead that they collaborate, share ideas, and learn from one another for the benefit of the financial services industry and consumers alike.

## III. Our Aging Population and the Road Ahead

Leading into the first panel, **Jason Karlawish, M.D.**, geriatrician and professor at the Perelman School of Medicine at the University of Pennsylvania and director of the Penn Memory Center, introduced the audience to some of the key neurological concepts discussed during the conference. Karlawish explained that *cognition* was closely related to human behavior and could be thought of as the way in which humans process information, acquire knowledge, and use that knowledge to make decisions. Tests that measure cognition are measuring the brain’s behaviors — memory, language, attention, executive function, visuospatial function, and judgment. He called attention to *memory loss*, which occurs after patients have been taught something, demonstrated that they have learned it, but cannot recall it after several minutes.



He also explained that *executive function* is the ability to pay attention, combine multiple new pieces of information, and render a decision — key cognitive abilities used when making a financial decision.

Karlawish introduced the concept of *normal cognitive aging*, which is the degradation of cognitive skills over a person's lifetime in the population of adults with no diagnosed neurological disease such as AD or Parkinson's disease. He noted that cognitive aging is a fluid concept that tends to change as the concepts of disease change. In contrast, cognitive aging in a person who will eventually be diagnosed with a neurological disorder occurs much more rapidly.

The two trajectories are illustrated in [Figure 1](#), with normal cognitive aging depicted as the black line and accelerated cognitive aging as the yellow line. The preclinical stage refers to the time prior to a disease diagnosis when patients are not yet displaying symptoms. While the current state of science prevents geriatricians from distinguishing someone in a preclinical stage from those who will be disease free, they are able to diagnose both *mild cognitive impairment (MCI)* and *dementia*. MCI describes a stage of cognitive impairment that is noticeable, detectable, and causes difficulty with day-to-day tasks; however, the patient isn't ill enough to meet the criteria for dementia. Dementia describes a period of one or more years during which people experience declines in cognitive abilities that interfere with their ability to perform tasks once performed with ease.

Geriatricians have a mantra that serves as a rule of thumb for diagnosing an impending neurological illness — money, meds, telephone, transportation. A change in the ability to do any of these things is an early sign of a dementing illness. The most common cause of dementia in the United States is AD, but there are other diseases that can cause dementia, including Lewy body dementia, Parkinson's disease, frontotemporal dementia, and HIV.

[Figure 2](#) decomposes cognitive aging into two categories: *crystallized intelligence* (left panel) and *fluid intelligence* (right panel). Crystallized intelligence is composed of all the knowledge accumulated over a lifetime and includes financial concepts such as money, annuities, stocks versus bonds, and how to calculate interest. Fluid intelligence refers to the ability to take in and process new information, make sense of it, and use it to make a decision. While crystallized knowledge grows over time as knowledge is accumulated, fluid intelligence declines. When combined, the net effect of rising crystallized intelligence and declining fluid intelligence creates an inverse U-shaped curve relating cognitive abilities to physical age. The curve shows that both young and old adults are more likely to make poor financial decisions than their middle-aged counterparts, with skills peaking around age 53.<sup>4</sup>

Karlawish's final comment stressed the importance of recognizing that changes in cognition can lead older adults to lose the ability to perform tasks and make decisions, whether those changes are from disease or just changes from cognitive aging. Both manifest themselves in daily living, making it more difficult to manage money and make sound financial decisions.

**Patricia Boyle**, professor of behavioral sciences at Rush Alzheimer's Disease Center in the Rush University Medical Center, discussed some of the research that she and her colleagues are doing to understand the relationship between cognitive aging and financial decision-making. Boyle's research finds that changes in financial behaviors are an early sign that age-related changes may be negatively affecting the brain and that an older person may be at risk for developing AD.

Boyle explained that some people will age well and continue to be cognitively healthy throughout their older adult years.

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<sup>4</sup> S. Agarwal, J. Driscoll, X. Gabaix, and D. Laibson. (2009). "The Age of Reason: Financial Decisions over the Life Cycle and Implications for Regulation," *Brookings Papers on Economic Activity*, Fall 2009.

But there are also many people who will experience minor cognitive changes such as memory problems and still others who will develop the syndrome of dementia, which involves major cognitive and self-care difficulties.

Boyle delved further into the topic of AD, the most common cause of dementia. AD currently affects over 5 million Americans. This disease has no known cure, only weak therapies that do not dramatically change the course of the disease. The risk of AD increases with age, so Boyle expects to see an explosion in the number of people with AD as the baby boom generation ages into retirement. She also noted that there are another 6 million people who currently have MCI, which often leads to an AD diagnosis.

The cause of AD is believed to be protein formations called *amyloid plaques* and *neurofibrillary tangles* that accumulate in the brain and that disrupt normal brain function. Plaques and tangles tend to accumulate initially in areas that support memory, but they eventually accumulate in other brain areas and impair memory and other cognitive functions, resulting in the dementia syndrome.

Why does cognitive decline occur as humans age? Boyle noted that researchers have found a direct relationship between the amount of disease present in the brain and the degree of cognitive decline. On that basis, she concludes that early subtle cognitive changes observed in aging adults are not necessarily normal and are likely caused by disease processes in their early stages before there is a significant disruption of cognitive function.

Boyle also touched on the costs of AD, which are estimated to be around \$250 billion annually and are expected to exceed \$1 trillion by 2050. She believes these are gross underestimates.

Costs related to AD are typically measured by estimating how much is spent on treating an individual patient for health-care services; however, they do not consider (1) *opportunity costs*, time spent doing productive activities such as encore careers (a second career with greater personal meaning and social impact than the prior career) and helping their adult children with caregiving and other responsibilities, (2) losses from *financial mistakes* that older people make, (3) the fact that cognitive decline begins long before someone reaches a diagnosis of dementia, and (4) the effects of cognitive change that occur before someone is diagnosed with dementia or MCI.

To better understand the effect of cognitive decline on the financial decisions of older adults, Boyle and her colleagues added a focus on financial decision-making to the Rush University Medical Center as it began the [Rush Memory and Aging Project](#) (MAP), a large study of community-based older persons that started in the late 1990s. MAP studies the lives of older adults; more than 2,000 adults aged 65 and older and based in the Chicago area participate. Boyle and her colleagues perform annual assessments in which they measure cognition, aspects of behavior and brain function, and other medical issues. Participants are studied each year for the remainder of the participant's life. Participants also agree to donate their brains, which allows the researchers to examine the brain tissue after death and relate their findings to the annual assessment data. This process has enabled researchers to better understand how age-related diseases cause different trajectories of cognitive change and why some people develop dementia and others don't.

MAP collects two kinds of data on participants' financial decision-making abilities: survey data and imputed data from hypothetical questions. Participants are asked about actual financial decisions made during the previous year. Additional measures of financial choices are generated via a set of hypothetical questions.

MAP also measures financial literacy concepts such as *numeracy* (the ability to work with and manipulate numbers) and tests participants' understanding of financial concepts and information.

Boyle and her colleagues have found that financial literacy is essential for financial decision-making. *Preclinical cognitive change* — cognitive change present prior to a diagnosis of MCI or dementia — is associated with declines in financial literacy and financial decision-making.

Researchers have also observed that, while preclinical changes in cognition result in a self-rating of lower confidence in general, the changes do not affect participants' self-ratings on their ability to manage their finances.

Boyle hypothesizes that since giving up financial decision-making authority means a loss of independence in a very important way, participants may refuse to admit their financial problems to themselves and to others. Unfortunately, that means that many people who are declining cognitively and are losing grasp of financial knowledge, and financial concepts are still holding onto financial responsibility, putting them at risk for serious financial mistakes and losses. Boyle and her colleagues have also found that preclinical cognitive change is associated with a greater vulnerability to financial exploitation. Boyle suggested three changes that could help older adults make better financial decisions. First, financial literacy can protect our financial decision-making skills, even in the face of some cognitive change. Thus, efforts to improve financial literacy for older

### **By 2060, the U.S. will have:**

- ◆ **more than 20 million people over the age of 85, and about 100 million people who are 65 and older;**
- ◆ **and 27 percent of those 85 and older will have dementia or about 5.4 million people.**

adults may help mitigate the risk of financial errors.

Similarly, access to information via the Internet and other sources can protect against the effects of cognitive decline on financial decision-making. Third, Boyle suggested that financial materials such as usage agreements and terms and conditions should be simplified to make them more user friendly for all ages.

Boyle summarized her discussion by reiterating that at least some aging-related disease is present in the brains of almost all older persons. The diseases accumulate over time and may affect financial and other behaviors even before they affect cognition; that is, changes in financial and related behaviors seem to be the earliest indicators that something is going awry in the brain. Changes in financial behavior are also harbingers of a number of adverse health outcomes. Given that these changes are often present among cognitively intact persons, there is a great need for strategies to identify and protect older adults from errors in financial decision-making that may greatly compromise their health and well-being.

**Geoffrey Sanzenbacher**, associate director of research at the Center for Retirement Research at Boston College, next discussed his paper, [\*Dementia, Help with Financial Management, and Financial Well-Being\*](#), coauthored with Anek Belbase and funded by the Social Security Administration.

Sanzenbacher framed his discussion around four facts. First, by 2060, the United States will have more than 20 million people aged 85 and older, and about 100 million people who are aged 65 and older. Second, 27 percent of those aged 85 and older will have dementia, which equates to 5.4 million people. Third, by the time adults are diagnosed with dementia, there is only a 20 percent chance they will be capable of managing their finances. Fourth, the country is moving toward a system in which people with dementia will have a significant portion of their retirement savings in their hands instead of receiving a portion each month.

Employers have been offering fewer *defined benefit* pension plans, in which the retiree receives a fixed retirement benefit each month, in favor of *defined contribution* plans, in which retirees must manage their own retirement assets and develop their own disbursement plan. In 1983, about 62 percent of people with a pension had a defined benefit plan, compared with 12 percent today. Conversely, 72 percent of those with a pension plan have a defined contribution plan, whereas in 1982, it was only 17 percent.

In terms of caretakers, Sanzenbacher examined data from the National Health and Aging Trends Survey (NHATS) to see how often caretakers are available to those with dementia and the associated quality of care.<sup>5</sup> He found that, from the time a caregiver is enlisted to the time the person is diagnosed with dementia, their care network grows by about 67 percent; the number of helpers grows from about 1.5 to about 2.5.

Sanzenbacher noted that financial professionals should consider this and recognize that they are not just working with the individual client but also with the people in their caregiving network.

Sanzenbacher's work uncovered a disturbing statistic: While 83 percent of survey participants with dementia reported having constant assistance and another 4 percent occasional assistance, 13 percent reported having no help at all. With respect to only financial matters, 85 percent of dementia sufferers have help, while 15 percent have no help at all. Digging further, Sanzenbacher found that the 15 percent of dementia sufferers without financial help experience more severe financial distress than those with some financial assistance. A regression analysis that controlled for factors such as income and level of education found that caretaker assistance has a statistically significant and negative effect on the likelihood of financial hardship.

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<sup>5</sup> The National Health and Aging Trends Survey (NHATS) began in 2011 and collects data on respondents' demographic and economic characteristics as well as their health and functioning; detailed information on caregiver assistance is also included.

Sanzenbacher concluded his discussion by noting that the United States has a growing population who will develop dementia, and increasingly those people will have to manage large retirement portfolios. While more than 4 out of 5 people with dementia have access to the help they need, there is a nontrivial minority of those with dementia who have no source of assistance and who look significantly worse along some critical dimensions of well-being than the people who have help.

### **About 15 percent of dementia sufferers lack someone to help them with financial matters and experience more severe financial distress than those who do.**

**Craig Copeland**, senior research associate with the Employee Benefit Research Institute (EBRI), followed up on a point made by Sanzenbacher, noting that even defined benefit plans (generally thought to be less risky than defined contribution plans) are increasingly likely to offer a lump sum disbursement option. EBRI has observed that the percentage of consumers with defined benefit plans taking the lump sum disbursement is increasing, further exacerbating the problem of retirees having responsibility for managing their entire pension plan and increasing their exposure to financial ruin.

Copeland then discussed how financial assets are distributed across the population by age. In [Figure 3](#), assets held by those aged 75 and older are shaded in purple, while those held by baby boomers are in red (ages 55 to 64) or green (ages 65 to 74). Overall, baby boomers and current retirees hold almost 70 percent of total assets, or about \$66 trillion.

In terms of liability, Copeland noted a tremendous increase in the debt held by households headed by older adults ("older households"). From 2007 to 2016, the percentage of households aged 75 and older with debt increased by 60 percent, from 31.2 percent to 49.8 percent.

While the percentage of households aged 55 to 64 and 65 to 74 with debt remained stable during that time, over 70 percent of these households are in debt.

A primary concern of older adults is whether they will be able to afford medical expenses as they age. Copeland explained that, as expected, health-related spending as a percentage of household expenditures increases with age. In 2011, 11 percent of spending by households aged 60 to 64 went to health care. For households aged 65 to 74 and 75 and older, health-care expenditures were 13 and 16 percent, respectively, of total expenditures. According to Copeland, studies have found that adults aged 85 to 90 may spend as much as 25 percent to 30 percent of their income on health care.

A major component of health-related spending is nursing home care. Copeland noted that the average cumulative out-of-pocket nursing home expenditures for someone entering a nursing home after age 70 and living 15 to 19 more years is almost \$40,000 (in 2015 dollars). Adults surviving 25 years or more pay \$70,000 on average out-of-pocket for nursing home expenses. At the 90th percentile, the figure is more than \$180,000.

Last, Copeland introduced EBRI's Retirement Security Projection Model, which measures retirement income adequacy and the impact of having to pay for long-term care, if the need arises. Based on the model, about 75 percent of early baby boomers (55 to 64) will be able to fully cover their expenses through retirement, assuming they do not require long-term care. However, including the possibility of incurring long-term care expenses reduces that number by more than 20 percent, so that only 52.3 percent of early baby boomer households are projected to have the means to fully fund their retirement.

#### IV. Perspectives on the Financial Needs of Older Adults

In the second session, Karlawish conducted several interviews with the following: Philadelphia-native Renee Packel, whose husband made a series of poor financial decisions before being diagnosed with dementia; Joseph Donohue, a retired pharmaceutical worker participating in a clinical drug trial for AD; and Wall Street banker-turned-wealth advisor Paul Tramontozzi, whose career change was inspired by his father's struggle with Lewy body dementia.

Philadelphia resident **Renee Packel** said she was caught off guard when her homeowners association called to ask why the Packels were three months late in paying their dues. The Packels had always paid their bills on time, and the association dues were no exception.

**“When I meet with a client for the first time, I prefer to have it be with their trusted contact. I also want to know who their accountant is, who their estate attorney is, and other aspects of their family background. The bottom line is, the more you know your client, the more likely you are to identify behaviors that raise a red flag.”**

— Paul Tramontozzi, *Certified Financial Planner*

Renee's husband, Arthur, a graduate of Temple Law School, had kept their financial records pin-straight for years until their finances began to unravel.

When Renee examined the couple's checkbook, she found that Arthur's entries had gradually become illegible. So many things had gone awry that it took a forensic accountant to determine that \$750,000 was missing from their savings. Renee sold the house and car and moved with Arthur into an apartment. Needing to rebuild the couple's retirement nest egg, Renee went back to work. To do so, she had to enroll Arthur in adult day care.

Shortly thereafter, Karlawish diagnosed Arthur with probable AD.

Karlawish also spoke with **Joseph Donohue**, a local retiree with a family history of AD who is participating in a clinical trial at the Penn Memory Center. Donohue manages his own finances, including a defined contribution account. After hearing from the morning's conference participants, Donohue noted: "Clearly, there's a need [for me] to make other plans that I sense for the first time. I need to start thinking about how to plan for the future — for the unknown future — and try to put some safeguards in place."

**Paul Tramontozzi**, a certified financial planner based in Manhattan, spoke about losing his father to Lewy body dementia, and how his father's diagnosis had spurred him to change careers. Five years earlier, while working as a trader on Wall Street, his father asked his son to discuss the elder's personal finances. Tramontozzi knew his father as someone who kept meticulous financial notes and managed his own banking and investment accounts. That day, as he looked through his father's penciled notebook entries, Tramontozzi saw that they had become less detailed and more difficult to understand.

Tramontozzi explained that managing retirement finances can be challenging and complicated. Retirees must make critically important decisions about how and when to begin receiving Social Security benefits; how to safely invest and draw down retirement savings; and whether to purchase annuities, permanent life insurance, or long-term care insurance. He believes the future of wealth management is not just about investments or financial products; it's about helping people navigate these decisions.

In his second career as a wealth advisor, Tramontozzi works to engage his clients' network of trusted contacts and service providers. "When I meet with a client for the first time, I prefer to have it be with their trusted contact," he said.

"I also want to know who their accountant is, who their estate attorney is, and other aspects of their family background. The bottom line is, the more you know your client, the more likely you are to identify behaviors that raise a red flag," said Tramontozzi.

## V. Challenges to Addressing Elder Financial Health

During this session, industry experts addressed financial institutions' privacy obligations, legal duties and boundaries, and the authority to intervene in financial transactions. Panelists discussed measures that financial institutions can enact on behalf of their elderly clients and what legal and regulatory changes would help to facilitate their efforts.

**Lisa Bleier**, managing director and associate general counsel at the Securities Industry and Financial Markets Association (SIFMA), reviewed new rules for brokers and broker dealers instituted by the Financial Industry Regulatory Authority (FINRA). FINRA [Regulatory Notice 17-11](#), issued in March 2017 and effective on February 5, 2018, creates FINRA Rule 2165 and amends FINRA Rule 4512.

FINRA Rule 2165 allows brokers to hold suspicious disbursements temporarily for up to 15 days, or longer, if ordered by a court or state agency of competent jurisdiction. To hold a transaction, the broker must have a reasonable basis to believe that financial exploitation has occurred, is occurring, or is being attempted. Rule 2165 applies only to the disbursements of funds (when money is leaving the institution) and does not cover transfers between accounts. To initiate a hold, the broker must first notify the trusted contact and anyone authorized to transact business on the account, unless the broker believes that the trusted contact is the exploiter, in which case that person does not have to be notified.

With the hold in place, the broker has time to investigate the disbursement. Bleier noted that the brokerage firm must keep records of its investigation because FINRA examiners will want to know how the rule was applied.

Brokers must also have procedures in place to identify the red flags of elder financial fraud and abuse, how to escalate suspicious transactions within the firm, and which procedures the firm will follow for investigation and reporting.

FINRA Rule 4512 was amended to require brokers to try to collect trusted contact information for new and existing clients and attempt to regularly update that information. The rule does not actually require the information to be collected. Thus, a broker is permitted to open an account for someone who is unwilling to name a trusted contact. Bleier noted that one challenge SIFMA is working through is figuring out how often to update the contact information to keep it current.

Bleier explained that brokers should use Rule 4152 to contact a trusted third party when they detect a problem with a client's account. Bleier noted that, unless explicitly permitted, the broker cannot share account information such as account balances or descriptions of transactions. The trusted contact can be used to confirm the client's well-being or to ask if the broker should be aware of a change. The broker may also confirm the client's contact information and request that the client identify any legal guardian, executor, trustee, or holder of a power of attorney with the ability to conduct financial transactions on the client's behalf.

**Robert G. Rowe III**, vice president and associate chief counsel at the Center for Regulatory Compliance for the American Bankers Association, provided insights into the challenges banks face in addressing elder financial abuse. He noted that in February 2011, the Financial Crimes Enforcement Network (FinCEN), part of the U.S. Department of Treasury, created an advisory to help banks file SARs that reflect elder financial exploitation.

Consistent with general compliance requirements for reporting suspicious activity, the advisory states that if a bank believes that a transaction has no apparent lawful purpose or is inconsistent with the customer's normal business practice, the bank should consider filing a SAR with the term "elder financial exploitation" included in the narrative box and report the transaction to the appropriate authorities. The advisory also provides a series of red flags that may indicate elder financial exploitation.

Banks have been incorporating lessons from the advisory into their training programs for branch personnel who interact with customers. Branch employees often observe interactions between an older client and a caregiver. Rowe said that bank tellers should not try to make any kind of medical diagnosis or act outside of their specific training. However, in many instances, tellers can detect unusual situations. For example, while caregivers can be a positive force for someone experiencing symptoms of cognitive impairment, a caregiver showing excessive interest in the client and the client's finances can be a red flag.

Another red flag can occur when an elder shows an unusual degree of deference to his or her caregiver. For example, consider a branch banker who calls one of her elder clients but the housekeeper answers. If the housekeeper hesitates to put the client on the phone, or says the client is unavailable and offers to answer the questions herself, the banker may want to escalate the issue within her bank. In other instances, another red flag is when a new caregiver, friend, or relative suddenly starts interfering in communications between the bank and the client.

Rowe next turned to the issue of privacy in banking, noting that trust and privacy form the basis of the relationship between banks and their clients. He believes there is some confusion within the industry about what can be disclosed to a third party because of certain statutory restrictions.

In 2013, federal banking agencies including the Consumer Financial Protection Bureau (Bureau), the Federal Reserve, the Commodities Future Trading Commission, the Federal Deposit Insurance Corporation (FDIC), the Federal Trade Commission (FTC), the National Credit Union Association, the Office of the Comptroller of the Currency, and the Securities Exchange Commission (SEC) issued [joint guidance](#) on permissible information disclosure under the Gramm-Leach-Bliley Act (GLBA), the primary federal rule addressing the privacy and disclosure of financial information.<sup>6</sup> Rowe said that banks should understand that, under the GLBA, the general rule is “thou shalt not disclose,” but there are exceptions, and it is important to report suspected financial abuse.

The guidance provides specific exceptions that permit disclosure. These include compliance with federal, state, or local laws or regulations; in response to a properly authorized investigation, subpoena, or summons; and to protect against or to prevent actual or potential fraud or unauthorized transactions. In addition, to the extent specifically permitted or required under other provisions of law and in accordance with the Right to Financial Privacy Act, information may be shared with law enforcement, including the Bureau, the federal functional regulators, the FTC, adult protective services (APS), and self-regulatory organizations.

Rowe also noted that check hold provisions can help banks prevent customers from falling victim to a variety of common fraud schemes. For example, a customer who sells his or her car over the Internet may receive a check from the buyer for \$5,000 more than the agreed-upon price along with a request from the buyer to wire him or her the difference.

Rowe noted that banks may leverage existing regulations to place a hold on a suspicious check.

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<sup>6</sup> Lisa Bleier noted that FINRA, which regulates broker-dealers, is not named in the guidance because, organizationally, it is subsumed under the Securities Exchange Commission (SEC). As a result of FINRA's name not being explicitly included, some broker-dealers choose not to follow the guidance.

First, the Expedited Funds Availability Act of 1987 provides an exception from funds availability when the bank believes there is a reason to doubt collectability. For example, if there is a reason to doubt the collectability of a check that is being deposited, the bank can either put a hold on it or send it for collection instead of putting it through. Rowe explained that, either way, the funds are not available for withdrawal until they are through the process and the bank actually receives the funds. Second, Rowe noted that the Uniform Commercial Code, as adopted in most states, permits a bank to send a check for collection with no provisional credit until the funds are received.

Last, Rowe explained that the American Bankers Association (ABA) has long advocated for expanding the use of an information-sharing process established by Section 314(b) of the USA PATRIOT Act of 2001 (PATRIOT Act), which allows financial institutions to share information with each other in cases of suspected money laundering or terrorist financing. Rowe explained that, according to the definition of money laundering found in 18 U.S.C. 1956, the phrase “specified unlawful activity” can refer to a panoply of different crimes, including sexual crimes. However, its usefulness to the industry has been minimal.

## **VI. Factors to Consider When Building Your Business Case**

During this session, representatives from AARP as well as three financial institutions provided insights into the business case behind their efforts to prevent elder financial abuse and discussed the goodwill and new business opportunities their work has generated.

**Jilene Gunther**, director of the BankSafe Initiative for the AARP Public Policy Institute, talked to the audience about some insights generated by AARP-commissioned research. When survey participants were polled about what they want from their financial institution from among a list of 20 items, the top three things involved financial exploitation prevention.



Gunther explained that older adults want frontline employees to be trained to detect and prevent exploitation. They also want the bank to monitor their accounts and notify them of unusual account activity.

Gunther also shared the results of qualitative interviews with financial institutions that had implemented programs to protect against financial exploitation. Two year-long proofs of concept had prevented \$2.2 million and \$1 million in losses. More generally, elder financial abuse prevention programs tended to strengthen customer relationships, increase employee morale, and enhance brand recognition. Some banks also earned credits toward their annual Community Reinvestment Act (CRA) requirements and received a better CRA rating because of their program.

**Laurel Sykes**, chief risk officer for Montecito Bank & Trust, a California-based bank — with 10 branches, about 225 employees, and \$1.3 billion in assets — shared some of the work her bank has done to prevent elder financial abuse. Since it implemented its program, Montecito Bank has experienced an increase in client loyalty and an increase in employee morale and engagement.

“Everybody likes to fight crime, everybody likes to fight the bad guy,” said Sykes. Employees are encouraged to go out into the communities served by the bank and speak to the client base about fraud and financial exploitation. For example, bank employees visit retirement communities and senior expos and have appeared on local radio shows targeted to seniors. Montecito Bank also earns CRA credit for outreach programs aimed at informing low- and moderate-income families.

Sykes dismissed the notion that financial losses from elder financial abuse don’t have an impact on banks. She urged bankers in the audience to carefully consider bank losses from ATM and debit card disputes, check fraud, wire fraud, and the cost of having to return counterfeit checks.

Montecito Bank tracks these events by client age and has found that, without the proper controls, the bank would lose half a million dollars a year. Sykes noted that some counterfeit items must be identified within 24 hours or the bank takes the loss; however, items such as forged or altered checks must be discovered within 60 days. In addition, banks are liable for wire requests they accept via telephone or the Internet without verifying the client’s identity.

### **Elder financial abuse prevention programs at banks tended to strengthen customer relationships, increase employee morale, and enhance brand recognition.**

Last, Sykes recommended that bankers carefully consider the state and federal regulatory requirements that require banks to prevent elder fraud. She noted that the Fair and Accurate Credit Transactions Act of 2003 requires banks to identify and resolve identify theft, and that many states have mandatory reporting requirements. Banks also have obligations under the SAR requirements of the Bank Secrecy Act (BSA). Montecito Bank files a SAR regardless of dollar amount so that the information can be shared under 314(b), if the corresponding bank is also a participant.

**Scott Dueser**, chairman, president, and chief executive officer of First Financial Bankshares, Inc., established an elder financial exploitation prevention program in 2013. Now, First Financial — a publicly traded bank with 69 branches and \$7 billion in assets — trains all of its 1,400 bank employees on how to detect, handle, escalate, and stop financial fraud and exploitation.

The program started when Dueser received a call from a customer whose mother had been caught up in a Jamaican fraud scam. The elder had lost her entire savings and had maxed out her credit cards.

When the woman attempted to take out a loan from the bank, branch employees became suspicious and filed a SAR with FinCEN. Dueser looked into the woman's accounts and realized that, despite many warning signs, the bank had failed to detect suspicious activity. The woman deposited checks that were bouncing, and the checks she was writing were going to the fraudsters. The realization prompted First Financial to establish its Fraud Buster fraud and financial exploitation program.

When staffers at First Financial suspect that a customer is having cognitive problems, the bank takes preemptive action, inviting the customer and one or more family members in to a branch to discuss the situation and establish plans to protect the customer from financial fraud and abuse. The bank flags the customer's account and monitors all transactions. Accounts with large balances are separated into smaller accounts to firewall losses. Wherever possible, First Financial transfers some of the customer's money to an investment account so that the funds are not immediately accessible.

**Many frauds are not limited to a single financial institution but are typically composed of a string of financial transactions passing through several banks.**

First Financial also leverages its trust company. Customers in need of help can be moved up to the trust company, which then pays the customer's bills and can even assist with medical responsibilities, and ensuring that the customer's home health-care needs are met.

Other key parts of First Financial's program include Fraud Buster Awards given to employees who identify and prevent fraud; a speakers bureau that enables employees to go out into the community and speak at retirement centers, churches, and elsewhere; and partnerships with local police departments, APS, and Better Business Bureau offices.

Fraud Buster cases are documented and disseminated to bank employees as a way to keep up on the latest scams. In particular, Dueser noted that taking the time to build local partnerships has fostered a collaborative environment that has resulted in the prevention of many financial crimes.

Dueser also explained that most frauds are not confined to a single financial institution. Frauds are typically composed of a string of financial transactions through many other banks. He recommended that regulators, lawmakers, and industry work to allow information to be shared responsibly across financial institutions for the sake of preventing elder financial abuse.

The final speaker of the session was **Surya Kolluri**, who manages policy and market planning for the Bank of America/Merrill Lynch Retirement and Wealth Solutions Business. The brokerage company has 20,000 advisors who serve 15 million customers and \$2.5 trillion in assets, while the bank serves about 50 million households and \$1 trillion in deposits.

Kolluri spoke to the audience about his experience helping to build an elder financial abuse program in such a large organization. He recommended that program organizers in aspiring institutions be able to articulate the customer's concerns, be aware of the regulatory environment and new rules that may be in the pipeline, and look for synergies across projects.

Kolluri explained that, in one survey, Merrill Lynch asked clients what came to mind when they thought about their later years. Clients identified seven life priorities: home, health, finance, family, giving, work, and leisure. By ranking, the top three were health, family, and finance, with health being clients' overwhelming priority. Additional research led to the realization that the fear of AD as a disabling condition was greater than the sum of the fears of every other disabling medical condition, including cardiovascular problems, diabetes, arthritis, and cancer.

Kolluri explained that clients were concerned about AD because they feared the loss of freedom, did not want to become a burden to their family, and did not want to lose their sense of dignity. When Kolluri's team presented the findings to senior executives and the board of directors, their response was to ask what his team was going to do about it.

On the regulatory side, Merrill Lynch recognized that FINRA was developing regulations that would likely encourage member institutions to better address fraud and financial exploitation.

Merrill Lynch now has an extensive training program for its advisors, a client authorization form, and a nursing home search service. The company has created a longevity training program for advisors. All employees receive mandatory fraud training, and all advisors are permitted to use the training as well as specialized training on cognitive decline in caregiving. Kolluri noted that all three training programs come with continuing education credits, which helps to motivate advisors.

## VII. Developing a Right-Sized Program for Your Organization

Participants in this session shared some ideas on how smaller depository institutions can build an effective elder financial abuse prevention program on a shoestring budget. Teaser: Much can be achieved by leveraging existing systems and resources.

**Naomi Karp**, senior policy analyst at the Bureau's Office for Older Americans, discussed federal initiatives to combat elder financial exploitation, recommendations for financial institutions and resources to share with older consumers and caregivers.

Karp addressed the 2013 interagency guidance on privacy laws and reporting financial abuse, noting that, four years later, some financial institutions still may not understand the laws or understand whether the Gramm-Leach-Bliley Act privacy provisions are a barrier to reporting suspected elder financial exploitation.

The guidance lists five different exceptions to the notice and opt-out rules under the act, some of which are broad, such as the exception for preventing actual or potential fraud, which could apply to a variety of situations. Another exception concerns a response to a properly authorized civil, criminal, or regulatory investigation that could apply to provide bank records to law enforcement or APS when are conducting an investigation. The exception for complying with laws, rules, or other legal requirements could apply to state mandatory reporting laws.

In March 2016, the Bureau released an advisory that proposed — but did not require — that banks and credit unions adopt voluntary practices grouped under six headings. Karp noted that most of the six would require very little incremental expenditure. The advisory recommends that banks develop protocols formalizing ad hoc rules to clarify employees' roles and responsibilities when elder financial exploitation is suspected. She noted that employee training is critical to detecting and responding to financial exploitation and suggested banks look to existing programs, including the AARP BankSafe initiative, that offer training at no additional cost to the bank. With respect to using technology for detecting suspicious transactions, Karp explained that, as a result of having to comply with the Bank Security Act (BSA), financial institutions already have technology in place that can be leveraged to monitor financial transactions. Fraud detection software can also be tweaked to detect fraud instances specific to older customers, such as late-night ATM withdrawals from an 85-year-old in an assisted living facility.

The 2016 Bureau advisory also recommends that banks and credit unions make timely reports to law enforcement and APS, regardless of whether mandatory or voluntary under state or federal law, and file SARs, using the checkbox for "elder financial exploitation." Karp noted that making an effort to build relationships with APS, law enforcement, and other multidisciplinary teams can lower banks' cost (in terms of time) of reporting and increase its effectiveness.

Another low-cost recommendation with potentially tremendous value to both banks and older clients is to establish procedures that allow customers to provide advance consent to sharing information with a trusted third party when the bank believes the customer may be at risk of financial abuse. Banks can also offer low-cost, age-friendly services such as cash withdrawal limits, alerts for specified account activity, view-only access for authorized third parties, convenience accounts, and other opt-in account features. In addition, banks can develop procedures to honor powers of attorney, except in situations in which state law provides a basis to refuse them. Banks must honor a legitimate power of attorney, and it is often important to be able to determine quickly whether the bank will honor a power of attorney. Karp advised against requiring the power of attorney be on the bank's own form since an incapacitated accountholder would not be able to execute a new document.

**Jilene Gunther** laid out four steps banks should take to develop an elder financial abuse prevention program. She recommended that financial institutions establish their business case, identify their clients' needs, develop a plan to educate employees on recognizing and handling suspicious account activity, and build partnerships to fight exploitation.

Gunther explained that a business case should be built upon a solid research foundation. Smaller financial institutions should leverage the publicly available work of larger institutions such as Merrill Lynch. Adding a handful of questions to an annual customer survey is a low-cost way for smaller institutions to better understand the needs and challenges faced by their own customer base.

Gunther touched on the AARP's efforts to sponsor and facilitate the development of online training for bank employees. Its training program is broken down into five modules — red flags, understanding what exploitation is, reporting it, resources, and how to stand up and speak out.

While AARP is sponsoring the program, the content is being developed with input from banks and credit unions. AARP conducted more than 170 content interviews and had the findings reviewed by more than 40 financial institutions. The training uses real-life scenarios, with true stories from people on the frontlines who routinely witness elder financial abuse. Since there are different reporting laws for different states, one of the modules allows trainees to click on the different states to learn more about the laws and the state immunities for banks within that state.

**Laurel Sykes** then described some low-cost options available to financial institutions. She noted that Montecito Bank repurposed many resources that already existed within the organization to build its elder financial abuse prevention program. Echoing Naomi Karp's earlier remarks, Sykes explained that legally mandated BSA teams are already conducting investigations and, in some cases, filing reports on elder financial abuse. Fraud teams may already be dealing with debit card, credit card, and wire fraud claims. With the right data in hand, fraud teams can use clients' ages to scan for red flags specific to elder fraud and highlight elder fraud events for reporting purposes. Compliance teams, charged with knowing the relevant laws and regulations that govern reporting on elder financial abuse and data privacy, can help inform and guide initiatives across the institution.

Sykes believes that most BSA software providers have alerts geared toward older demographics or may have other tools available that allow banks to create their own alerts. Montecito Bank has the ability to do both. A set of preprogrammed alerts from its BSA system is combined with alerts from its check fraud system and claims from its debit card claims system. That data can then be joined with the core banking system to append client age and other demographic characteristics.

Sykes explained how some changes to Montecito Bank's organizational structure had facilitated communication across teams. Since 2014, the bank's risk, fraud, information security, and compliance teams all report to the chief risk officer, giving her a line of sight into any angle that a case might be reported from, such as tech support scams and debit card, wire, or check fraud.

According to Sykes, the frontline staff is often the bank's best resource to detect elder fraud and can help convince clients that they are being scammed. With that in mind, Montecito Bank developed a program to train staff and enhance awareness of senior financial issues, incorporating Bureau recommendations and core elements of the ABA's [Frontline Compliance Training](#) on elder financial abuse, a free online compliance training program for ABA member banks. Sykes also pointed out resources, including [Pass It On](#) by the FTC, the AARP's [Fraud Watch Network](#), [Money Smart for Older Adults](#) by the Bureau and FDIC, and the ABA's [Safe Banking for Seniors](#) curriculum. Montecito Bank supplements the training with samples of real scam letters and emails culled from two years of fraud cases. In addition, all bank employees receive in-person BSA training annually that covers elder financial abuse. Any computer-based program the bank uses is supplemented with branch meetings. Sykes explained that, other than the mileage to drive to the branches, these initiatives are relatively inexpensive, and the benefit is invaluable.

Montecito Bank has enhanced its internal fraud defenses with a low-cost questionnaire for customers who want to withdraw large cash amounts. The questionnaire probes whether the customer may be involved in a scam or some form of exploitation. Sykes notes that seeing those prompts can prevent a customer from completing the transaction.

Montecito Bank publishes a variety of articles and newsletters, particularly during the fall and winter holidays, when people are likely to spend more time with their loved ones.

Sykes explained that the holidays are a good time to ask how older family members are doing. The articles and newsletters provide guidance to those with older family members and can help to facilitate a tough conversation. Montecito Bank also uses social media to reach the adult children of older adults.

Montecito Bank also provides elder-friendly banking tools to its customers through its core banking system. Features include credit card on-and-off options, debit card on and off, spending limits, and alerts enabling customers to approve or deny potentially fraudulent transactions.

### **VIII. Getting on the Same Page: Standardization Before Aggregation**

Estimates of the annual cost of financial errors, fraud, and exploitation vary widely. Before the industry can begin to track and validate such estimates, it should agree on a common vocabulary and taxonomy to use internally, to report requirements, and to calculate annual estimates.

During this panel, **Stephanie Whittier Eliason**, elder rights team lead in the U.S. Administration for Community Living (ACL), introduced the National Adult Maltreatment Reporting System (NAMRS). NAMRS is a voluntary reporting system that aggregates data from state APS agencies into a national repository for the exploitation and abuse of older adults and adults with disabilities. The project began in 2013, with system design, pilot testing, and pilot refinement until 2015. By 2017, the first data submissions had occurred as well as the creation of the first NAMRS report.

Whittier Eliason explained that the NAMRS project helps to fill a critical knowledge gap; there are no other national estimates of the extent or magnitude of elder abuse, neglect, and financial exploitation. In designing the system, ACL built a model that reflects current APS practices as well as the high degree of variation across programs.

To the extent possible, the data are standardized longitudinally; both victims and perpetrators receive unique identifiers to track patterns and trends over time.

NAMRS has three data components: agency data, case data, and key indicators. The agency component includes specific information for state APS agency submissions, including the agency's name, location, and contact information, as well as information on APS policies and practices in that state. The case component includes information pertaining to each report that the APS agency screens and investigates. Data are collected on each client, maltreatment, and perpetrator associated with an investigation. To the extent possible, victim and perpetrator characteristics, such as demographics, living situation, and behavioral health, are also included. Last, the key indicators component includes aggregated counts of key statistics related to investigations, clients, and perpetrators. This component is submitted only by states that cannot submit the case-level detail required of the case component.

While the NAMRS survey is the first to collect and analyze APS data at the national level, it has several important limitations. First, no APS agency is required to report to NAMRS. Despite being voluntary, participation in the survey's first fielding was over 90 percent. Second, NAMRS statistics will underestimate the true incidence of elder financial exploitation because the survey can only capture events reported to the APS by a financial institution or other filer. Third, elder financial fraud will generally not be reported to NAMRS. Whittier Eliason explained that it depends on each state's criteria for APS investigations. In states in which APS is not permitted by law to investigate fraud by someone other than a trusted other, the fraud will not be reported. In addition, fraud that is reported to NAMRS will not contain information specific to the fraud or scam.

**Lynn Langton**, chief of the victimization statistics unit in the Bureau of Justice Statistics (BJS) at the U.S. Department of Justice at the time of the conference, noted that her office is responsible for overseeing the collection and dissemination of data from the National Crime Victimization Survey (NCVS).<sup>7</sup> Under her watch, NCVS has expanded to include measures of the incidence of fraud and identity theft.

Langton noted that the BJS's fraud prevalence survey is nationally representative, with good coverage and high response rates in populations that are most at risk for fraud. The survey asks respondents about their personal experiences with fraud, capturing information about the response, and the impact on the victim. The survey allows BJS to calculate estimates of the prevalence of fraud victimization for persons aged 18 or older by specific type of financial fraud and by victim demographic characteristics such as elderly and persons with disabilities.

To do so, the NCVS defines fraud as intentionally deceiving the victim by misrepresenting, concealing, or omitting facts about promised goods, services, or other benefits and consequences that are nonexistent, unnecessary, never intended to be provided, or deliberately distorted for the purpose of monetary gain. The survey uses a fraud taxonomy developed in coordination with the Stanford Center on Longevity and the FINRA Foundation that includes four levels of classification ([Figure 4](#)). Level two is the primary fraud classifications and includes investment fraud, consumer products and services fraud, job opportunity scams, prize and lottery fraud, phantom debt collection, charity fraud, and relationship and trust fraud.

Langton explained that identity theft is not included in the fraud prevalence survey.

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<sup>7</sup> National Crime Victimization Survey (NCVS) is a large-scale survey of U.S. residents that is one of the two measures of crime in the country. It was initiated in 1972 as the National Crime Survey and redesigned in 1993 as the NCVS. Langton is currently a senior research criminologist with RTI International.

Instead, BJS administers a separate biennial supplement on identity theft.

In closing, Langton noted that the BJS's fraud taxonomy could be repurposed for the collection and aggregation of administrative data from financial institutions.

## **IX. Smart Data Collection for Intelligent Monitoring**

This panel discussed how financial institutions can leverage many of their existing processes, including those required for BSA compliance, to gain insight into elder financial issues. Panelists also discussed how financial institutions can identify older customers who are experiencing cognitive difficulties and proactively address their needs.

**Ronald C. Long**, director of regulatory affairs and elder client initiatives at Clearing Services LLC and Wells Fargo Advisors Financial Network, LLC, shared insights into Wells Fargo Advisors' (WFA) elder financial abuse program.

WFA created its elder client initiatives team in 2014 after observing an increasing trend in the number of their financial advisors who were concerned about an older client. Long described how WFA leveraged existing customer history and activity management software — typically used to log customer calls into the brokerage — to record and track elder financial abuse.

Long provided some insight into the data collected by the elder client initiatives team. In 2016, 34 percent of the team's cases were classified as third-party fraud in which the victim knew the perpetrator but the person was not a family member. Another 30 percent of cases were financial exploitation committed by a family member. Long explained that, "the bulk of what we see out there is not the evil Russian baron claiming he's the love of your life. It is family members or people [who] the client actually knows." Dementia, diminished capacity, and other cognitive problems accounted for 22 percent of cases.

Third-party fraud by an unknown perpetrator accounted for another 9 percent. The remaining 5 percent of cases were related to power of attorney reviews and other miscellaneous reviews.

WFA's elder client initiatives team also analyzed its 2016 caseload by client age. Thirty-eight percent of cases involved victims in their 80s, almost as many victims in their 60s (17.9 percent) and 70s (25 percent) combined. Another 16 percent of cases involved victims in their 90s.

Long pointed out a recent increase in the prevalence of financial abuse among clients in their 40s and 50s, driven by adults with special needs. He explained that, in many instances, a family will put aside money in a trust for a special needs child, later choosing a sibling to manage the trust. The managing sibling may then attempt to siphon money from the trust to pay for college tuition for their children or other expenses.

Long closed his discussion by urging his colleagues to adopt a uniform set of standards and definitions for elder fraud and financial exploitation, noting that it would immediately benefit APS agencies for all brokerage firms to be using the same terms in the same way.

**Laurel Sykes** also discussed the ways in which Montecito Bank has repurposed its existing systems and software to monitor customer accounts and collect data on elder financial abuse.

Montecito Bank's elder financial crime detection system builds on its BSA investigations infrastructure, which includes about five call-center employees as well as branch personnel, all of whom are trained to identify elder financial abuse and to take reports from clients. To streamline the process and store all report data in one place, the bank created an internal web-based eForm. Sykes noted that, for a community bank such as Montecito Bank, creating an online form was a simple and low-cost way to begin tracking BSA activity.

Employees logging a BSA report using the eForm must provide data on the victim's age, type of crime, and dollar amount involved. These data are combined with alerts generated from existing fraud and BSA platforms, including ACH activity from accounts in which none existed previously, rapidly diminishing balances, unusual patterns of ATM transactions, and velocity alerts on check fraud systems. All potential elder abuse events are then collaboratively investigated by the bank's BSA and fraud teams.

Sykes explained that alerts and reports from the BSA platform are combined with data from debit and credit card claims systems, fraud tracking software, and core account management systems, and details from cases are aggregated into a single data set that is then mined to identify trends and new schemes. This information is used to periodically refresh internal training documents, ensuring that bank employees are kept aware of the latest scams.

Montecito Bank reports all suspected criminal activity to the appropriate channel and encourages clients to do the same. Identity theft victims can file a report with the FTC at [www.identitytheft.gov](http://www.identitytheft.gov). The bank reports cybercrimes to the Federal Bureau of Investigation's Internet Crime Complaint Center (IC3) at [www.ic3.gov](http://www.ic3.gov).<sup>8</sup> Scams originating by mail are reported to the U.S. Postal Service at 877-876-2455 or online [here](#). Montecito Bank also complies with California's mandatory reporting requirements and files SARs, regardless of whether the transaction reaches a mandatory reporting threshold.

**Liz Loewy**, cofounder and general counsel at EverSafe, shared her thoughts on the types of data that financial institutions could be using to monitor older clients' account activity for signs of diminished financial capacity and financial abuse.

Loewy described her experience as a prosecutor in the Manhattan District Attorney's office, a position she held before cofounding EverSafe. During her tenure, the Manhattan District Attorney prosecuted about 800 elder financial abuse cases per year. While each case was different in many respects, the people who financially exploited older adults generally stole money from multiple accounts across multiple financial institutions. She explained that exploiters often targeted older victims who were unable to testify. If an older person had some degree of diminished cognitive capacity, the exploiter often argued that the money was a gift or loan, frequently claiming the power to do so was authorized according to the power of attorney. Such cases are challenging to prosecute.

Loewy then joined cofounder Howard Tischler, a serial entrepreneur and current CEO of EverSafe, to develop the platform. EverSafe uses machine learning to create a personal financial profile of each member by looking at the past 90 days of activity across every financial account linked to the system as well as credit report data. When the machine learning algorithm detects a deviation from a member's normal pattern of activity, EverSafe alerts the member as well as any designated trusted advocates. Family members, as well as professional caregivers, financial advisors, CPAs, and persons holding a power of attorney may be suitable trusted advocates who serve as an extra set of eyes in monitoring. EverSafe recommends that members designate more than one trusted advocate to receive account alerts.

EverSafe's system generates alerts for a variety of situations that may arise in any of the member's linked accounts. For example, the system will send an alert when a new depository account is opened. As opposed to an alert related to credit report monitoring, such an alert would help detect tax return scams in which a perpetrator files a false tax return, pretending to be someone else. To collect the return money, the perpetrator often opens a depository account in the victim's name.

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<sup>8</sup> Consumers may also report cybercrimes to the FBI at [www.ic3.gov](http://www.ic3.gov).



The new account alert can help detect fraudulent activity before the tax return funds are withdrawn.

The system also sends an alert when it detects activity on a dormant account, which can help detect when a caregiver begins using an old credit card found in the back of the drawer. It also detects missed bill payments, missing deposits, changes in spending (e.g., food), as well as a variety of other suspicious actions (and inactions).

Loewy closed her comments with her wish list for financial institutions. First, she asked that they consider working with fintech partners or enhancing their own technology to use machine learning to develop personal financial profiles for senior customers. Second, consider monitoring the client's activity across accounts. Thus, if a customer has a checking account, savings account, credit card, and several certificates of deposit with the same financial institution, the institution's monitoring system should monitor activity across all the accounts. Third, replace generic fraud and abuse detection algorithms with senior-specific algorithms. Fourth, enable clients to designate one or more trusted contacts across their accounts so they can be alerted, along with the member, under certain circumstances. Fifth, provide senior-friendly convenience features, including text and voice message alerts and read-only account access for trusted advocates. Last, consider providing hands-on remediation support to victims of elder financial abuse, offering them a way to pick up the pieces after a loss event and put them in a better position going forward.

## **X. Leveraging a Strong Data Foundation to Improve Health and Wealth**

In the final conference session, participants discussed the value of taking a holistic approach to health and wealth management, and in particular, how the combination of financial and health data could improve outcomes for older adults in both domains.

**Karlawish** recalled the story of Renee and Arthur Packel.

While Arthur had been making financial mistakes, draining bank accounts, and failing to pay bills for many months, none of the Packels' financial institutions notified Renee. Instead, she found out after the fact via a collections call from their homeowners association. When Renee looked into the family finances, it was clear that disaster had already struck. Karlawish noted that, while the Packels' financial institutions had access to the same data, none were monitoring financial transactions for signs of diminished financial capacity and thus failed to safeguard the Packels' financial future.

As to why Arthur Packel did not recognize his own decline and ask for assistance from his family or a financial manager, Karlawish explained that, when assessing their own ability to perform routine daily tasks, people with AD routinely fail to recognize their own decline. In fact, a key diagnostic tool for identifying AD is the presence of a diagnostic "gap" between patients' self-assessment of their ability to perform activities of daily living (ADL) and that of a family member or close friend.

The diagnostic gap is shown in [Figure 5](#), where lines with filled (unfilled) circle markers represent average patient (family member) ADL assessments for patients known to have AD. The distance between the two lines is the diagnostic gap, with a wider spread indicating a larger gap between the average patients' perceptions of their own cognitive abilities versus that of a close associate. In comparison, lines with filled (unfilled) square markers in [Figure 5](#) represent an average patient/family member's ADL assessments for healthy patients, age-matched to the Alzheimer's group. No diagnostic gap is observed for the first 18 months after the baseline assessment, at which point a gap becomes visible, suggesting incipient cognitive decline. Karlawish explained that, as a result of the diagnostic gap, "we need a system that can proactively identify problems, because if you just wait for people to tell you, they're not going to."

**Casey Greene**, assistant professor in the Department of Systems Pharmacology and Translational Therapeutics at the University of Pennsylvania's Perelman School of Medicine, painted a picture of how data scientists could use machine learning and deep learning — state-of-the-art tools of data science — to combine financial and health data and build models to detect the early signs of diminished financial capacity.

Greene began his introduction to machine learning and deep learning by contrasting them with a rule-based system. For example, a stop sign is a simple rule that tells motorists to stop when they reach the sign. Similarly, a rule-based fraud alert might flag a series of check withdrawals of the same round dollar amount occurring on the same day.

In contrast to following a set of explicit rules, machine learning and deep learning systems are instructed to identify and flag transactions indicative of financial risk. By not limiting the system to a predetermined set of rules, a data scientist permits the system to learn new patterns of suspicious activity, thus providing significantly more flexibility than a rule-based approach.

Greene noted that machine learning and deep learning share some similarities. For example, both learning systems construct a statistical model to relate a set of input data to a set of outcomes of interest. Machine learning and deep learning techniques excel in their ability to detect patterns in very large data sets, which helps to explain why they are often mentioned in conversations about big data. Conversely, such systems perform rather poorly on small data sets and can be outperformed by rule-based systems. Greene suggested that this limitation emphasizes the importance of data sharing in the domain of elder financial abuse prevention.

However, while machine learning systems are typically given input data that is *a priori* believed to be relevant to the outcome to be predicted, deep learning systems are provided with “raw” or unstructured data and told to construct their own input variables. For example, a machine learning system may observe a person's AD diagnosis, while a deep learning system might combine data on a series of encounters with various health-care providers with financial data showing a bounced check or missed payment to construct a more complex input feature correlated to the outcome of interest.

Indeed, deep learning algorithms provide a highly flexible means of learning from a variety of unstructured data points. For example, a financial risk model could incorporate data from a personal fitness tracking device, driver data from an on-board telematics system, and mobile phone usage with a log of interaction with a bank's call center.<sup>9</sup> According to Greene, providing data that measure distinct aspects of behavior challenges the deep learning system to combine those features in new ways that a human analyst may not have considered.

**Karen Mandelbaum**, director of the Division of Security Privacy Policy and Governance, Centers for Medicare & Medicaid Services (CMS)<sup>10</sup>, shared her thoughts on the opportunities and value of health-care claims data as well as the challenges of accessing and sharing claims data with third parties. Mandelbaum is responsible for developing and implementing all of CMS's privacy and security policies including the cybersecurity program.

CMS administers health insurance benefits to more than 150 million Americans, including approximately 55 million Medicare beneficiaries. Programs such as Medicaid, Children's Health Insurance Program, basic health programs, and plans on the Health Insurance Marketplace account for the remaining 95 million to 100 million beneficiaries.

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<sup>9</sup> *Telematics* refers to any system that tracks a vehicle's location or monitors the performance of on-board systems such as emissions, tire pressure, and maintenance schedules.

<sup>10</sup> Mandelbaum is currently a senior counsel at Epstein Becker Green.

Mandelbaum explained that, as a result of the wide reach of CMS-administered health-insurance programs, the agency processes billions of claims annually, with approximately 1 billion Medicare claims per year. Since Medicare covers a wide variety of medical benefits, CMS has claims data for inpatient and outpatient services, as well as pharmaceuticals, durable medical equipment, labs, and radiology. Mandelbaum explained that, from the time adults age into Medicare or are diagnosed with an illness that makes them eligible for Medicare coverage, CMS begins to collect data on their medical history. Thus, Medicare claims data enable researchers to observe chronic conditions treated over a long time period or to follow and detect whether a patient is getting the proper treatment and care for their condition. Medicare claims data are also structured in a way that enables researchers to examine episodes of care, such as a stroke or a fall that triggers a hip replacement. The triggering event and subsequent treatments are identified as a care episode, with a clear endpoint.

Mandelbaum explained that the combination of state and federal laws applicable to patient health records can severely complicate efforts to share information with third parties. As a federal agency, CMS must comply with the Federal Privacy Act, various HHS Privacy Act regulations, the security requirements under the Federal Information Security Act of 2002 (FISMA) and the Cyber Security Act, as well as the Health Insurance Portability and Accountability Act (HIPAA). Although the web of regulatory requirements can seem daunting, Mandelbaum noted that CMS works to ensure that data are shared in a safe, secure, and authorized manner within the health-care space and across industries.

Last, Mandelbaum discussed how the concepts of data ownership and data sharing are changing within the health-care community. Where traditionally both medical practices and data privacy laws have treated primary care providers as the *de facto* owners of patient health records, some health-care professionals and data privacy experts envision a system centered on the patient.

CMS programs such as the Accountable Health Communities Model operate under a vision of the future in which patient-centered, safe, and simple information sharing is directed by the patient, their caregivers, and family members. A more patient-centric approach to data ownership, privacy, and information sharing would place the decision whether to share health information with third parties — including financial institutions — in the hands of the consumer, relieving some of the complexities posed by the administered-consent model of HIPAA and other privacy laws.

Wrapping up the conference, **Larry Santucci**, senior research fellow in the Federal Reserve Bank of Philadelphia's Consumer Finance Institute, discussed how an intra-institutional data-sharing system could help stem losses from fraud and exploitation. Echoing comments from previous panelists, Santucci noted that, when it comes to detecting and preventing elder fraud and financial exploitation, financial institutions are on the frontlines. Financial institutions have the tools required to detect a wide variety of suspicious transactions and may be able to monitor accounts for signs of diminished financial capacity.

Upon detecting a suspicious transaction or series of transactions, federal privacy laws provide exceptions that allow financial institutions to alert local law enforcement and APS under certain circumstances. Financial institutions are also encouraged to file a SAR with FinCEN. However, those same privacy laws do not provide exceptions for financial institutions to share a client's NPI with the client's other financial institutions. Since many people hold assets at multiple financial institutions, this means that only a portion of the client's assets can be flagged and monitored for suspicious activity going forward.

Experts in the field of elder financial exploitation, including former Manhattan District Attorney Loewy, have repeated the mantra that financial crime is rarely contained to a single financial institution; it happens across accounts and across institutions.

In a majority of cases, policymakers and financial institutions cannot rely on the older client or their trusted contact to alert the client's other financial institutions to the possibility of diminished financial capacity or elder financial abuse. First, as Karlawish explained, the diagnostic gap between the way in which people with a cognition-impairing condition see themselves and how they are seen by close friends and family members demonstrates that many older adults are unaware that they can no longer independently manage their financial affairs. Second, and perhaps more important, most elder financial exploitation is committed by a close friend, family member, or caregiver. Asking that person to take responsibility for alerting the older person's other financial institutions is akin to asking the wolf to guard the hen house.

In light of those facts, Santucci suggested that a data-sharing system with the proper controls in place would be a superior way to ensure the safety of an older client's entire financial portfolio. In such a system, financial institutions would be permitted to share a limited amount of personal information with a client's other financial institutions. However, this would be only when the identifying institution had observed and documented signs of financial abuse or diminished financial capacity and had a reasonable concern for the security of the client's financial assets held at other institutions.

Santucci suggested that policymakers evaluate the possibility of leveraging FinCEN's existing reporting platforms to develop a dedicated interbank data-sharing network for elder financial crimes. He explained that Title III of the PATRIOT Act directed the Department of Treasury to establish a secure electronic network for communications between financial institutions and law enforcement agencies.

The PATRIOT Act shields participating financial institutions from liability for disclosing a customer's NPI to another financial institution in matters of potential money laundering or terrorist activities.

In addition, Santucci explained that FinCEN collects data on elder financial exploitation. In 2011, FinCEN issued an alert that encouraged financial institutions to file a SAR when they suspected that elder financial exploitation had occurred. In 2013, FinCEN created an electronic filing form that included a specific checkbox for financial institutions to indicate a suspicion of elder financial exploitation. Integrating marked SAR reports within the secure electronic data-sharing system would provide the financial services industry with a low-cost, federally administered framework for interinstitutional information sharing.

In closing, Santucci noted several challenges to implementing such a system, including data security, the risk of unintentionally sharing more customer information than what is required, liability from inaction or overreaction in response to an alert. Santucci recommended that these and other potential risks be evaluated as part of a comprehensive initiative backed by policymakers, financial regulators, and the private sector.

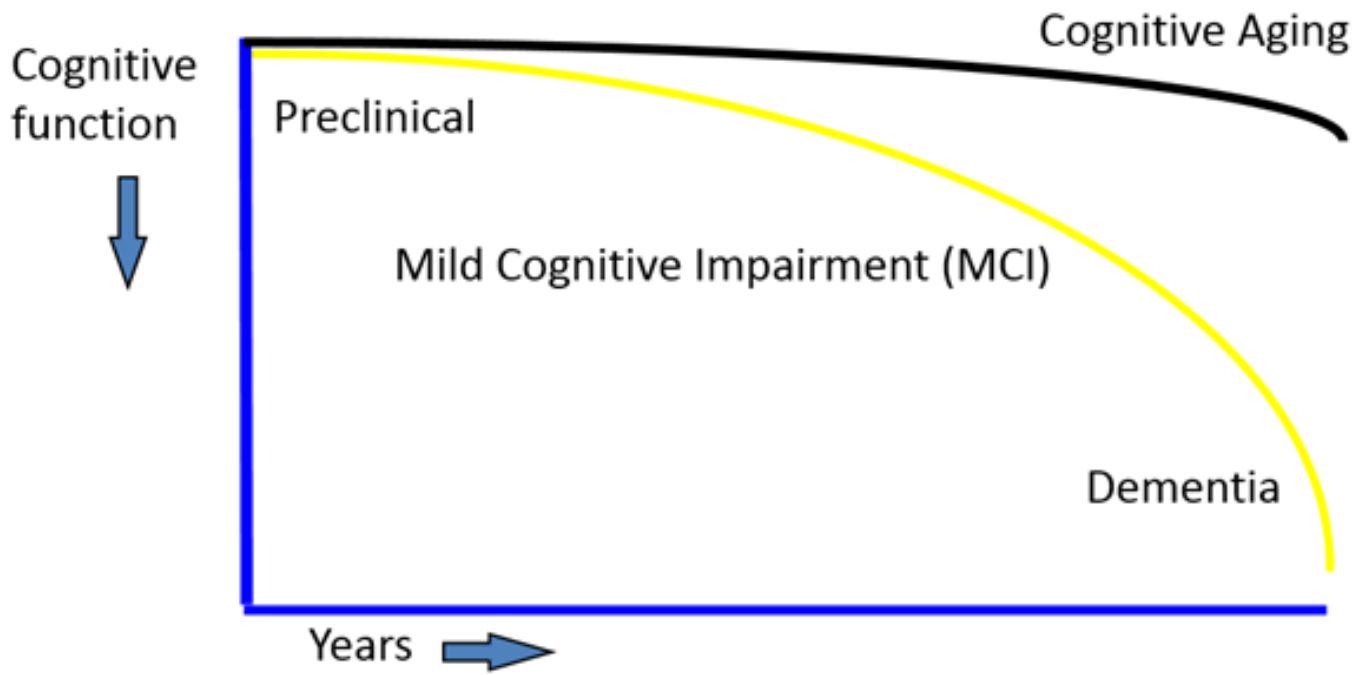
## **XI. Conclusion**

On November 28–29, 2017, the Federal Reserve Bank of Philadelphia's Consumer Finance Institute (CFI) cohosted a conference titled Aging, Cognition, and Financial Health: Building a Robust System for Older Americans. The goal of the conference was to discuss actions that members of the financial services industry can take to address the financial needs of a rapidly aging customer base.

Industry leaders described the process of establishing programs for preventing elder fraud and financial exploitation at their institution. Trade groups and regulatory agencies shared progress reports on broad-based efforts to improve the industry's ability to prevent financial losses and to promote the financial health of older adults with cognitive difficulties. Researchers highlighted the important role that financial data can play in the early detection of cognitive impairment and in preventing losses across older adults' financial portfolios.

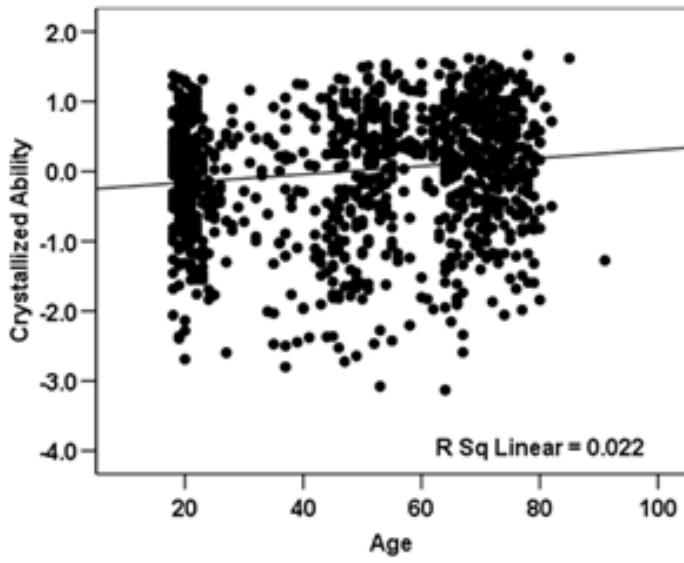
Since the 2017 conference, the CFI has continued its efforts to inform the public about the financial risks of cognitive decline and to encourage the financial community to work together to better secure the financial health of older adults. As the retirement-age population continues its unprecedented growth, we hope to continue in our role as a convener and catalyst to promote a healthy and productive public discussion of cognitive decline and financial security.

Figure 1. The Aging Brain

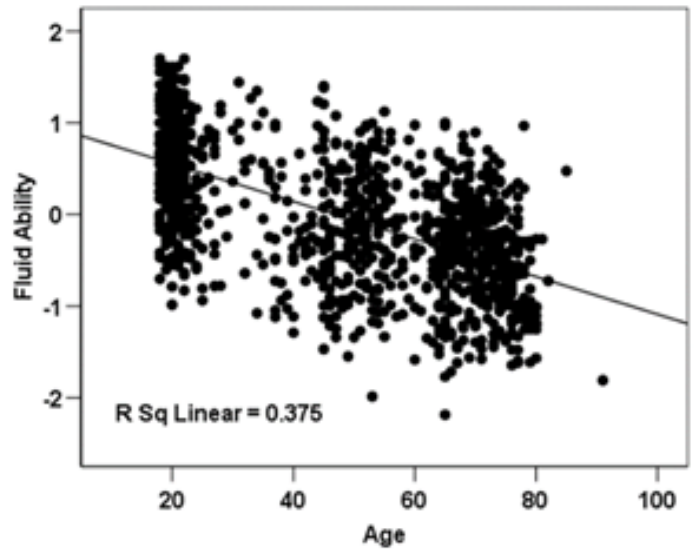


Source: Jason Karlawish, M.D.

Figure 2. A Closer Look at Cognitive Aging



Panel 1 — Crystallized intelligence

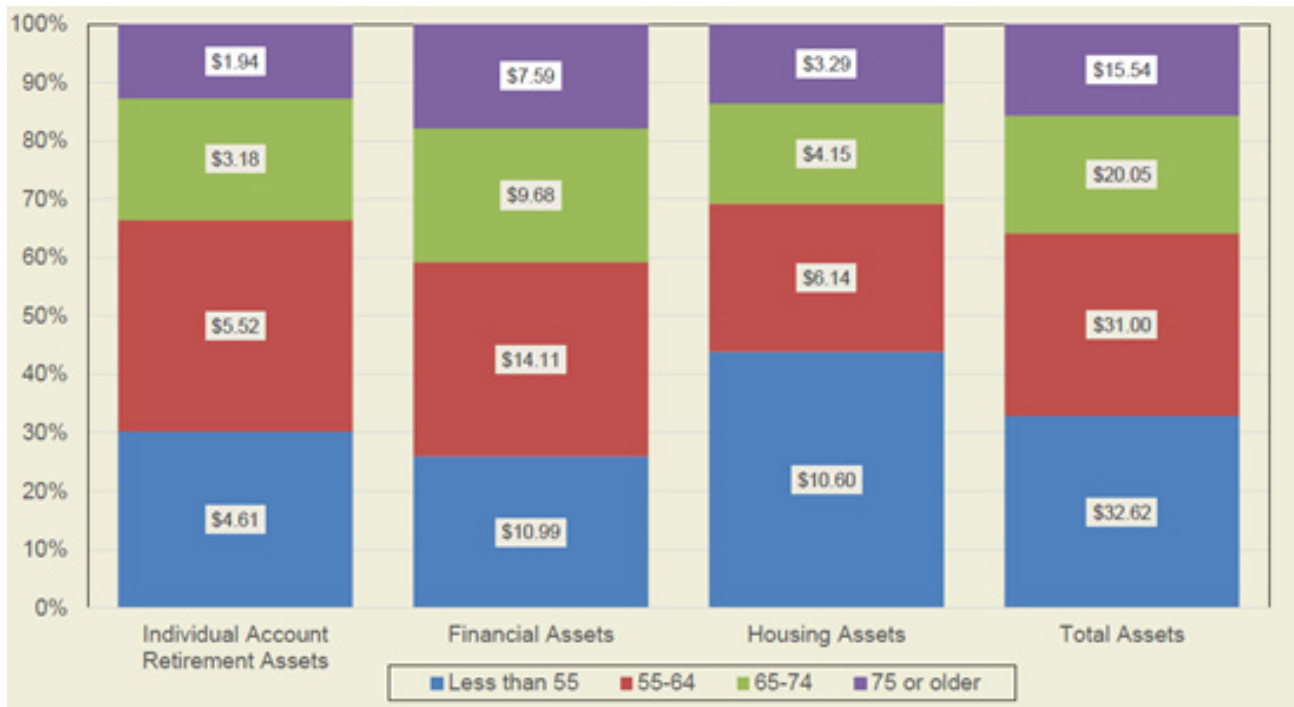


Panel 2 — Fluid intelligence

Source: Jason Karlawish, M.D.

Note: "R Sq Linear" is a measure of the strength of the linear relationship between two variables.

Figure 3. Distribution of Assets Held by U.S. Households, by Asset Type and Age of Family Head (in Trillions of Dollars)



Source: Employee Benefits Research Institute calculations based on 2016 Survey of Consumer Finances

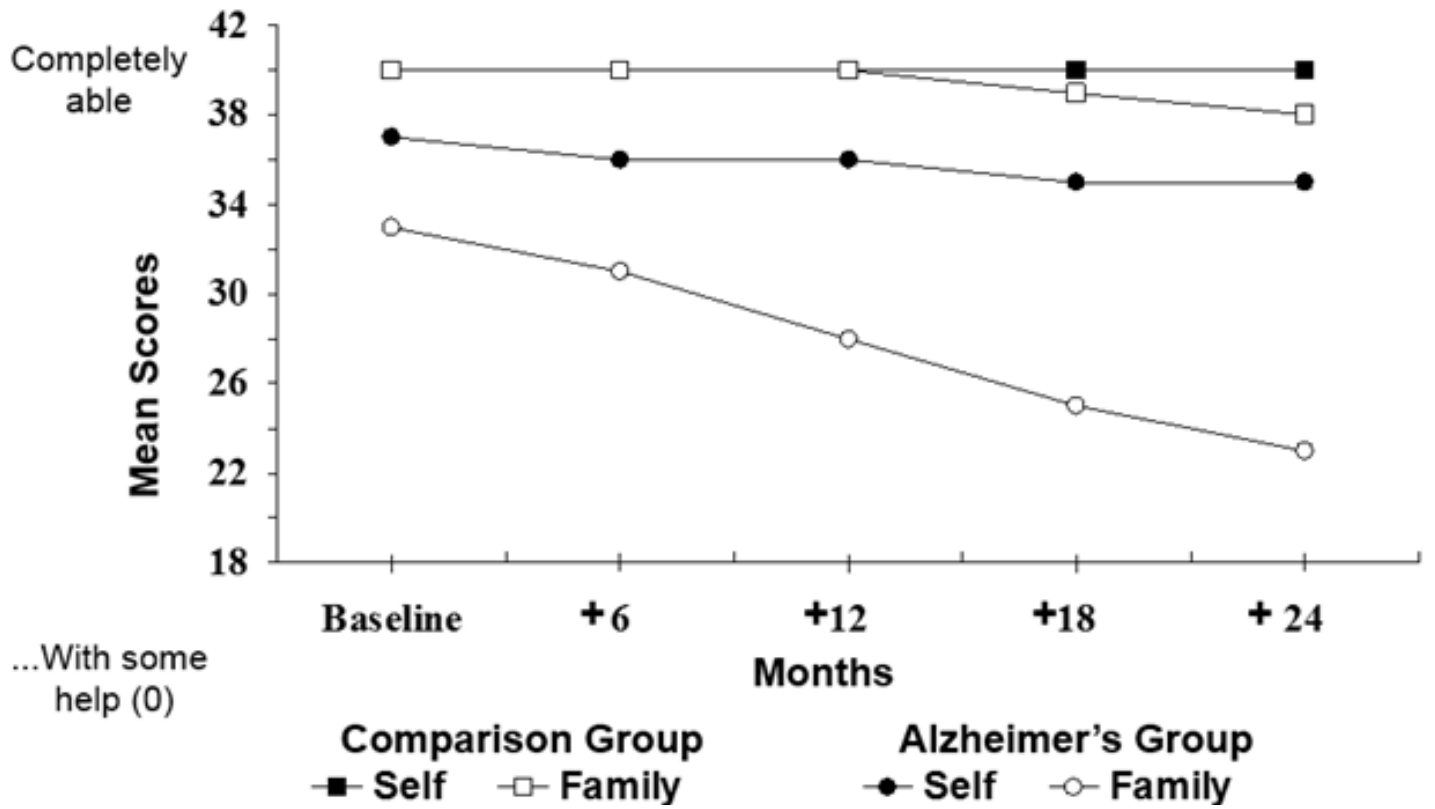


Figure 4. Fraud Taxonomy

Level 2		Level 3		Level 4	
Broad Category (Exhaustive)		Fraud type		Sub-type (Not exhaustive; flexible)	
		<i>What is the fraud type?</i>		<i>What is the fraud sub-type?</i>	
1.1	Consumer investment fraud	1.1.1	Securities fraud	1.1.1.1	Equity investment fraud
				1.1.1.2	Debt investment fraud
				1.1.1.99	Other securities fraud
		1.1.2	Commodities trading fraud	1.1.2.1	Forex fraud
				1.1.2.2	Commodity pool fraud
				1.1.2.3	Precious metals
				1.1.2.99	Other commodities fraud
		1.1.3	Other investment fraud	1.1.3.1	Hollywood film scam
				1.1.3.2	Property / real estate
				1.1.3.4	Rare objects scam

Source: M. Beals, M. DeLiema, and M. Deevy. (2015). "Framework for A Taxonomy of Fraud," Stanford Center on Longevity.

Figure 5. Mean Scores on Total Activities of Daily Living



Source: H.A. Kiyak, L. Teri, and S. Borson. "Physical and Functional Health Assessment in Normal Aging and in Alzheimer's Disease: Self-Reports vs Family Reports." *Gerontologist* 34(3):324-330 (1994).

## Appendix: Conference Agenda

Tuesday, November 28

9:00 a.m.

**Registration and Continental Breakfast**

10:00 a.m.

**Welcome**

[Larry Santucci](#), Federal Reserve Bank of Philadelphia

10:05 a.m.

**Video: [Philip Marshall, Preserving a Legacy](#)**

Philip Marshall turned in his father when he suspected financial abuse of his grandmother, Brooke Astor, known as the First Lady of Philanthropy. Since then, he's turned a background in historic preservation into a passion for elder justice. He discusses his path with Dr. Jason Karlawish.

10:15 a.m.

**Opening Remarks**

President Patrick T. Harker, Federal Reserve Bank of Philadelphia

10:30 a.m.

**Our Aging Population and the Road Ahead**

This panel will discuss how baby boomers are shifting the demographic composition of the country, the difficulties it will face as a result of cognitive impairment, and the retirement savings that will be put at risk.

Moderator: [Jason Karlawish](#), Perelman School of Medicine, University of Pennsylvania

Panelists: [Geoffrey Sanzenbacher](#), Center for Retirement Research  
[Patricia Boyle](#), Rush University Medical Center  
[Craig Copeland](#), Employee Benefit Research Institute

11:45 a.m.

**Lunch**

12:30 p.m.

**Perspectives on the Financial Needs of Older Adults**

Interviewer Jason Karlawish, from the University of Pennsylvania's Perelman School of Medicine, will discuss the financial needs and challenges of the aging population. Renee Packel will share her experience with her husband, who, prior to being diagnosed with dementia, made a series of poor financial decisions; Joseph Donohue will discuss how he has prepared financially for the possibility of future diminished capacity; Paul Tramontozzi of KBK Wealth Management will offer the viewpoint of a Wall Street banker turned wealth advisor who was inspired to act by his father's Lewy body dementia diagnosis.

1:10 p.m.

### **Challenges to Addressing Elder Financial Health**

Industry experts will address financial institutions' (FIs) privacy obligations, legal duties and boundaries, and authority to intervene in financial transactions. Participants will gain a clearer understanding of the measures FIs can and cannot enact on behalf of their elderly clients and what legal and regulatory changes would facilitate their efforts.

Moderator: Kenneth Benton, Federal Reserve Bank of Philadelphia

Panelists: [Lisa Bleier](#), Securities Industry and Financial Markets Association  
[Robert G. Rowe](#), American Bankers Association

2:10 p.m.

### **Break**

2:30 p.m.

### **Factors to Consider When Building Your Business Case**

Representatives from three financial institutions will discuss how each is responding to the problems of aging and cognition, provide insights into the business case behind their efforts, and discuss the goodwill and new business opportunities their work has generated.

Moderator: Jilene Gunther, American Association of Retired Persons

Panelists: Surya Kolluri, Bank of America Merrill Lynch  
[Laurel Sykes](#), Montecito Bank & Trust  
F. Scott Dueser, First Financial Bank Texas

3:45 p.m.

### **Break**

4:00 p.m.

### **Developing a Right-Sized Program for Your Organization**

Discussants will examine the resources available to FIs, including publicly available guides, programs, partnerships, and third-party services. They will also present ways in which the resources can be combined effectively for small, medium, and large size firms.

Moderator: [Laurel Sykes](#), Montecito Bank & Trust

Panelists: [Naomi Karp](#), Consumer Financial Protection Bureau  
Jilene Gunther, American Association of Retired Persons

5:15 p.m.                    **Reception**  
A spirited discussion in Eastburn Court

**Wednesday, November 29**

8:00 a.m.                    **Breakfast**

8:30 a.m.                    **Day 2 Kickoff**  
Jason Karlawish, Perelman School of Medicine, University of Pennsylvania

9:00 a.m.                    **Getting on the Same Page: Standardization Before Aggregation**  
Estimates of the annual cost of financial errors, fraud, and exploitation vary widely. Before the industry can begin to track and validate such estimates, it should determine a common vocabulary and taxonomy to use internally, to report requirements, and to calculate annual estimates.

Moderator:                Gary Mottola, FINRA Investor Education Foundation

Panelists:                 [Lynn Langton](#), U.S. Department of Justice, Bureau of Justice Statistics  
[Stephanie Whittier Eliason](#), U.S. Department of Health & Human Services, Office of Elder Justice and Adult Protective Services

9:45 a.m.                    **Smart Data Collection for Intelligent Monitoring**  
This panel will discuss how financial institutions can leverage many of their existing processes, including those required for Bank Secrecy Act (BSA) compliance, to gain insight into elder financial issues. Panelists will also discuss how financial institutions can identify older customers who are experiencing cognitive difficulties and proactively address their needs.

Moderator:                Jeanne Rentzelas, Federal Reserve Bank of Philadelphia

Panelists:                 [Ron Long](#), Wells Fargo Advisors  
[Laurel Sykes](#), Montecito Bank & Trust  
[Liz Loewy](#), EverSafe

11:00 a.m.

**Break**

11:15 a.m.

**Leveraging a Strong Data Foundation to Improve Health and Wealth**

This discussion will focus on how standardized data collection can be leveraged to improve outcomes for older adults. In particular, presenters will discuss how financial data and analytics can be used in the early detection of cognitive impairment and how data sharing among institutions can help prevent losses across a consumer's financial portfolio.

Moderator: Joanne Hsu, Board of Governors of the Federal Reserve System

Panelists: [Jason Karlawish](#), Perelman School of Medicine, University of Pennsylvania  
[Casey Greene](#), Perelman School of Medicine, University of Pennsylvania  
[Karen Mandelbaum](#), U.S. Department of Health & Human Services, Centers for Medicare & Medicaid Services  
[Larry Santucci](#), Federal Reserve Bank of Philadelphia

12:30 p.m.

**Closing Remarks**

Larry Santucci, Federal Reserve Bank of Philadelphia

1:00 p.m.

**Adjourn**

Box lunches will be provided.

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