2021 Budget Proposals Related to the Master Plan for Aging

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HOUSING • HEALTH REIMAGINED • INCLUSION & EQUITY • CAREGIVING • AFFORDING AGING

In January 2021, Governor Newsom released California’s Master Plan for Aging (MPA), which lays out a ten-year plan to prepare the state for an aging and changing population. The MPA set five major goals: housing for all ages and stages; health reimagined; inclusion and equity, not isolation; caregiving that works; and affording aging.

Governor Newsom also released his January 2021-22 budget proposal shortly after releasing the MPA. Please see Justice in Aging’s Response to the January 2021-22 Budget for a deeper analysis of the Governor’s proposals related to the Master Plan for Aging.

Since January, stakeholders have submitted numerous additional budget proposals for consideration. The list below highlights budget proposals from both stakeholders and the Governor that affect older adults and people with disabilities and that align with the goals of the MPA.

Goal 1: Housing for All Ages and Stages

Stakeholder Proposals

- LeadingAge California recommends an investment of $200 million to develop affordable older adults housing.

- The California Association of Area Agencies (C4A) requests $5 million General Fund (GF) in 2021-22, $10 million GF in 2022-23, and $15 million GF in 2023-24 and ongoing to implement a fall prevention program for older persons living in their homes.

- EMSA requests two positions and GF expenditure authority of $768,000 in 2021-22 and three positions and GF expenditure authority of $789,000 in 2022-23 and 2023-24. If approved, these positions and resources would allow EMSA to implement community paramedicine projects for local EMS agencies, pursuant to the requirements of AB 1544 (Gipson), Chapter 138, Statutes of 2020.
Governor’s Proposals

- The budget provides $750 million in one-time funds to purchase permanent housing for the growing number of unhoused individuals.

- The budget provides $250 million in one-time funds to purchase and rehabilitate Adult Residential Facilities (ARFs) and Residential Care Facilities for the Elderly (RCFEs) to increase housing options for older adults and persons with disabilities.

- The California Department of Technology requests 17 positions and $11.4 million GF in 2021-22, $9.4 million in 2022-23, and $6.4 million ongoing to invest in proactive measures to stabilize critical services and enhance performance statewide. Additionally, this request proposes to augment resources to support the State’s Broadband for All initiative.

Goal 2: Health Reimagined

Stakeholder Proposals

- The Alameda Point Collaborative and Lifelong Medical Care request $15 million GF in 2021-22 to support construction of a medical respite and health clinic building at the Alameda Wellness Campus to serve unhoused adults and seniors with complex health conditions.

- C4A requests $10 million GF in 2021-22, $25 million GF in 2022-23, and $53 million GF in 2023-24 and ongoing to implement a statewide Aging and Disability Resources Connections (ADRC) program.

- The California Association of Public Authorities, Disability Rights California, Justice in Aging, SEIU California, and UDW/AFSCME Local 3930 propose trailer bill language to repeal Welfare and Institutions Code Sections 12301.01 through 12301.05 and permanently restore the seven percent cut to In-Home Supportive Services (IHSS) service hours.

- The California Association of Counties, UDW/AFSCME Local 3930, SEIU California, the California Association of Public Authorities, the County Welfare Directors Association of California, the Urban Counties of California, and the Rural County Representatives of California propose trailer bill language to provide continuity for the existing IHSS collective bargaining funding tools so that further progress on local bargaining for wage and benefit increases will be achieved. Costs associated with this change are $16 million GF in 2021-22 and $32 million in the out years.

- California Collaborative for Long-Term Services and Supports requests $250,000 GF in FY 21-22 to incorporate certain data elements relating to LTSS into its managed care plan contracts.

- California Coverage & Health Initiative requests $12 million dollars in the 2021-2022 budget to strengthen and expand an existing Medicare-Medi-Cal Navigator pilot program.

- The California Food is Medicine Coalition requests $9.3 million GF annually to continue support for a pilot project that provides medically tailored meals to Medi-Cal beneficiaries.
• The California Immigrant Policy Center (CIPC) and Health Access California request expenditure authority of $161 million ($128.4 million GF and $32.6 million federal funds) in 2022-23 and $350 million ($320 million GF and $30 million federal funds) annually thereafter to support expansion of Medi-Cal to all income-eligible seniors regardless of immigration status beginning July 1, 2022.

• CalPACE requests trailer bill language to ensure individuals potentially eligible for PACE are aware that PACE is an option and have an opportunity to be assessed and enroll before being enrolled in a managed care plan under the managed care transition included in the California Advancing and Innovating in Medi-Cal (CalAIM) initiative.

• CHE Behavioral Health Services requests $3 million GF annually and trailer bill language to improve access to behavioral health services for individuals dually eligible for both Medicare and Medi-Cal (dual-eligibles) and who reside in skilled nursing facilities.

• LeadingAge California recommends an investment of $8.5 million to bolster the long-term care workforce.

• LeadingAge California recommends the state pilot a 5-year Housing Plus Services- Nursing Program at the California Department of Aging (CDA) to demonstrate and evaluate the health outcomes of older adults residing in affordable housing receiving critical health and wellness services by a Registered Nurse ($3 million annually or $15 million for 5-year pilot).

• LeadingAge California recommends a $100 million fund to create a PPE fund for emergency use specifically directed to older adults living at home and their care providers. Additionally, the state should avoid supply chain issues in the future by effectively maintaining the state-owned stockpile as set forth in SB 275 (Chapter 301, Statutes of 2020). The new law requires 25% of all PPE from a California-based manufacturer. Estimated cost $714 million.

• LeadingAge California recommends a $717 million one-time allocation to fully upgrade the state’s nursing homes with new HVAC systems, and the state should establish a fund to infection control measures such as installing touchless faucets, hard flooring, and HVAC systems.

• The MSSP Site Association requests $24.7 million GF ongoing to make permanent a temporary rate increase for Multi-Purpose Senior Services Program (MSSP) providers set to expire June 30, 2022.

• SEIU California and United Domestic Workers (UDW)/AFSCME Local 3930 propose trailer bill language to create a new fiscal penalty, equivalent to ten percent of a county’s 2020-21 IHSS MOE, to be applied annually and automatically as long as a county does not reach a contract.

• Western Center on Law and Poverty (WCLP) and Justice in Aging request expenditure authority of $110.1 million ($52.9 million General Fund and $57.2 million federal funds) in 2021-22 and $219.6 million ($105.4 million General Fund and $114.1 million federal funds) annually thereafter to eliminate the assets test for Medi-Cal eligibility determinations for seniors and persons with disabilities, effective January 1, 2022.
• WCLP requests trailer bill language to permit federally allowable flexibility in the acceptance of telephonic or electronic self-attestation of eligibility requirements for Medi-Cal.

• CalPACE requests budget trailer bill language to make permanent the regulatory flexibilities provided to Program for All-Inclusive Care for the Elderly (PACE) organizations during the COVID-19 public health emergency.

Governor’s Proposals

• The Administration plans to submit a proposal to the federal government in the spring to create an Office of Medicare Innovation and Integration to be housed within the Department of Health Care Services (DHCS).

• The budget includes $449.8 million GF in 2021-22 and $242.6 million General Fund in 2022-23 to continue restoration of the 7% IHSS cuts until December 31, 2022 and to continue the restoration beyond the end of 2022 if the Administration “determines through the 2022 Budget Act that there is sufficient General Fund revenue to support all suspended programs in the subsequent two fiscal years.”

• The budget includes $1.2 billion ($557.6 million GF) to fund the increase of the minimum wage to $14 per hour on January 1, 2021, and $15 per hour on January 1, 2022.

• The budget proposes $5.3 million to continue funding for IHSS COVID-19 Back-Up Provider Systems in 2021-22 and to continue the $2 wage differential for back-up providers through the end of 2021.

• The budget proposal continues funding for the Community Based Adult Services (CBAS) and MSSP. The proposal also extends supplemental payments to CBAS providers to December 21, 2022, to align with the Medi-Cal managed care calendar rate year.

• The budget proposes $7.5 million this year and another $5 million for the first half of the 2022-23 budget to expand ADRCs to serve as a “No Wrong Door” network throughout the state, building out ADRCs to provide assistance to older adults and people with disabilities and their families to make sure they are informed and referred to the appropriate services.

  » CDA also requests $1,954,000 GF in 2021-22 and $1,876,000 GF in 2022-23 and ongoing to support 13.0 permanent positions for the expansion of the ADRC Infrastructure Grants Program proposed in the 2021 Governor’s Budget and to provide oversight, coordination, and assistance to the state-wide ADRC network including building the capacity to draw down additional federal funds through Medicaid

• The budget proposes spending 1.1 billion ($531.9 million GF) in 2021-22 to move forward with the CalAIM proposal.

• The budget proposes spending $47 million ($15.6 million GF) to extend funding for certain Medi-Cal optional benefits through December 31, 2022. The budget specifically extends
funding for audiology and speech therapy services, incontinence creams and washes, optician and optical lab services, and podiatric services that had been restored in the 2019 budget. The budget also continues supplemental provider payments by 12 months through June 30, 2022, including supplemental payments to dental providers.

• The budget expands geriatric medicine workforce through a one-time $3 million grant to grow and diversify the workforce pipeline.

• The budget invests in several Alzheimer’s initiatives, including the following one-time funds:
  » $5 million for a public education campaign on brain health;
  » $4 million for new training and certification for caregivers;
  » $2 million for expanded training in standards for care for health care providers;
  » $2 million for grants to communities to become dementia-friendly; and
  » $4 million for research on disparities and equity related to Alzheimer’s disease.

• The California Department of Veterans Affairs requests an augmentation of $330,000 GF and 3.1 positions in 2021-22 and $588,000 GF and 6 positions annually thereafter to realign levels of care in the Barstow Veterans Home. These changes are necessary to meet current and future programmatic needs as outlined in the 2020 Veterans Homes of California Master Plan and the 2021 Barstow Report.

• CalVet requests a one-time augmentation of $10 million GF in 2021-22 for the second year of implementation of a new long term care electronic health record system in the Veterans Homes of California and Headquarters.

• CDA requests $2,059,000 in 2021-22 and $2,041,000 in 2022-23 from the HICAP Special Fund to support two-year limited-term resources equivalent to 3.0 positions and $1.4 million local assistance funding to modernize the Health Insurance Counseling and Advocacy Program (HICAP). Additionally, CDA requests provisional language for this temporary augmentation.

• DHCS requests General Fund expenditure authority of $432,000 in 2021-22 and $405,000 in 2022-23 and 2023-24. If approved, these resources would allow DHCS to implement and operate a temporary, state-funded California Community Transitions (CCT) program, pursuant to the requirements of SB 214 (Dodd), Chapter 300, Statutes of 2020 – p. 59

• DHCS proposes trailer bill language to assess monetary penalties against a long-term health care facility for noncompliance with a hearing decision issued by DHCS that orders the readmission of a resident after a finding that the facility improperly transferred, discharged, or failed to readmit a resident.

• The Office of Systems Integration (OSI), the Department of Health Care Services (DHCS), the Department of Public Health (DPH), and the Department of Developmental Services (DDS) request total expenditure authority of $24.1 million ($5.8 million GF and $18.3 million federal
funds) in 2021-22. If approved, these resources would continue the multi-departmental planning effort for the second phase (Phase II) of implementation of Electronic Visit Verification for personal care services and home health care services, including completion of activities required by the Department of Technology’s Project Approval Lifecycle (PAL) Stage Gate requirements and the federal Advanced Planning Document (APD) process.

- The budget proposes $94.8 million ($34 million GF) to expand and make permanent certain telehealth flexibilities, including using $34 million for remote patient monitoring.

Goal 3: Inclusion & Equity, Not Isolation

Stakeholder Proposals

- C4A requests $3.3 million GF ongoing to provide for the basic operations of Area Agencies on Aging’s (AAA) oversight duties and responsibilities.

- The California Association of Health Facilities requests $6 million GF in 2021-22 and $5.5 million annually thereafter to establish the Office of the Patient Representative within CDA.

- The California Pan-Ethnic Health Network and the WCLP request $1 million GF in 2021-22 and $30,000 annually thereafter to field test translations of Medi-Cal materials and collect additional demographic data as part of the Equity Dashboard.

- The County Welfare Directors Association (CWDA) and the California Association of Public Authorities request $5 million GF ongoing, to be matched with $5 million federal funds, to allow counties to implement or expand technologies for electronic form submittal. This proposal also includes accompanying trailer bill language to require CDSS to create a plan to develop the ability to electronically sign and submit forms.

- CWDA and Justice in Aging request $25 million in the current year, and $100 million annually thereafter to expand the Adult Protective Services (APS) program and to build upon the APS Home Safe Program.

- CWDA requests $5 million GF in 2021-22 and $1 million ongoing to provide a simple, global telephonic signature solution that could be used by any county human services program that does not otherwise have access to a method of recording and storing telephonic signatures.

- LeadingAge California recommends a $10 million investment in digital literacy programs to provide outreach efforts, education tools, and onsite education for thousands of older adults who would benefit from taking full advantage of access as part of the “Broadband for All” initiative and to address resident isolation.

Governor’s Proposals

- The budget includes the appointment of a Senior Advisor on Aging, Disability and Alzheimer’s to advance cross-Cabinet initiatives and partnerships.
• The budget includes $5 million GF Master Plan for Aging implementation funds. These funds are earmarked for implementation of proposals that will be released in the spring.

• CHHSA requests six positions and GF expenditure authority of $7.6 million in 2021-22, $4.1 million in 2022-23, and four positions and $1.3 million annually thereafter. If approved, these positions and resources would allow CHHSA to implement several equity-related proposals including a post-pandemic equity analysis, language access resources, an equity dashboard, and workforce training.

  » In addition, DHCS requests five positions and expenditure authority of $967,000 ($484,000 GF and $483,000 federal funds) in 2021-22 and $922,000 ($461,000 GF and $461,000 federal funds) annually thereafter. If approved, these positions would allow DHCS to partner with CHHSA on implementation of the equity dashboard.

• The Department of Justice requests 10 positions and $2.1 million Public Rights Law Enforcement Special Fund in 2021-22 and ongoing to address the workload related to healthcare rights and access.

• CDA requests $3,262,000 GF in 2021-22 and $3,329,000 GF in 2022-23 and ongoing to support 20.0 permanent positions and resources equivalent to 1.0 one-year limited-term position and $300,000 contract authority to implement the MPA through policy, technology, data, project management, and support. Additionally, CDA requests 2.0 permanent position authority-only for existing temporary help positions.

• CDPH and Center for Healthy Communities (CHC), Injury and Violence Prevention Branch (IVPB) requests five positions and $780,235 GF appropriation in 2021-22 and ongoing to establish and administer an Office of Suicide Prevention as authorized by AB 2112.

• GovOps is requesting three positions and $558,000 GF in 2021-22 and ongoing to facilitate and support the implementation of the Statewide Data Strategy (SDS) and conduct evaluations for GovOps’ Center of Government Excellence.

Goal 4: Caregiving that Works

Stakeholder Proposals

• The Association of California Caregiver Resources Centers requests $12 million annually in FY 21-22, 22-23, and 23-24 to continue infrastructure support and to building an Equity and inclusion Core with the CRC system.

• Long-Term Care Ombudsman Association and Ombudsman Services of Contra Costa, Solano, and Alameda requests $1,612,500 in one-time GF to open three Healthcare Career Pathway Model sites to train 220 Certified Nursing Assistants annually to work in nursing care facilities.

• SEIU California requests trailer bill language to phase out workforce shortage and patient acuity waivers for statutory staffing requirements in skilled nursing facilities.
Goal 5: Affording Aging

Stakeholder Proposals

- C4A requests $35 million GF in 2021-22, $50 million General Fund in 2022-23, and $75 million GF in 2023-24 and ongoing to **expand the senior nutrition programs**.

- California Association of Food Banks request the **provision of replacement food benefits to SNB and TNB households**, extend amount of time discontinued SNB and TNB households have to restore eligibility by completing recertification process from 30 days to 90 days, and extend TNB recertification period from every 6 months to every 12 months.

- California Association of Food Banks also requests $110 million **one-time funding through the 2021-22 fiscal year for food banks** and $30 million one-time funding for diaper banks.

- The Coalition of California Welfare Rights Organizations requests trailer bill language to **repeal the Housing Assistance Program’s limit on receiving assistance once every 12 months**.

- The Corporation for Supportive Housing and WCLP request $100 million ($24 million GF and $76 million federal funds) in 2021-22, $150 million ($36 million GF and $114 million federal funds) in 2022-23, and $250 million ($60 million GF and $190 million federal funds) annually thereafter to **create a Medi-Cal benefit to fund housing support services for beneficiaries experiencing homelessness** and people who were homeless and are now residing in supportive housing.

- CWDA requests $100 million one-time to be available through the 2022-23 fiscal year to **provide additional, flexible resources for DSS administered housing programs**.

- CWDA requests the following statutory flexibilities in the HSP and the HDAP

  - For HSP, CWDA proposes to **allow for interventions with clients to take place prior to the issuance of an eviction notice** from a client’s landlord.

  - For HDAP, CWDA proposes to move from a grants-based to an allocation-based fund distribution process and to remove the interim assistance reimbursement (IAR).

- The Meals on Wheels (MOW) Association requests $17.5 million in 2021-22 and $35 million annually thereafter to **fund senior nutrition programs**.

- Nourish California requests up to $6 million in 2021-22, $12 million in 2022-23, and $51 million in 2023-24 to **expand the CFAP to provide state-funded nutrition benefits to anyone ineligible for CalFresh** solely due to their immigration status.

- Nourish California requests $1 million GF in 2021-22 to **design and integrate a user-centered, simplified CalFresh application for seniors and people with disabilities**. Nourish California also requests that the 2021-22 budget include language ensuring that all CalFresh clients are able to complete all forms requiring a client signature entirely by phone upon completion of the CalSAWS consortia consolidation project in each county, respectively.
• WCLP recommend appropriating $75 million (one-time) to seed the creation of revolving fund programs that replicate the Alameda model of SSI Advocacy paired with advanced interim payments to GA/GR recipients who are applying for SSI.

Governor’s Proposals

• The budget funds stimulus payments through the CalEITC. It proposes an additional $600 payment for everyone who receives the CalEITC, as part of a new Golden State Stimulus program for COVID-19 relief. This proposal has already passed, it also included SSI/SSP recipients.

• The budget includes funds to ensure food security -- $22.3 million for the Supplemental Nutrition Benefit (SNB) and Transitional Nutrition Benefit (TNB) programs.
  » The budget also includes $30 million one-time for emergency food, and $11.4 million for the California Food Assistance Program to provide households with the maximum allowable allotment based on household size.

• The Governor’s proposal also extends duration of full-year GF augmentation for senior nutrition programs (subject to possible suspension on December 31, 2022).