

IMPACT Committee Report: Master Plan for Aging's Year 1 In Review

April 2022

After the release of California's Master Plan for Aging ("MPA" or "Plan") in January 2021, the California Department of Aging (CDA) appointed and convened the *Implementing the Master Plan for Aging in California Together (IMPACT) Stakeholder Committee* to provide guidance on implementation of the Plan. With diverse representation and expertise, the IMPACT Committee focuses on accountability, outcomes, and continued improvement toward the realization of the five bold goals of the MPA:

- **Goal 1:** Housing for All Ages and Stages
- **Goal 2:** Health Reimagined
- **Goal 3:** Inclusion & Equity, Not Isolation
- **Goal 4:** Caregiving that Works
- **Goal 5:** Affording Aging

Now, one year into the implementation of the Plan, the IMPACT Committee has prepared this report to provide feedback on MPA implementation to date and to provide recommendations for moving forward. The report is divided into two sections. The first section highlights four important accomplishments and themes from the first year of MPA implementation:

- Key leadership and stakeholder committees are in place
- Historic investments for older adults and people with disabilities
- Local communities are taking action and leading the way
- Many committees and initiatives started but more coordination and focus needed

The second section provides three high level recommendations for the next two years of implementation and beyond. Those recommendations are:

1. Focus on two of the big issues: Building a System of Care and Ending Older Adult Homelessness
2. Elevate and integrate equity throughout the MPA
3. Continue to draw on the Governor's powerful leadership to advance the goals of the MPA

This report is provided as we enter the third year of the COVID-19 pandemic. The pandemic has been particularly difficult for older adults and people with disabilities. Across the country more than 1 out of 100 people age 65 and over have died from COVID-19. Black and Hispanic older adults have died at significantly higher rates than white older adults. Older adults living with dementia and Alzheimer's, especially in congregate living situations, experienced a 16 percent increase in mortality due to COVID-19 directly, as well as the devastating consequences of social isolation and despair. The pandemic has both exposed existing weaknesses in our systems of care for older adults and created new ones. The MPA remains an important vehicle for learning lessons and making transformational change in response to the lessons learned over these last two years.

More attention must be brought to the reality that our population is rapidly aging, that there will soon be as many people over 60 as under 19, and that groundbreaking solutions are needed to ensure that older Californians and persons with disabilities can remain in their communities and thrive in California. Families throughout the state are doing the heavy lifting of caring for their older and disabled family members, but they need help, and California should continue to be on the forefront of providing solutions.

Section 1: Feedback on Year 1 of MPA Implementation

Overall, the first year of implementation of the MPA has been very positive. New leadership was identified and committees were created. The administration began work on a plethora of initiatives and partnered with the Legislature to make new investments in older adults and people with disabilities consistent with the Plan. Local engagement and support have been robust, laying the foundation for continued momentum and progress. Key aging and disability stakeholders remained engaged and excited.

Key Leadership and Stakeholder Committees Are in Place

During the first year of implementation, the Governor and his administration followed through on commitments to identify key leadership and to establish committees to ensure effective implementation of MPA initiatives. In October 2021, the Governor appointed Kim McCoy Wade as the new Senior Advisor on Aging, Disability, and Alzheimer's and appointed Susan DeMarois as the new Director of the California Department of Aging (CDA). Additional key hires have been made within California Health and Human Services Agency (CHHS), the Department of Health Care Services (DHCS), the Department of Social Services (DSS), and CDA that have elevated people with expertise in aging and disability to prominent policymaking positions. Aging and disability stakeholders broadly support these changes.

Stakeholders have also welcomed the creation and formal launch of the various MPA implementation committees, including the IMPACT Committee, the Disability and Aging Community Living Advisory Committee, the Equity in Aging Advisory Committee, and the California Elder & Disability Justice Coordinating Council. Improved coordination among and between the various new committees and a clarification of each committee's purpose would strengthen the effectiveness of ongoing stakeholder engagement. In the coming year, each committee should be provided more clarity around goals, feedback, and complementary action and response. Additional MPA implementation committees, focused on housing and transportation respectively, would help ensure progress is made in those important areas.

These committees and the new leadership in key government agencies illustrate the state's commitment to responding to aging and disability issues and provide the foundation and structure needed for effective implementation of the Plan. They have also contributed to greater attention to aging and disability issues as well as silo-busting both across state departments and between the disability and aging communities. Stakeholders recognize that these structures set California apart as a leader in improving the experiences of older adults and people with disabilities.

Historic Investments in Older Adults & People with Disabilities

Last year, Governor Newsom and the Legislature passed a historic 2021-22 state budget that included investments related to all five goals of the MPA. [The final budget included more than 40 investments in aging and disability](#), including investments that respond to the homelessness crisis among older adults, expand access to Medi-Cal for older adults and people with disabilities, reverse harmful cuts from the Great Recession, create new and innovative programs that advance nearly all of the state's Alzheimer's Prevention and Preparedness Task Force recommendations, and more. Additionally, the state leveraged increased federal funding for home care to develop the [Home- and Community-Based Services \(HCBS\) Spending Plan](#). Initiatives in this plan, many of which align with the goals of the MPA, total approximately \$3 billion in enhanced funding for these critical services.

Together, the 2021-22 state budget and HCBS Spending Plan provided overdue investments for the aging and disability communities to respond to long-standing gaps and inequity they experience. The aging and disability communities celebrated these meaningful wins in funding and the action these investments bring, and look forward to how investments in later years can build on these foundational down payments. It is critical that the year ahead focus specifically on continuing to implement these—and new—investments in communities so that older adults, people with disabilities, and their families begin to see changes in their lived experiences. It is also imperative that future funding and investments are identified to address the ongoing growth and demand for service in the aging and disability network of care.

The MPA has the potential to fully realize the goals of the United States Supreme Court’s *Olmstead* decision and the integration mandate of the Americans with Disabilities Act (ADA). The right to live in one’s own home and community is a civil right to which all Californians must have access.

Local Communities are Taking Action and Leading the Way

The MPA included a [Local Playbook](#) that has ignited action at the city and county level. Local policymakers are seeing up-close the changing demographics in their communities, and they are acting now to ensure that their cities and counties are livable for people of all ages and abilities. As energy builds, it is important to ensure Local Playbook activities are fully representative and engage the diverse voices of communities, including those with limited English proficiency. Stakeholders encourage more communication and coordination between state leadership with local and county leadership to ensure seamless and timely implementation of the MPA on the ground.

Communities have been particularly engaged around AARP’s Age-Friendly Network. As of March 2022, that network includes the state of California and 73 local jurisdictions from across the state. The local jurisdictions in the Network represent over 22 million Californians, ranging in population from 2,500 to 10 million. Since the release of the MPA, 32 jurisdictions and the state of California have joined the Network.

This local engagement demonstrates the power and popularity of taking bold action to prioritize aging and inclusive communities across the state.

Many Initiatives but More Coordination, Communication, and Focus Needed

The MPA included a commitment from the Newsom Administration to work on more than 130 initiatives over the next two years. This has kicked-off an incredible array of activity related to the MPA over the last year. Initiatives were assigned to departments across CHHS and to other state agencies, including the Business, Consumer Services and Housing Agency (BCSH), CalVet, CalICH, and the Labor & Workforce Development Agency. This ‘whole of government’ approach to meeting the needs of those growing older in California was demanded and welcomed by stakeholders.

The sheer number of initiatives, agencies, and departments involved, however, have been difficult to manage. While [CDA’s first annual progress report](#) catalogued a broad look-back of events and details of specific activities or operations, real-time tracking of action and outcomes across many initiatives has been unclear to stakeholders. The current status of fulfilling these initiatives and realized impact of these initiatives is unclear. Communication with stakeholders regarding concurrent progress on all the initiatives has been a

challenge, and it is not clear that all agencies are fully engaged. It is difficult to see how, at this moment, many of the smaller initiatives will lead to meaningful change in the daily lives of older adults and people with disabilities living in the state. A deep focus on a few transformational issues (as noted below) will help ensure that the MPA reaches its full promise.

Section 2: Recommendations For Year 2 and Beyond

To accomplish the Plan's bold goals, these next years of implementation must be clearly focused on the big issues that older adults and people with disabilities in California face, and equity must be made a principal focus. The broader aging and disability advocacy communities would also celebrate the Governor incorporating the MPA as a framework for his remarks around his work to make the state a California For All.

Focus on Two of the Big Issues: Building a System of Care and Ending Older Adult Homelessness

To achieve meaningful, transformative change in the daily lives of older adults, people with disabilities, and their families; we encourage the Governor, his Administration, the Legislature, and stakeholders to focus on two main issues in the years ahead. It is imperative that the state focus on building a system of care for older adults and ending older adult homelessness. While the MPA has a wide range of initiatives and goals, the IMPACT Committee agrees that these two issues are foundational to ensuring stability and prosperity for older adults in California now and in the future.

- 1. Home and Community-Based Care (HCBS).** Across California, individuals and families are asking themselves: How will I get the care I need at home as I grow older? Who will care for me as my needs change? How will I care for those I love? How will I afford the care my family and I need? Stress caused by the lack of answers to these questions has only increased during and due to the pandemic, where rates of infection and death were highest in congregate long-term care settings.

It's time to get serious and to build a robust, comprehensive system for providing care to older adults and people with disabilities at home and in their communities. The MPA includes several initiatives that will contribute to meeting this need, but more bold, focused action is necessary. To truly realize the vision and goals of the MPA, the Governor must make a comprehensive and specific commitment to build the system of care that we need. That commitment should include investments—in this budget cycle—in the workforce that provides home-based care. We must invest in the long-term care workforce by promoting compensation and training, in particular for the key population segments already doing this work—persons of color, immigrants, and women—and by creating career pathways that provide advancement opportunities for those that lead and excel in this field.

The state must also commit, within the next two years, to ensuring that families can afford care at home by expanding Medi-Cal eligibility and creating a new LTSS social insurance program that will provide supports and services for individuals who need assistance with activities of daily living and to help Californians who do not qualify for Medi-Cal remain in their homes and communities.

We need specific investments and improvements to existing HCBS programs where there are identified gaps or bottlenecks, including the Home & Community Based Alternatives Waiver, the Assisted Living Waiver, and In-Home Supportive Services. The State must address long delays in

accessing HCBS services by prioritizing the processing of applications, reducing waitlists and the number of unused slots, investing in the recruitment of new waiver agencies, enhancing back-up provider capacities, and eliminating barriers for family member providers.

- 2. Ending Older Adult Homelessness.** Homelessness has been a top issue and priority for the state. Last year, the budget dedicated \$12 billion toward addressing the unaffordable housing and homelessness crises. However, despite the fact that older adults are the fastest growing segment of the homeless population, most of the large housing investment allocations were not targeted to meet the specific needs of older adults and people with disabilities. Stakeholders have also expressed concern regarding the CARE courts proposal. Instead of solving homelessness, it will likely distract resources and attention from work that would have a bigger impact. The CARE courts proposal also raises serious civil rights concerns from homelessness advocates and people in the disability rights and elder justice communities.

California's plan to end homelessness among older adults and people with disabilities should include targeted funding and specific policies that address the interrelated housing and health care needs of this population. This includes providing both capital and ongoing funding for deeply affordable, accessible housing linked with needed health care and supportive services so that all older Californians can age in place. For example, Project Homekey is a successful model of how to quickly and cost-effectively create housing for those experiencing homelessness. It is important to require that a certain percentage of Project Homekey or other housing initiatives be allocated to older adults and those with levels of disability. The state should engage in a whole of government approach or campaign to ending older adult homelessness. Convening a working committee dedicated to housing, including solutions for homelessness and bridging health care with homes, could be one bold foundational step the state could take.

In order to make significant progress on MPA housing initiative #117 related to preventing older and other at-risk individuals from falling into homelessness, the state should adopt a rental assistance program targeted to severely rent-burdened and other precariously housed older adults and persons with disabilities. This has been shown to be one of the most effective homelessness prevention strategies.

The MPA includes goals and initiatives related to these two issues, but right now the initiatives are too small, the goals are too vague, and the accountability is too dispersed to achieve meaningful change at the scale needed to tackle these problems. We recommend that specific plans of action be developed and implemented for these two areas.

Elevate and Integrate Equity Throughout the MPA

Equity became an important focus of the MPA Stakeholder Advisory Committee during the MPA stakeholder recommendation process, and stakeholders celebrated the commitment to equity in the final MPA. During the first year of the MPA, there were several equity-specific accomplishments, including the expansion of Medi-Cal to undocumented older adults, the increase in and eventual elimination of Medi-Cal asset limits for older adults and people with disabilities, the proposal to expand nutrition assistance to undocumented older adults, filling the gap of cognitive assessments for those who are solely Medi-Cal eligible living with dementia, and the creation of the Equity in Aging Advisory Committee.

The IMPACT Committee recommends that equity become an even more prevalent part of the MPA in the years ahead and be embedded throughout the five goals. First, the MPA should include a bold, overarching commitment to advancing racial equity and to measurably reducing specific disparities facing older adults, and new equity-specific initiatives should be added to each of the goals in the MPA. All existing and new initiatives should also be explicitly centered in equity and should clearly define the disparities they aim to reduce, the specific resources being allocated to advancing equity, and how they will engage communities in their design and implementation.

Furthermore, advancing equity requires elevating the voice and lived experience of impacted communities, and the MPA stakeholder process should be evaluated with this in mind. The Equity in Aging Advisory Committee should continue its important work and should be provided with equity-specific projects and proposals to contribute to this effort. All other MPA committees, including the IMPACT Committee, should also integrate equity into their work.

Finally, future reporting on the MPA should focus specifically on how initiatives undertaken are advancing equity for older adults with disabilities, older adults of color, LGBTQ older adults, older women, older immigrants, and older adults who are limited English proficient.

Continue to Draw on the Governor’s Powerful Leadership to Advance the Goals of the MPA

The Governor’s decision to create the MPA was a welcomed and unprecedented recognition that we need to prepare our state for our growing aging population, and he has proven to be a passionate and powerful leader and spokesperson for the needs of older adults, people with disabilities, and our families.

We need the Governor to continue to be a transformational, inspiring, and innovative leader on these issues—continuing to highlight the need to prepare for California’s future and to learn the lessons of the pandemic. The Governor is in a unique position to educate the public about the importance of building a state that is inclusive for all ages and abilities and to position California as the most innovative state in the nation for meeting the needs of an aging population. It is important to the success of the MPA that he continue to speak about the five bold goals in the MPA and, in particular, the critical issues outlined in the recommendation above: building a true system for home and community-based care and ending older adult homelessness.

We specifically recommend that the Governor use this position to elevate the goals and accomplishments of the MPA in his public appearances. In addition to key press events around the May Revision and January Budget Proposal, we encourage the Governor to have more events focused on aging and disability issues. We urge local events to highlight the important work that communities are doing to implement the Plan. We also see opportunities to highlight aging and disability in other venues, such as events on homelessness, where there is a key intersection.

Conclusion

The IMPACT Committee is grateful for the Governor’s leadership to date and for the work of CDA and other agencies and departments to implement the MPA over this last year. We appreciate the opportunity to provide feedback and recommendations via this report and our continued meetings. A lot has been accomplished over the first year, and considerable work remains to meet the growing and evolving needs of California’s aging population. We look forward to encouraging accountable execution of the Plan; leveraging opportunities; and partnering with the Legislature, Administration, and other community stakeholders to build a California for all ages during this second year of implementation and beyond.

IMPACT Stakeholder Committee Membership

- Elizabeth Edgerly, PhD., Executive Director, Alzheimer’s Association, Northern California & Northern Nevada chapter
- Andy Imparato, JD, Executive Director, Disability Rights California
- Nancy McPherson, MPA, State Director, AARP California
- Sarita Mohanty, MD, MPH, MBA, President & CEO, The SCAN Foundation
- Doug Moore, Executive Director, United Domestic Workers Association
- Sharon Nevins, LCSW, MPA, Director, Department of Aging & Adult Services, San Bernardino County
- Kevin Prindiville, Executive Director, Justice in Aging
- Kiran Savage-Sangwan, MPA, Executive Director, California Pan-Ethnic Health Network
- Fernando Torres- Gil, PhD, MSW, Professor of Social Welfare and Public Policy and Director of the Center for Policy Research on Aging at University of California–Los Angeles

Please send any inquiries regarding this report to Kevin Prindiville at kprindiville@justiceinaging.org.