

CALIFORNIA DEPARTMENT OF AGING

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California Department of Aging Summary of The Budget Act of 2020 (July 16, 2020)

This document summarizes the California Department of Aging's (CDA) budget, as authorized in the [Budget Act of 2020](#). This budget reflects the adjustments made based on the agreement of the Administration and the Legislature after the publication of the Governor's Proposed May Revision. The tables below summarize the dollar for the departments various items of appropriation.

Program	FY 19-20 Baseline Budget Total (Budget Act) **	Families First Act ****	CARES Act ****	FY 20-21 Budget Adjustments *****	FY 20-21 Budget Total
Community-Based Adult Services	\$5,329	\$114	\$-	\$-	\$6,263
Multipurpose Senior Services Program	\$38,075	\$-	\$-	\$-	\$23,893
Long-Term Care Ombudsman	\$17,319	\$-	\$2,091	\$1,000	\$18,594
Nutrition	\$119,001	\$25,086	\$50,173	\$-	\$118,165
Supportive Services and Family Caregiving	\$67,267	\$-	\$31,236	\$-	\$62,621
Aging and Disability Resource Centers	\$5,000	\$-	\$3,005	\$-	\$5,000
Health Insurance Counseling and Advocacy Program	\$13,468	\$-	\$-	\$-	\$13,778
Medicare Improvements for Patients and Providers Act	\$24	\$-	\$-	\$2,214	\$2,241
Other Programs ***	\$8,219	\$-	\$-	\$-	\$8,317
Relocation	\$-	\$-	\$-	\$3,062	\$-
TOTAL	\$273,702	\$25,200	\$86,505	\$3,943	\$258,872

*Dollars displayed in thousands

**FY 19-20 Baseline Budget may include one-time funding attributed to carry-over of prior year federal grant funding for: Title III-Nutrition, Supportive Services, and Family Caregiver Services; as well as other one-time adjustments

***Other Programs include: Senior Community Employment Service Program and Alzheimer Demonstration Grant

****Families First and CARES Act are one-time federal funds for FY 2019-20, available to expend through 09/30/21; not included in the FY 20-21 Budget Total

***** FY 20-21 Budget Adjustments include: one-time transfer of \$1.0 million from the State Health Facilities Citation Penalties Account to the Ombudsman Program; MIPPA Federal Fund authority Increase (\$2.2 million); CDA HQ Relocation funding (\$3,062 million GF), these dollars are built in to each individual program budget for FY 20-21 and not included in the Relocation line FY 20-21 Budget Total

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Health at Home

Community-Based Adult Services Program [\$6.3 million (\$3.3 million GF)]

Budget Adjustment:

- Increase federal COVID-19 funding: Families First Act (\$114 thousand). Additional federal funding was provided for Community-Based Adult Services centers via the enhanced Federal Medical Assistance Percentage (FMAP) rate increase, 6.2%, for the 1st and 2nd quarters of 2020. The FMAP is percentage rate of federal matching funds for state expenditures of Medicaid assistance payments for social service, state medical, and medical insurance programs.

The Community-Based Adult Service (CBAS) program, also known as Adult Day Health, is an alternative to skilled nursing facilities for those individuals who are capable of living at home with the aid of appropriate health, rehabilitative, personal care, and social services. Each center has a multidisciplinary team of health professionals who conduct a comprehensive assessment of each potential participant to determine and plan services needed to meet the individual's specific health and social needs. Services provided at the center include the following: professional nursing services; physical, occupational and speech therapies; mental health services; therapeutic activities; social services; personal care; hot meals and nutritional counseling; and transportation to and from the participant's residence. It is important to note that Community-Based Adult Service participants can be any adult over the age of 18 who meets the specific medical necessity and eligibility criteria.

In FY 19-20, the Community-Based Adult Services program serves 36,031 individuals including 34,369 Medi-Cal and 1,662 private-pay participants at the 257 Community-Based Adult Service centers.

Multipurpose Senior Services Program [\$23.9 million (\$22.2 million GF)]

Budget Adjustment: None

The Multipurpose Senior Services Program (MSSP) provides both social and health care coordination services to assist frail individuals aged 65 or older to remain in their own homes and communities. The Program's goal is to prevent or delay individuals moving into a skilled nursing facility through ongoing care management at home, using available community services and resources, and purchasing needed services when they are not already available. MSSP participants must be on Medicare and qualify for placement in a skilled nursing facility. Most Multipurpose Senior Service Program participants live alone, subsist on approximately \$1,000 per month, and have complex medical and psychosocial needs that require specialized services.

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The Multipurpose Senior Services Program serves approximately 11,370 participants a year in 9,232 slots across 38 sites.

Residents in Long-Term Care Facilities

Long-Term Care Ombudsman Program [\$18.6 million (\$9.4 million GF)]

Budget Adjustments:

- The Ombudsman Program is receiving an additional \$1.0 million from the State Health Facilities Citation Penalties Account.
- Increase federal COVID-19 funding: CARES Act (\$2 million). Additional federal funding will enable the Ombudsman to respond to COVID-19 challenges in senior living facilities – for example, to develop a virtual presence within facilities using laptops, smartphones, tablets, and other technology tools to facilitate video-conferencing and virtual meetings. The current federal guidance for Ombudsman, family, and friends to remain out of facilities could extend well after stay-at-home orders are lifted and these new technology connections are vital to protect the health, safety, welfare, and rights of residents during this time.

As advocates for residents of long-term care facilities, the State Long-Term Care Ombudsman and the local Ombudsman representatives seek resolution of residential facility complaints with the goal of ensuring residents' rights, dignity, quality of care, and quality of life. Statewide, approximately 830 State-certified Ombudsman volunteers and paid local Long-Term Care Ombudsman Program staff identify, investigate, and resolve complaints and concerns in over 1,200 skilled nursing facilities and approximately 7,300 residential care facilities for the elderly. There are 308,000 long-term care facility beds statewide.

Nutrition

Older Americans Act Senior Nutrition Program [\$118.2 million (\$26.6 million GF)]

Budget Adjustments:

- The enacted budget resets the Governor's Budget proposed suspension date for the Senior Nutrition GF investment (\$17.5 million) from December 31, 2023, to December 31, 2021, and moves the language from the budget bill to statute.
- Increased federal emergency COVID-19 funding: Families First Coronavirus Response Act (\$25.1 million); CARES Act (\$50.2 million). With this additional funding, the department has seen an estimated weekly average increase of 88% in meals served compared to the prior fiscal year's weekly average.

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The Older Americans Act Senior Nutrition Program provides both home-delivered meals and congregate meals at community and senior centers, nutrition education, and nutrition-risk screening to individuals aged 60 or older. Meals are delivered to individuals that are homebound due to illness, disability, or geographic isolation. The Program targets older individuals with the greatest economic or social need, with particular attention to low-income, minority older individuals, and older individuals living in rural areas.

Home and Community Living and Isolation Prevention

Older Americans Act Supportive Services and Family Caregiving Resources [\$62.6 million (\$1.2million GF)]

Budget Adjustments:

- Supportive Services Increased federal COVID-19 funding: CARES Act (\$21.0 million). Additional federal funding will allow local Area Agencies on Aging to provide additional services such as: Senior Center Activities, Outreach, Case Management, Legal Assistance, Transportation, etc., to assist older adults impacted by COVID-19.
- Family Caregiving Resources increased federal COVID-19 funding: CARES Act (\$10.3 million). Additional federal funding will allow for expanded services such as: respite care, access assistance, information services, etc. to family caregivers of older adults impacted by COVID-19.

Older Americans Act Titles III and VII fund services to enable individuals to access the support necessary for them to remain independent in their communities, continue in their caregiving role, and/or receive long-term care services appropriate to their needs. These programs provide services in the community to adults 60 years of age or older and their family caregivers.

Information and Assistance

Aging and Disability Resource Centers (ADRC) [\$5.0 million (GF)]

Budget Adjustments:

- The enacted budget resets the Governor's Budget proposed suspension date for the ADRC GF investment (\$5.0 million) from December 31, 2023, to December 31, 2021, by maintaining the suspension language included in Welfare and Institution Code, Section 9121.
- Increased federal COVID-19 funding: CARES Act (\$3 million). Additional federal funding will allow California's ADRCs to serve approximately an additional 59,000 individuals.

The Aging and Disability Resource Connection (ADRC) program is the State's only coordinated No Wrong Door network which enables older adults and people with disabilities, regardless of age, income or

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disability, to navigate long-term services and supports to meet their goals for independence. ADRC programs provide warm hand-off Information and Referral/Assistance Services, person-centered options counseling, short-term service coordination during times of crisis, and transition services from hospitals to home and from skilled nursing facilities back into the community.

Health Insurance Counseling and Advocacy Program (HICAP) [\$13.8 million (\$220 thousand GF)]

Budget Adjustment:

- Loan \$5.0 million HICAP Fund to the General Fund. This request is a one-time transfer of \$5.0 million dollars from the HICAP fund to the General Fund as part of statewide efforts to respond to the Coronavirus pandemic and balance the state budget. The loan will be repaid beginning in fiscal year 2021-22 and the annual repayment amount is \$1.0 million per year until the loan is repaid in full. This loan from the HICAP Fund will have no impact to ongoing program operations or services to older adults.

HICAP provides free, confidential one-on-one counseling, education, and assistance to individuals and their families on Medicare, Long-Term Care insurance, and other health insurance related issues, and planning ahead for Long-Term Care needs. HICAP also provides legal assistance or legal referrals in dealing with Medicare or Long-Term Care insurance related needs.

Technical Adjustments

Technical Adjustment to the Medicare Improvements for Patients and Providers Act (MIPPA) [Increase, \$2.2 million (Federal Fund Authority)]

This technical adjustment increases the department's federal fund budget authority to include the baseline budget authority for the MIPPA grant program. This grant program has been identified as a permanent, and ongoing, program and this proposal will allow the department to receive grant funds in a timelier manner to ensure there is no delay in services to eligible participants.

MIPPA grantees specifically help low-income seniors and persons with disabilities to apply for two programs that help pay for their Medicare costs:

- The Medicare Part D Extra Help/Low-Income Subsidy (LIS/Extra Help), which helps pay for the Part D premium and reduces the cost of prescriptions at the pharmacy, and
- The Medicare Savings Programs (MSPs), which help pay for Medicare Part B.

MIPPA grantees also provide Part D counseling to Medicare beneficiaries who live in rural areas, and are tasked to promote Medicare's prevention and wellness benefits.

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Adjustment to Headquarters Relocation Funding [Increase, \$3.1 million (GF)]

This adjustment is to fund the department's proposed relocation of its headquarters office and reflects both one-time costs, attributable to tenant improvements, services, and equipment, as well as increased ongoing costs for rent and utilities. The relocation of the department's headquarters to a new facility is necessary primarily due to health, safety, and access concerns.