

California Master Plan for Aging Equity in Aging Advisory Committee

*Wednesday, March 16th, 2021
10:00 am – 12:00 pm*



Meeting Logistics

Webinar or Telephone only - *No in-person meeting*

Webinar: [Join by computer, tablet, or smartphone](#)

Telephone: Join by phone: 888-788-0099

Meeting ID: 846 2578 2881

Live captioning and ASL interpreting streamed through webinar (Zoom)

Meeting slides, transcript, and recording will be posted to CDA's CA For ALL Ages' [Equity in Aging Resource Center](#)



Public Comment

Attendees joining by **phone**, press *9 on your dial pad to join line. The moderator will announce the last 4 digits of your phone number and will unmute your line.

Attendees joining by **webinar (Zoom)**, click the raise hand button to join line. The moderator will announce your name or the last 4 digits of your phone number and will unmute your line.

For additional public comment, email Engage@aging.ca.gov



Welcome and Roll Call



Roll Call: Equity in Aging Advisory Committee Members

Marcy Adelman, CA Commission on Aging

Donna Benton, USC Leonard Davis School of Gerontology

Catherine Blakemore, Disability Rights CA

Cheryl Brown, Advocate & Former Assembly Member

Betsy Butler, CA Women's Law Center/ Los Angeles Probation Commission

Elvira Castillo, Advocate

Denny Chan, Justice in Aging

Le Ondra Clark Harvey, CA Council of Community Behavioral Health Agencies

Vincent Crisostomo, San Francisco AIDS Foundation



Roll Call: Equity in Aging Advisory Committee Members Cont.

David “Jax” Kelly, Let’s Kick ASS (AIDS Survivor Syndrome)

Marielle Kriesel, Disability Community Resource Center

Darrick Lam, ACC Senior Services

Monika Lee, CPEHN

Marty Lynch, LifeLong Medical

Diana Murray, Advocate, HICAP

Michael Murray, AARP California

Berenice Nuñez Constant, AltaMed



Roll Call: Equity in Aging Advisory Committee Members, Cont.

Gail Orum, Keck Graduate Institute

Kevin Prindiville, Justice in Aging

Kiara Pruitt, Sistahs Aging with Grace & Elegance

Jeffrey Reynoso, Latino Coalition for a Healthy CA

Rigo Saborio, Advocate

Valentine Villa, CA State University, Los Angeles

Julia Yarbough, Keeping it REAL Caregiving

Edie Yau, Alzheimer's Association



Opening Remarks and Agenda Review

Susan DeMarois

California Department of Aging



Committee Purpose

The purpose of the Equity in Aging Advisory Committee (EAAC) is to advise the Administration on the implementation of the MPA, as well as CDA on the planning and implementation of aging and disability programs, services, data collection, and staff development.



Meeting Agenda

10:00 – 10:10: Opening Remarks and Agenda Review

10:10 – 10:40: HICAP Modernization Presentation & Discussion

10:40 – 11:20: Direct Care Workforce and Equity Presentation & Discussion

11:20 – 11:45: MPA Outreach Presentation and Discussion

11:45 – 11:55: Public Comment

11:55 – 12:00: Closing & Next Steps



Governor's January Budget

REFORMING NURSING FACILITY FINANCING

Currently, the state provides annual cost-based increases and quality incentive payments to skilled nursing facilities, funded partly by a Quality Assurance Fee equivalent to 6-percent of facility revenues. The resulting revenue draws down additional federal funding to support nursing facility payments. The existing framework, authorized initially in 2004 and last extended in 2020, sunsets on December 31, 2022.

The Budget proposes to reform the funding framework to move from a primarily cost-based methodology to one that incentivizes value and quality. The intent of these reforms is to further enable nursing facilities to invest in quality and patient care while assuring the long-term financial viability of these essential Medi-Cal providers



Reimagining Nursing Homes: State & Federal Opportunities

WEBINAR WEDNESDAYS

Reimagining Nursing
Homes: Emerging Federal
and State Opportunities

April 6, 2022



Wednesday April 6th, 10am – 11:30am

California has an opportunity to reframe and reform how services are delivered to residents of its nursing homes.

- Overview of emerging federal and state initiatives related to nursing home reform
- In-depth discussion with panelists representing consumer advocates, LTC Ombudsmen, family caregivers, and providers.

California Department
of **AGING**



Together We
ENGAGE
Master Plan for Aging

Together We
ENGAGE
Master Plan for Aging

HICAP Modernization

Brianna Ensslin

ATI Advisory

Sutep Laohavanich

California Department of Aging





HICAP Modernization

California Equity in Aging Advisory Committee

Brianna Ensslin Janoski, Director
March 16, 2022

Overview of Research

Purpose

- Provide the California Department of Aging with information to review as the Department considers **how to modernize its SHIP**
- As a part of the California Master Plan for Aging, one of the initiatives is to **“Modernize Medicare counseling services (HICAP) to serve more beneficiaries, continually improving cultural competency and language access, within existing resources”**

Methods

- Two surveys
 - 374 responses from the public
 - 32 responses from AAAs/HICAPs
- 18 interviews
 - Current/former SHIP Directors
 - National subject matter experts
 - California stakeholders
- Literature reviews
- SWOT analysis

Supported by a grant from The SCAN Foundation - advancing a coordinated and easily navigated system of high-quality services for older adults that preserve dignity and independence. For more information, visit www.TheSCANFoundation.org.

Key Findings – Overall and Dually Eligible Individuals

California Stakeholder Survey Findings: Satisfaction

53% ★★★★★

ranked their experience with HICAP as a 5 out of 5

12% ★★★★★★

ranked their experience with HICAP as a 4 out of 5

18% ★★★★★★

ranked their experience with HICAP a 3 or lower

HICAP Survey Findings: Strategies to Support Dually Eligible Individuals

23 provide counseling on D-SNPs₁

22 provide counseling related to Medi-Cal benefits for dually eligible beneficiaries

8 provide counseling on Cal MediConnect MCOs

25 train counselors how to respond to Medi-Cal questions

25 provide counseling related to Medi-Cal eligibility for dually eligible beneficiaries

Supports Offered for Dually Eligible Individuals

Beneficiary Support

- ✓ **Counseling** beneficiaries on new enrollment options
- ✓ **Referring** beneficiaries to programs and conducting three-way calls with these programs and HICAP counselors
- ✓ **Educating** beneficiaries who are aging into Medicare with Medi-Cal on how the programs work together
- ✓ **Screening** and application assistance

Organizational Design

- ✓ **Understanding** MLTSS/D-SNP enrollment processes and potential for alignment
- ✓ **Sharing space** with Medi-Cal staff/offices
- ✓ **Collaborating** with Medi-Cal offices or referral of complicated cases to the program's legal department
- ✓ **Receiving referrals** from Social Services
- ✓ **Sharing information** on referrals
- ✓ **Reviewing information** and watching webinars on dually eligible individuals with counselors during monthly meetings
- ✓ **Collaborating** with Medi-Cal MCOs and Medicare Advantage plans
 - Offering feedback on enrollment materials
 - Engaging in advisory committees

Key Findings – People with Limited English Proficiency (LEP) and People with Disabilities

Approaches to Provide Accessibility for People with LEP

- ✓ Leverage bilingual counselors, interpreter lines, county interpreters, handheld translators, and translation services (for American Sign Language)
- ✓ Use CMS Spanish-language Medicare materials
- ✓ Partner with local community agencies serving individuals of different backgrounds
- ✓ Develop a telephone system with several language voicemails to choose from

Approaches to Provide Accessibility for People with Disabilities

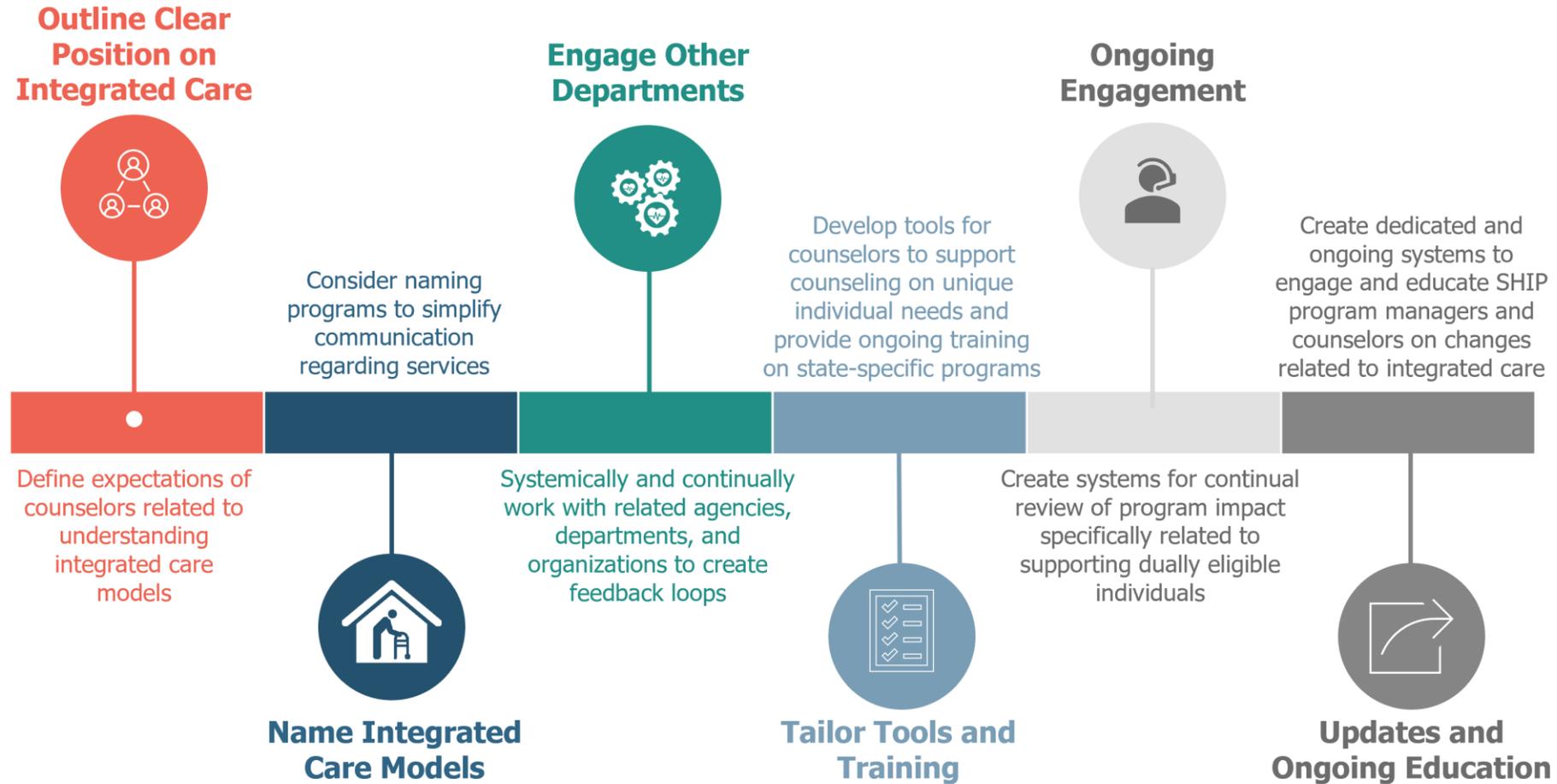
- ✓ Offer phone(e.g., TTY/Federal Relay Service), video, or in-home appointments Ensure American with Disabilities Act compliant counseling sites and websites
- ✓ Partner with local Disability Rights Centers, Braille Institutes, Independent Living Centers and GLAAD to engage clients and staff
- ✓ Offer materials in different sizes, colors, and modes (e.g., braille)
- ✓ Connect individuals with disabilities with supportive programs or services such as transportation

Recommendations

1. Develop a strategic roadmap for HICAP
2. Support the development of a HICAP Technical Assistance Center
3. Evaluate rebranding HICAP
4. Implement CDA-driven marketing campaigns and other statewide marketing supports
5. Redesign the CDA HICAP website
6. Make improvements to the SHARP data system
7. Explore opportunities to increase monitoring and oversight of AAAs and subcontractors
8. Develop a strategic roadmap of how HICAPs will support dually eligible individuals moving forward
9. Strengthen relationships, referrals, and feedback loops with related agencies and organizations
10. Reevaluate the current formula used to distribute funds to HICAPs



Develop a Strategic Roadmap to Support Dually Eligible Individuals

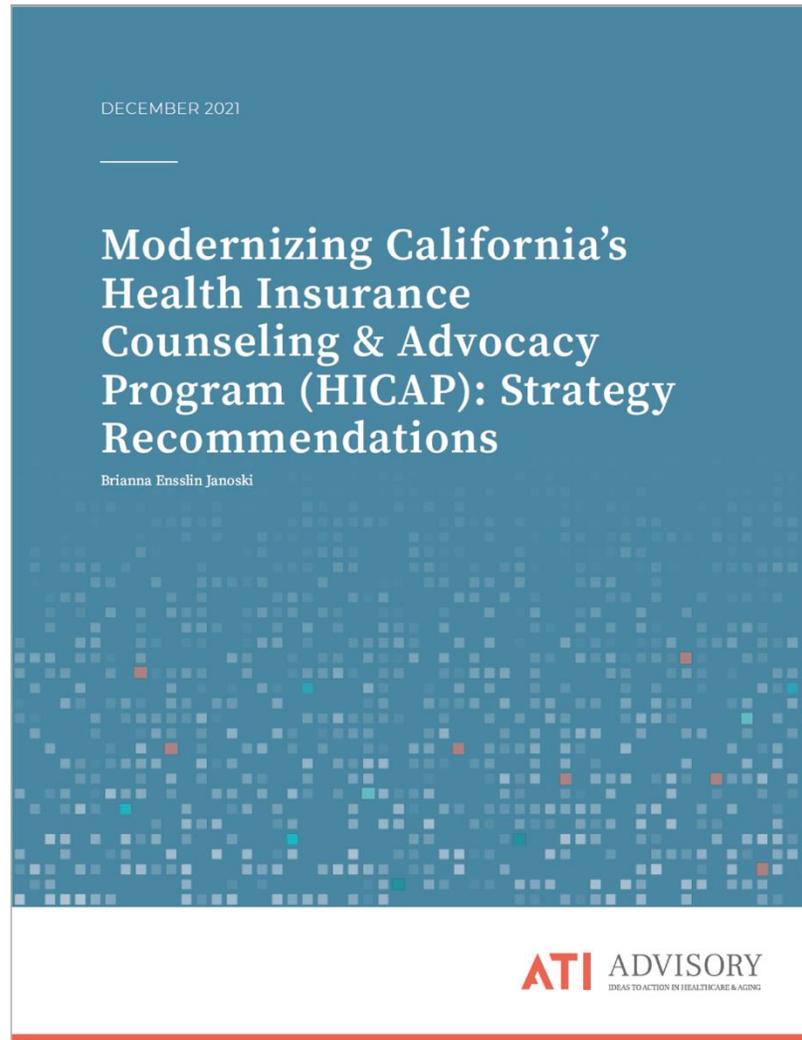


Strengthen Relationships, Referrals, and Feedback Loops with Related Agencies and Organizations

Systematically review current and possible opportunities to engage with key aligned organizations, entities, and departments

Department of Public Health	Department of Health Care Services	Office of Medicare Innovation and Integration
Covered California	Department of Insurance	Department of Managed Health Care
Medi-Medi Navigator Program	Health Consumer Alliance	Ryan White HIV/AIDS Programs

Report Available



Available at:

<https://atiadvisory.com/modernizing-californias-hicap-strategy-recommendations/>



REACH OUT TO US AT
INFO@ATIADVISORY.COM



VISIT US AT
[HTTPS://ATIADVISORY.COM/](https://ATIADVISORY.COM/)



FOLLOW US ON [LINKEDIN](#)



Brianna Ensslin Janoski
Director
ATI Advisory

HICAP Modernization

Discussion



Direct Care Workforce and Equity

Julia Figueira-McDonough

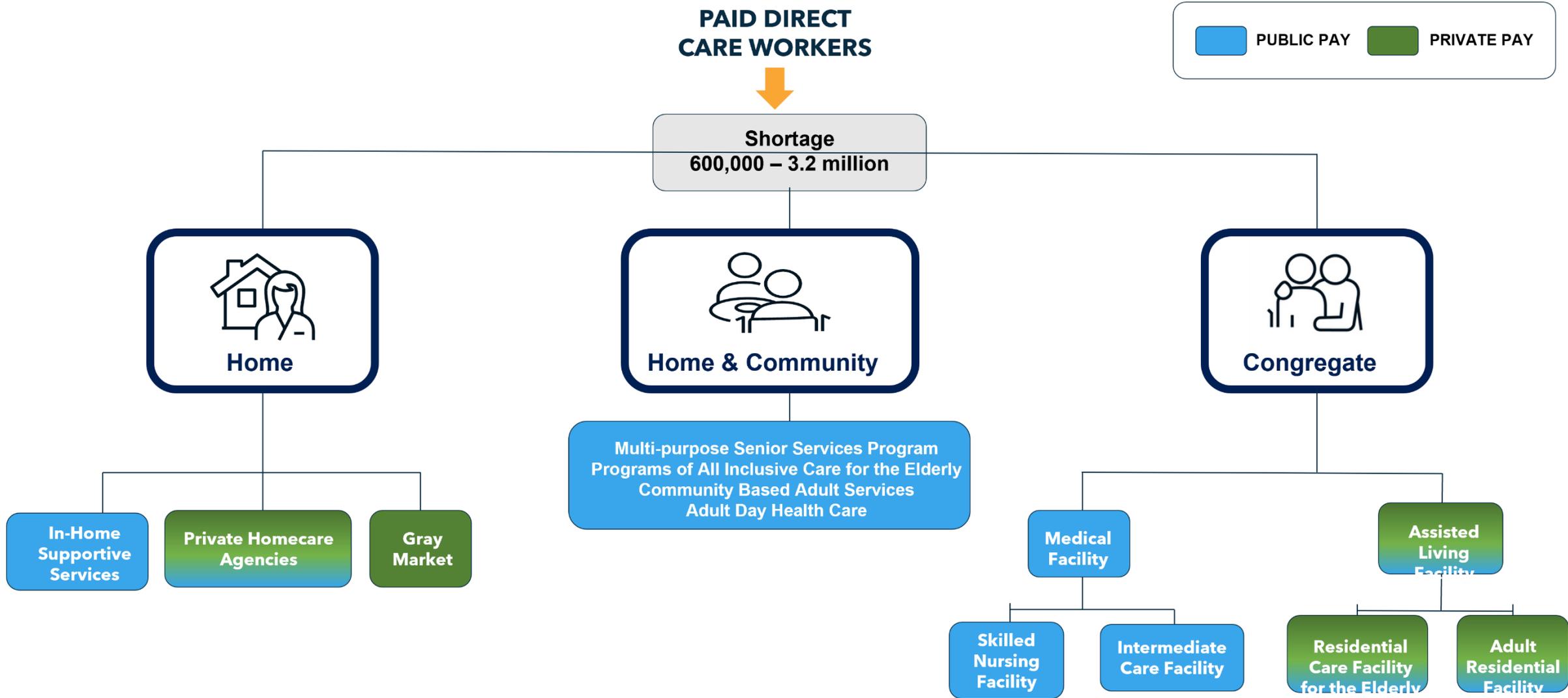
CA Labor and Workforce Development Agency

Sarah Steenhausen

CA Department of Aging



LTSS Direct Care Workforce Map



Direct Care Job Classifications



Personal Care Aide

(PCAs), personal attendant, personal assistant, caregiver, companion). Assistance with ADLs (eating, dressing, bathing, and toileting), often with IADLs (housekeeping chores, meal preparation, medication management), sometimes help individuals go to work and remain engaged in their communities.

Varies by program

Home, Congregate, Community

CA Department of Social Services (CDSS)
Department of Health Care Services (DHCS)



Certified Nursing Assistant

(CNAs) Under direction of nursing or medical staff, CNAs assist with general patient care, assist residents with ADLs, and perform clinical tasks such as range-of-motion exercises and blood pressure readings.

60 hrs + 100 hrs supervised training

Congregate, Community, Hospitals

CA Department of Public Health (CDPH)



Home Health Aide

(HHAs) provide essentially the same care and services as CNAs, but at home or in community settings under the supervision of a nurse or therapist. HHAs may also perform light housekeeping tasks.

120 hrs

Home, Community

CA Department of Public Health (CDPH)



Direct Support Professional

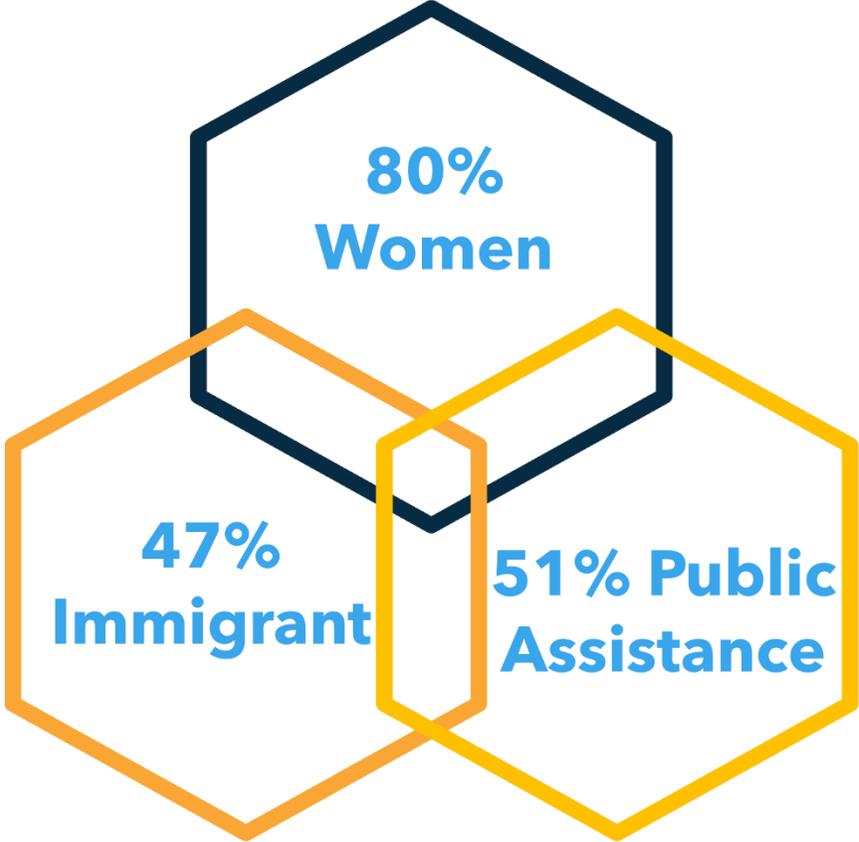
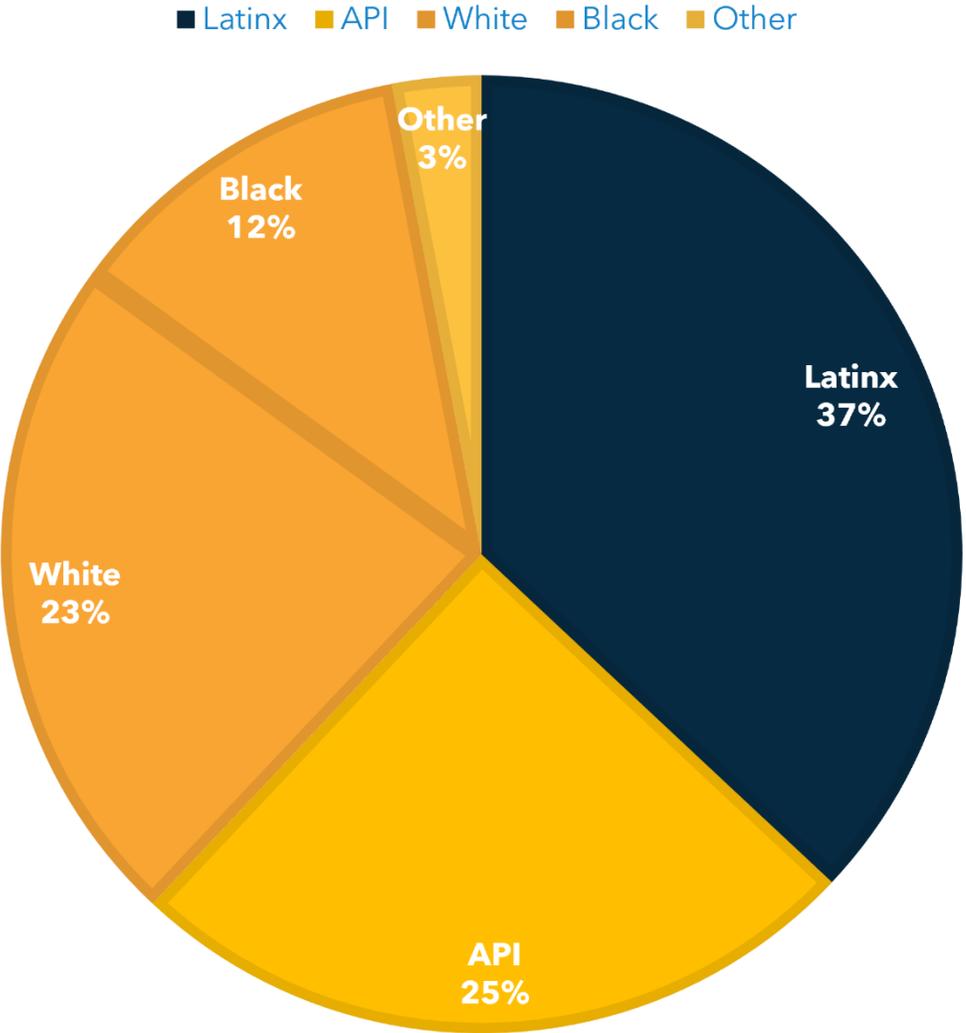
(DSPs) support persons with ID/DD with ADLs/IADLs, including at times administering medication, developing behavioral management plan, and managing medical records.

70 hrs

Congregate, Community

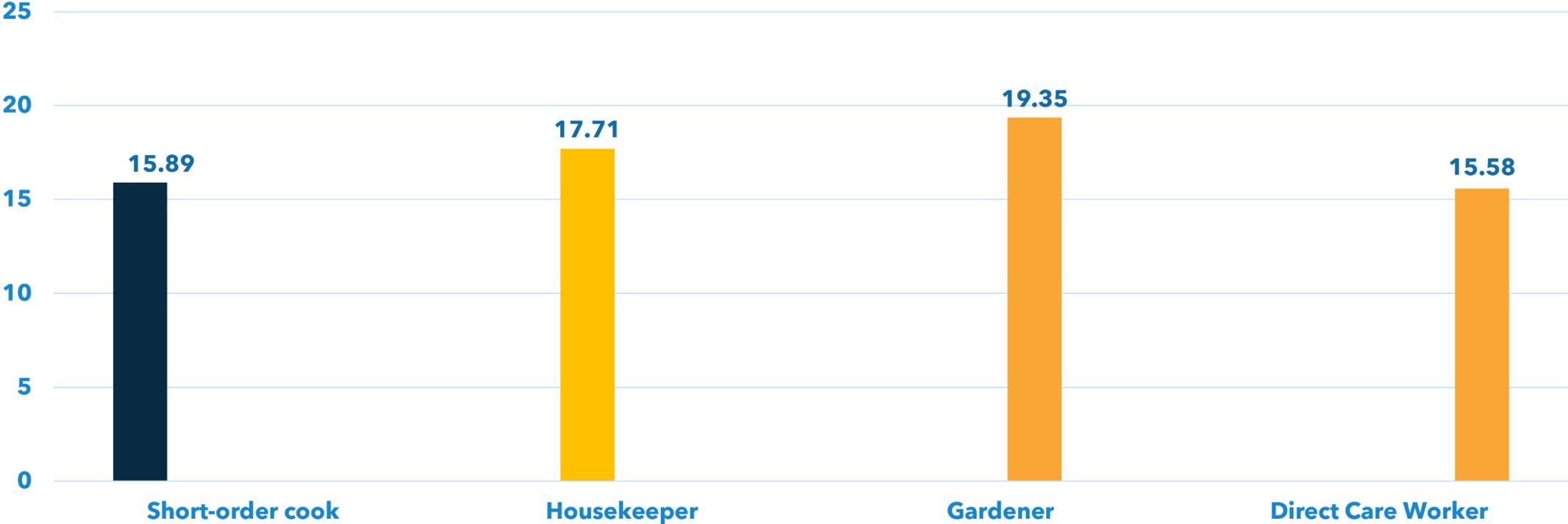
Department of Developmental Services (DDS)

Key Facts and Figures



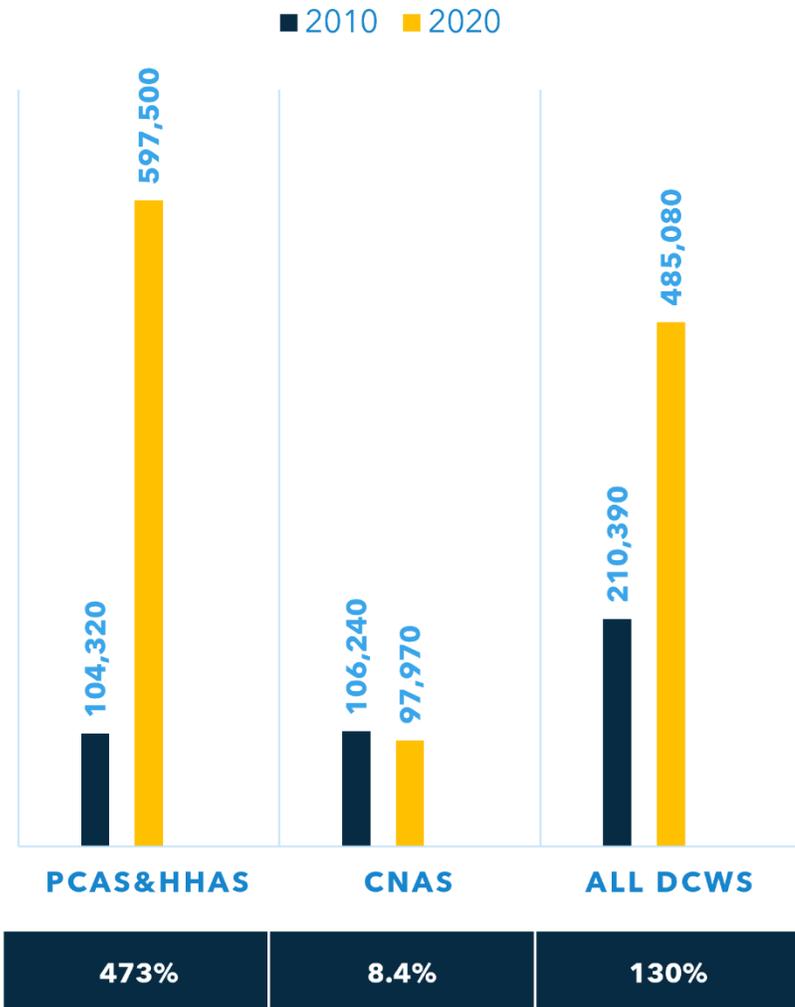
Key Facts and Figures

Wage Comparison

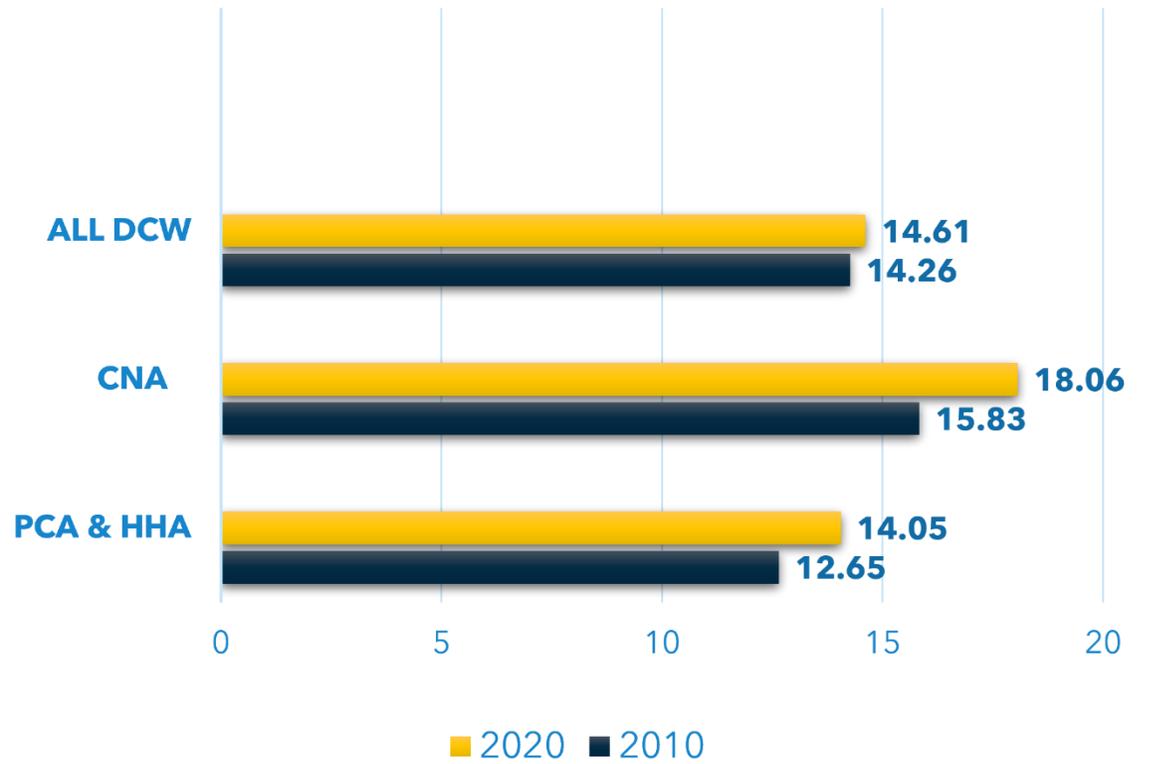


Key Facts and Figures

Job Growth

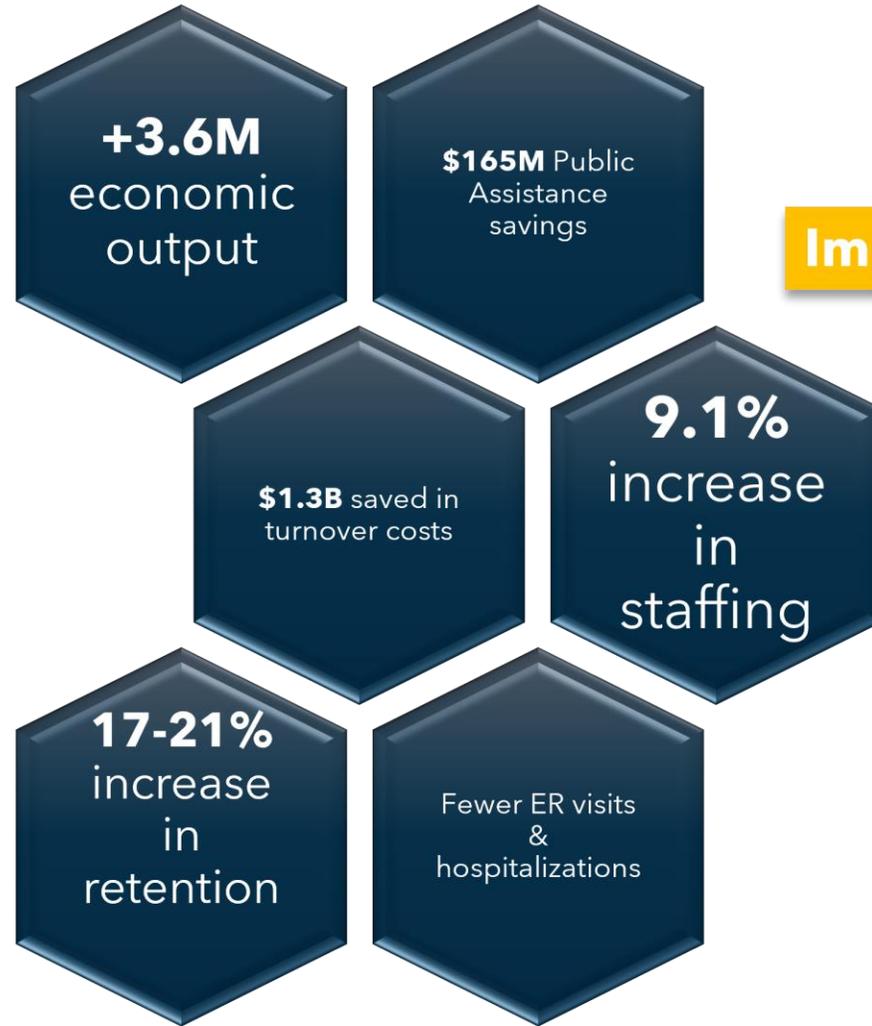


Median Hourly Wages



Impact of Raising the Wage Floor

**LIVING
WAGE**



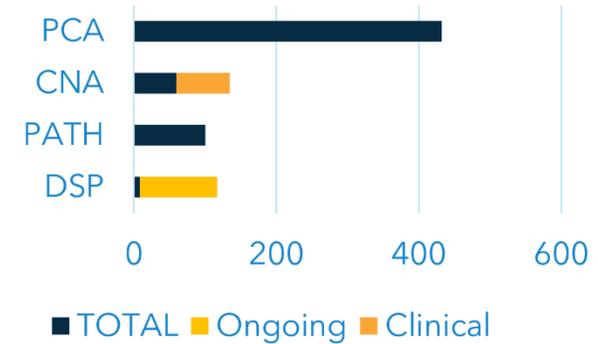
Improved patient safety & health

50,000+ direct care jobs

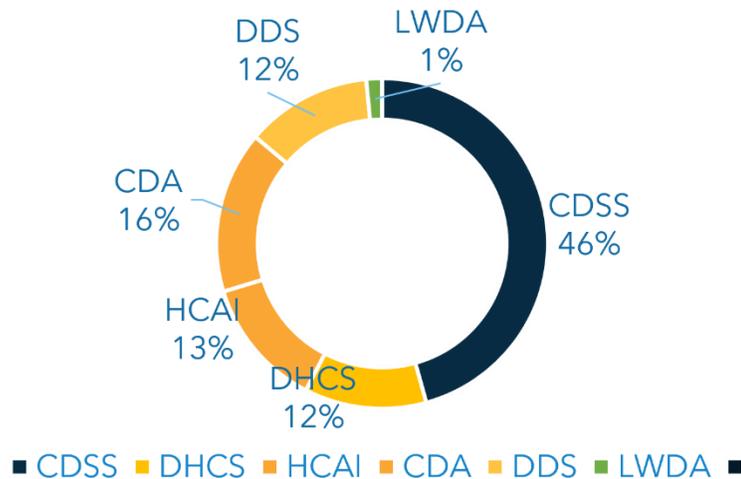
Summary of DCW Investments FY 21-22

TOTAL
\$946.4 Million

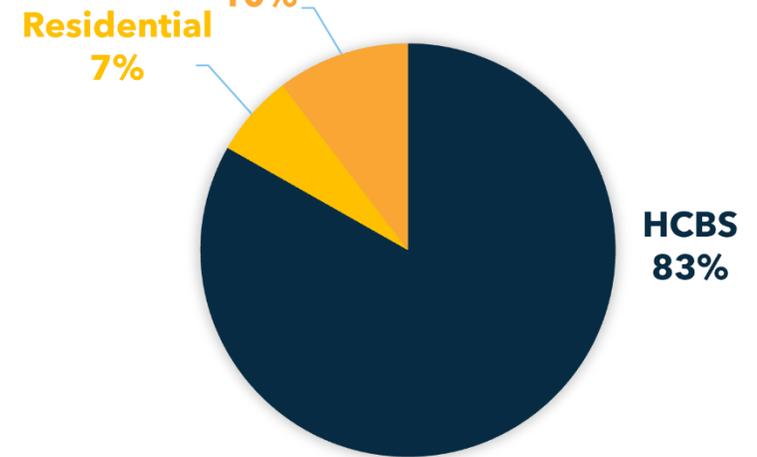
Job Category



Department



Both Setting





California's Direct Care Workforce Initiative: Background and Emerging Framework

Equity in Aging Advisory Committee
March 16, 2022

Solving the Workforce Crisis: A Multi-Pronged Approach

A photograph showing a healthcare worker in blue scrubs from behind, supporting an elderly patient with white hair. The worker's arm is around the patient's shoulder. They are standing outdoors in a well-lit area, possibly a hospital courtyard or garden.

**Cultural
Competency**

Living Wage

**Career
Ladders/Latices**

Training

**Language
Access**

Incentives

Addressing the Workforce Crisis: California's Investments and Initiatives

2021-22 Investments

\$946million

- Training
- Stipends
- Incentives

Proposed Initiatives 2022-23

\$1.7Billion

Build the Pipeline:

- Community Health Workers
- Social Workers
- Nursing
- Multilingual Health Initiative
- Psychiatric



**Focus on:
CDA's Direct Care
Workforce Initiative**

California's HCBS Spending Plan

Direct Care Workforce (non-IHSS) Training & Stipends: \$150 million

*“Training and stipends will be available to Direct Care Workforce (non-IHSS) that provide services to Medicaid participants in a range of home and community-based settings, in order to both improve care quality, respond to severe worker shortages in the sector, and prevent unnecessary institutionalization. **These training and stipends...will improve the skills, stipend compensation, and retention of direct care workforce** sector that is either employed by Medicaid HCBS waiver programs (e.g., CBAS, MSSP, PACE) or delivering the direct care services to Medicaid participants that are referenced in Appendix B [of the Spending Plan]”*

Support and Strengthen HCBS Workforce



Language Access - Cultural Competency - Data - Cross Sector Partnerships

Target Population

Direct Care Workers:

- Home Health Aides
- Social Workers
- Personal Care Assistants (Non-IHSS)
- Other

Programs:

- Community-Based Adult Services
- Multipurpose Senior Services Program
- Alzheimer's Day Care
- PACE
- Assisted Living Waiver Providers
- HCBA Waiver Providers
- AIDS Waiver Providers
- 6 Bed RCFEs

Framework: Direct Care Workforce Initiative

**Five Training
Pathways**

**Specialized
Curriculum
Grant
Program**

Evaluation

**Learning and
Innovations
Institute**



Next Steps

We want to hear from YOU!

Stakeholder
Engagement

Framework
Development

Program
Launch



www.aging.ca.gov

Communications@aging.ca.gov

(916) 419-7502



@CaliforniaAging



@CalAging



@CalAging

Direct Care Workforce and Equity

Discussion

Together We Engage: Creating MPA Awareness Through A Statewide Media Campaign

Connie Nakano
CA Department of Aging

Jillian Rice
RSE



Together We EngAGE:

Master Plan for Aging Engagement Through
a Statewide Media Campaign

Discussion



Public Comment

Attendees joining by **phone**, press *9 on your dial pad to join line. The moderator will announce the last 4 digits of your phone number and will unmute your line.

Attendees joining by **webinar (Zoom)**, click the raise hand button to join line. The moderator will announce your name or your last 4 digits of your phone number and will unmute your line.

For additional public comment, email Engage@aging.ca.gov



Closing & Next Steps

Susan DeMarois

CA Department of Aging



Together We
ENGAGE
Master Plan for Aging



Thank You!



LEARN MORE ABOUT THE MPA
MPA.aging.ca.gov

Sign up for the Together We Engage newsletter for MPA updates

Send questions and comments to EngAGE@aging.ca.gov