California Master Plan for Aging (MPA) Equity in Aging Advisory Committee

Thursday, September 16th, 2021 | 2:00 – 4:00 p.m.





Meeting Logistics

Telephone or webinar (Zoom) only - No in-person meeting

Telephone: Join by phone: 888-788-0099

Webinar: Join by computer, tablet, or smartphone

Live captioning streamed through webinar (Zoom)

ASL interpreting streamed through webinar (Zoom)

Meeting slides, transcript, and recording will be posted online



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



Introductions & Welcome

Kim McCoy Wade

Director, California Department of Aging (CDA)

- New Member Welcome
- Agenda Review



Meeting Agenda

- 2:00 2:10: Introductions & Welcome Kim McCoy Wade
- 2:10 2:20: MPA & CDA Equity Updates Amanda Lawrence
- 2:20 2:40: SOGI Data & Discussion Dr. Marcy Adelman, CA Commission on Aging
- 2:40 3:00: LGBTQ & Aging Policy & Discussion Dr. Kathleen Sullivan, OpenHouse
- 3:00 3:05: Break
- 3:05 3:30: COVID-19 Response, Vaccines & Equity
 - **Vaccines Disparities Presentation & Discussion –** Dr Karen Mark, CA Department of Health Care Services
 - CDA/AAA/ADRC Outreach Campaign to Older BIPOC Adults Connie Nakano, CA Department of Aging
- 3:30 3:45: Member Open Forum- Rigo Saborio, St. Barnabas Senior Services and Ali
- 3:45 3:55: Public Comment
- 3:55 4:00: Closing & Next Steps Kim McCoy Wade



Roll Call: Equity in Aging Advisory Committee Members

Berenice Nuñez Constant, AltaMed

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

Catherine Blakemore, Disability Rights CA

Cheryl Brown, Advocate & Former Assembly Member

Darrick Lam, ACC Senior Services

*David "Jax" Kelly, Let's Kick ASS (AIDS Survivor Syndrome)

Denny Chan, Justice in Aging

*Diana Murray, advocate, HICAP



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

Donna Benton, USC Leonard Davis School of Gerontology

Edie Yau, Alzheimer's Association

- *Elvira Castillo, Advocate
- *Gail Orum, Keck Graduate Institute
- Jeffrey Reynoso, Latino Coalition for a Healthy CA
- *Julia Yarbough, Keeping it REAL Caregiving
- Kiara Pruitt, Sistahs Aging with Grace & Elegance
- Kevin Prindiville, Justice in Aging



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

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

Marcy Adelman, CA Commission on Aging

Marielle Kriesel, Disability Community Resource Center

Marty Lynch, LifeLong Medical

Michael Murray, AARP California

Rigo Saborio, Saint Barnabas Senior Services

Valentine Villa, CA State University, Los Angeles

*Vincent Crisostomo, San Francisco AIDS Foundation



MPA Equity Updates

Amanda Lawrence, CDA





MPA Implementation, Partnerships, Accountability



MPA Implementation: Goal Three Equity & Inclusion, Not Isolation

Strategy A: Inclusion & Equity in Aging

Initiative 75: State budget included \$20 million General Fund one-time in 2021-22 for CHHS's Language Access Initiative.

Initiative 77: Completed the Ensuring Equity in Aging webinar series, offering nine webinars.

Initiative 78: CDA staff have attended 15 racial equity trainings since 5/2020. Developing Racial Equity Training Tool, which will inform CDA's Racial Equity Action Plan due Fall 2021.

Initiative 80: The Equity in Aging Advisory Committee (EAAC) has met three times and expanded membership to deepen connection to California's diverse communities.



MPA Implementation: Goal Three-Equity & Inclusion, Not Isolation

Strategy B: Closing the Digital Divide

Initiative 82: CDA has distributed **4,000 iPads** with 2-year plans and dedicated training and technical assistance to LI older adults who live alone

- Over 3,700 IPads have been deployed to our AAA network to dedicate technology efforts to older adults.
- CDA is working on recruiting a Digital Divide Manager to further support the Department efforts.

Associated 2021-2022 State Budget Investments

Access to Technology for Seniors and Persons with Disabilities Funding (CDA- \$50M enhanced federal funding one-time available over three years)

\$17 million one-time for Digital Connections in the Older Adult Resiliency investment package



MPA Implementation: Goal Three -Equity & Inclusion, Not Isolation

Strategy C: Opportunities to Work

Initiative 85: CDA presented to the CA Workforce Development Board Agency on MPA and the inclusion of older adults in the workforce.

Associated 2021-2022 Budget Investments:

- Employment Opportunities for Older Adults (\$17 million enhanced federal funding one-time available over three years)

Strategy D: Opportunities to Volunteer & Engage Across Generations

Budget investments will be used to ensure CalVolunteers Service Corps and Volunteer Cadre is reflective of the talents, experience, and skills brought to bear with multigenerational, inclusive, and diverse membership, with special emphasis on age, race, ethnicity, and disability.



MPA Implementation: Goal Three- Equity & Inclusion, Not Isolation

Strategy E: Protection from Abuse, Neglect, Exploitation

Initiative 93: CA Elder & Disability Justice Coordinating Council (EDJCC) which will work to increase coordination and develop recommendations to prevent and address elder abuse, neglect, exploitation, and fraud is under development. Stakeholder membership recruitment is in process. Currently recruiting stakeholder members: 89 applications received

Initiative 97: CDA is undertaking new planning with stakeholders for state Legal Assistance Developer, as federally required.

Associated 2021-2022 State Budget Investments

- The Older Adult Resiliency investments includes \$1 million one-time investment for Elder and Disability Abuse Prevention (including supporting the EDJCC)
- Adult Protective Services (APS) Expansion (CDSS \$70 million General Fund)



MPA Implementation: Goal Three- Equity & Inclusion, Not Isolation

Strategy F: Leadership in Aging

Initiative 98: CDA advancing the "No Wrong Door" system with newly formed the ADRC Advisory Committee. Budget investments to CDA include Local Assistance: \$7.5 million General Fund in 2021-22 and \$10 million General Fund ongoing; State Operations: \$2 million General Fund ongoing and \$5 million enhanced federal funding one-time for interoperability.

Initiative 99: The 2021-2022 State Budget includes the appointment of a Senior Advisor on Aging, Disability, and Alzheimer's to advance cross-Cabinet initiatives and partnerships between government, the private sector, and philanthropy.

Initiative 101: CDA hosted kick-off convening and Town Halls for stakeholder engagement in strengthening and aligning California's network of "Aging & Disability Hubs & Spokes."



MPA Implementation: Goal Three- Equity & Inclusion, Not Isolation

Strategy F: Leadership in Aging (continued)

Initiative 104: On July 1st, CHHS announced members of the Implementing the Master Plan for Aging in California Together (IMPACT) Stakeholder Committee, who will advise CHHS and the Cabinet Work Group for Aging on the MPA implementation. The first meeting took place 7/14.

Initiative 106: CDA, in partnership with CA Department of Public Health, the West Health Institute, and UCLA continue to update the Data Dashboard for Aging (DDA). In the coming months, updates will continue, as well as the addition of indicators relating to housing cost burden, economic security, and unmet needs for LTSS.



MPA Partnerships: Local Playbook

Recent Local Playbook workshops, including Data Dashboard for Aging (DDA) demonstrations were conducted in collaboration with partners in:

- Orange County
- Disability Advocacy Network (Butte, Glenn, Lassen, Modoc, Plumas, Shasta, Siskiyou, Trinity)
- Inland Empire LTSS Coalition (Riverside, San Bernardino)
- California Parks & Recreation Society Aging Section

Upcoming Presentations with partners in Orange and Ventura Counties

Continuing to work with the SCAN Foundation's <u>CA Advocacy Network</u> on advancing the MPA with communities across California



MPA Accountability

Cabinet Work Group – Met in June, next meeting September 30th.

First Progress Report - Released in July

<u>IMPACT Stakeholder Committee</u> – Announced & met in July, next meeting in October

<u>Data Dashboard for Aging</u> – Working with UCLA to update and add indicators

Research Work Group – Planning for research partnership with State, including MPA outcomes



Sexual Orientation & Gender Identity (SOGI) Data & Discussion

Dr. Marcy Adelman, CA Commission on Aging



LGBTQ and Aging Policy & Discussion

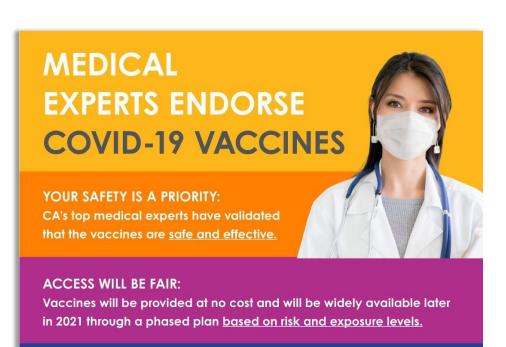
Dr. Kathleen Sullivan, OpenHouse



Equity in Aging Advisory Committee

We are on a short break and will resume shortly

COVID-19 Response, Vaccines & Equity



VACCINATION HELPS END THE PANDEMIC:

Getting vaccinated will help us <u>reopen the</u> <u>economy</u> and relieve severely impacted hospitals and communities.







Vaccines Disparities Presentation & Discussion

Dr. Karen Mark
CA Department of Health Care Services



MEDI-CAL COVID-19 VACCINATIONS

(for beneficiaries aged 12 years and older)

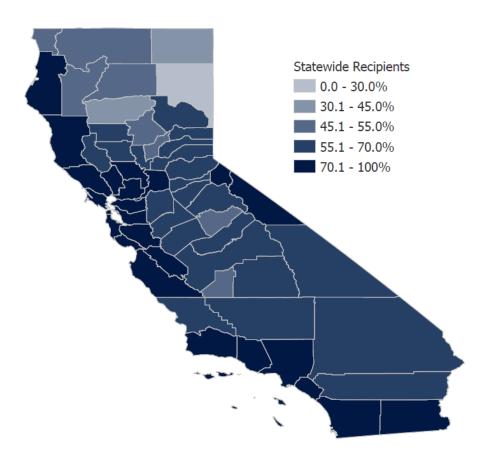


DHCS recognizes the disproportionate impact of COVID-19 on disadvantaged communities, including many communities of color, which account for a large share of the Medi-Cal beneficiary population. Until recently, our knowledge of the extent of COVID-19 vaccination among the Medi-Cal population was limited to what was gathered from claims data.

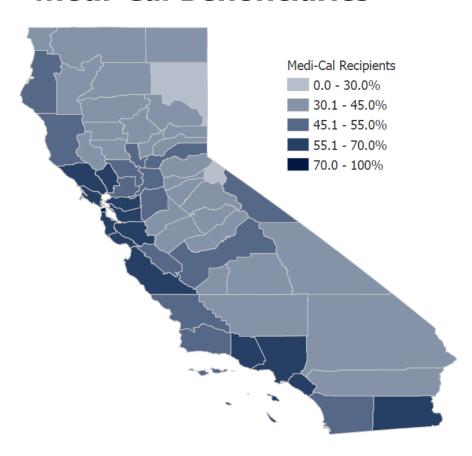
Now, with new linkages to immunization registry data from the California Department of Public Health, DHCS has a much clearer view of Medi-Cal vaccination rates compared to statewide rates, stratified by county and by health plan. While Medi-Cal COVID-19 vaccination rates are gradually improving across the state, the percentage of Medi-Cal beneficiaries with at least one dose lags the population-at-large rate, sometimes by as much as 30 percent.

Received at least one dose as of September 5, 2021 Percentage of 12+ years old, by county

All Californians



Medi-Cal Beneficiaries



Note: Medi-Cal beneficiaries are a subset of all Californians

Received at least one dose as of September 5, 2021 Comparing Medi-Cal Beneficiaries to all residents

County	All Californians	Medi-Cal Beneficiaries	Difference
STATEWIDE	76.0%	52.4%	-23.7%
Alameda	85.8%	61.8%	-24.0%
Alpine	79.0%	29.9%	-49.2%
Amador	65.8%	39.7%	-26.1%
Butte	54.8%	41.7%	-13.1%
Calaveras	59.4%	34.3%	-25.1%
Colusa	62.0%	41.7%	-20.3%
Contra Costa	84.6%	60.5%	-24.1%
Del Norte	53.0%	36.8%	-16.2%
El Dorado	65.9%	41.8%	-24.0%
Fresno	65.1%	47.0%	-18.1%
Glenn	55.8%	40.0%	-15.8%
Humboldt	71.6%	50.9%	-20.7%
Imperial	91.7%	57.4%	-34.3%
Inyo	62.1%	37.0%	-25.1%
Kern	55.6%	39.8%	-15.8%
Kings	47.3%	39.0%	-8.3%

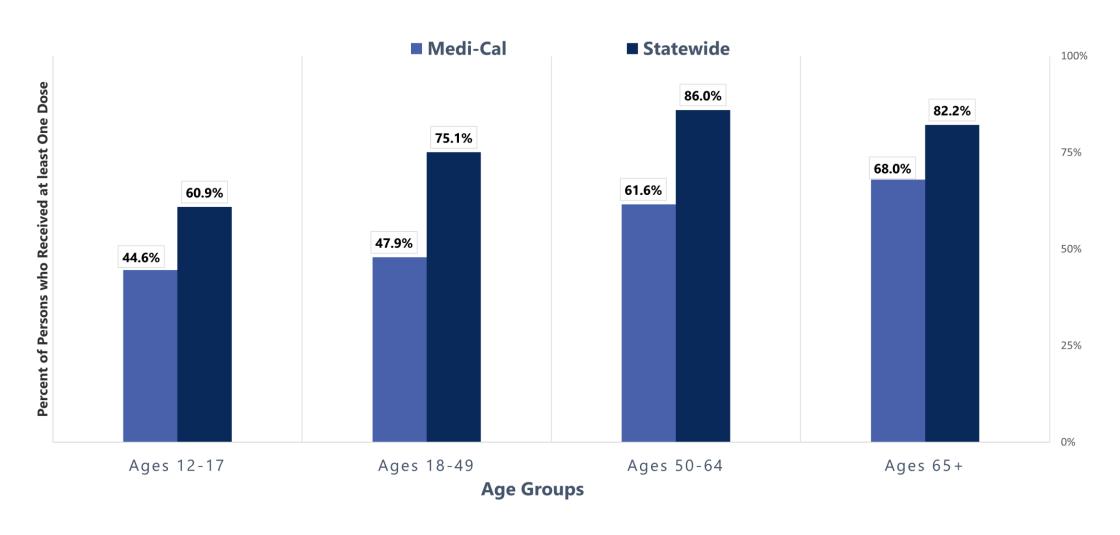
County	All Californians	Medi-Cal Beneficiaries	Difference
Lake	60.5%	39.7%	-20.8%
Lassen	27.7%	23.5%	-4.2%
Los Angeles	77.1%	55.7%	-21.3%
Madera	57.2%	40.6%	-16.7%
Marin	91.7%	66.6%	-25.1%
Mariposa	55.0%	34.2%	-20.8%
Mendocino	74.6%	48.1%	-26.5%
Merced	57.2%	42.3%	-15.0%
Modoc	41.3%	32.1%	-9.2%
Mono	76.3%	53.6%	-22.7%
Monterey	77.2%	55.9%	-21.4%
Napa	84.5%	60.7%	-23.8%
Nevada	68.5%	42.2%	-26.3%
Orange	77.5%	57.8%	-19.8%
Placer	69.3%	46.6%	-22.7%
Plumas	56.6%	37.9%	-18.8%
Riverside	63.6%	44.8%	-18.8%

Received at least one dose as of September 5, 2021 Comparing Medi-Cal Beneficiaries to all residents

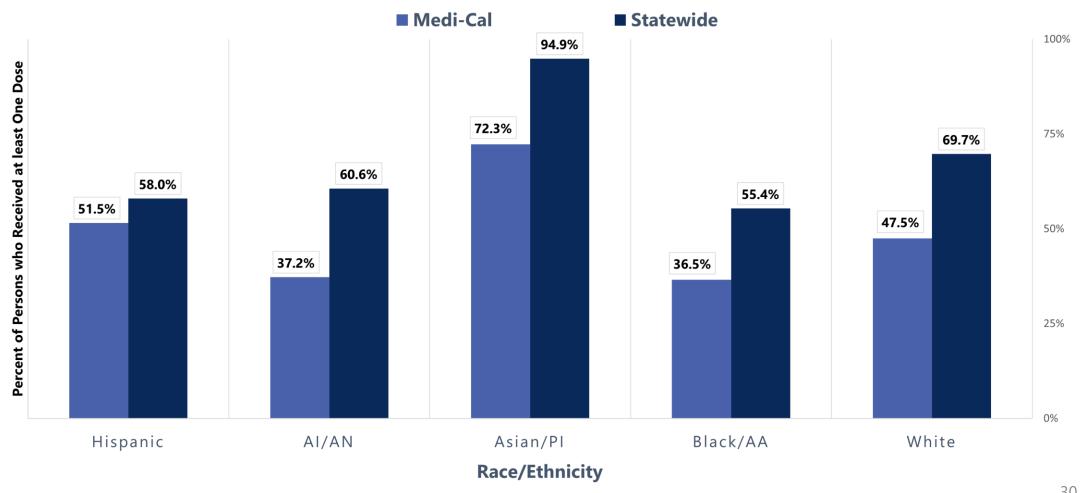
County	All Californians	Medi-Cal Beneficiaries	Difference
Sacramento	71.0%	47.3%	-23.7%
San Benito	75.8%	52.3%	-23.6%
San Bernardino	60.7%	41.6%	-19.2%
San Diego	95.9%	54.9%	-41.0%
San Francisco	88.2%	70.1%	-18.1%
San Joaquin	66.6%	45.0%	-21.6%
San Luis Obispo	69.7%	49.1%	-20.5%
San Mateo	89.0%	66.9%	-22.1%
Santa Barbara	75.2%	51.1%	-24.1%
Santa Clara	89.6%	65.8%	-23.8%
Santa Cruz	79.6%	61.8%	-17.7%
Shasta	51.4%	32.4%	-18.9%
Sierra	55.0%	39.7%	-15.3%
Siskiyou	52.8%	31.2%	-21.6%
Solano	73.7%	49.5%	-24.2%
Sonoma	81.4%	60.0%	-21.4%
Stanislaus	63.2%	42.4%	-20.8%

County	All Californians	Medi-Cal Beneficiaries	Difference
Sutter	62.8%	47.0%	-15.8%
Tehama	44.7%	30.1%	-14.6%
Trinity	48.0%	32.0%	-16.0%
Tulare	56.0%	40.1%	-15.8%
Tuolumne	59.8%	38.2%	-21.5%
Ventura	77.4%	55.2%	-22.2%
Yolo	72.2%	54.7%	-17.6%
Yuba	52.2%	36.5%	-15.7%

Received at least one dose as of September 5, 2021 Comparing Medi-Cal Beneficiaries to all Californians



Received at least one dose as of September 5, 2021 **Comparing Medi-Cal Beneficiaries to all Californians**



Percent of Medi-Cal Beneficiaries administered at least one dose as of September 5, 2021 by Managed Care Parent Plan and Fee For Service

Managed Care Parent Plan	Percent of Medi-Cal Beneficiaries Administered at Least One Dose	
San Francisco Health Plan	67.8%	
Santa Clara Family Health Plan	66.1%	
Health Plan of San Mateo	64.7%	
Alameda Alliance for Health	61.0%	
Contra Costa Health Plan	58.4%	
CalOptima	56.4%	
Kaiser Permanente	56.0%	
L.A. Care Health Plan	54.6%	
Gold Coast Health Plan	54.3%	
Blue Shield of California Promise	53.8%	
Community Health Group	53.7%	
Central California Alliance for Health	51.0%	

Managed Care Parent Plan	Percent of Medi-Cal Beneficiaries Administered at Least One Dose
Health Net Community Solutions	50.8%
CenCal Health	50.0%
Partnership Health Plan of California	48.9%
United Healthcare Community Plan	47.0%
Molina Healthcare of California	46.9%
Anthem Blue Cross	44.9%
CalViva Health	43.8%
Health Plan of San Joaquin	42.3%
Inland Empire Health Plan	42.2%
California Health and Wellness Plan	42.1%
Aetna Better Health of California	41.7%
Kern Health Systems	38.2%
Fee For Service	58.8%

Vaccine Equity Metric (VEM)

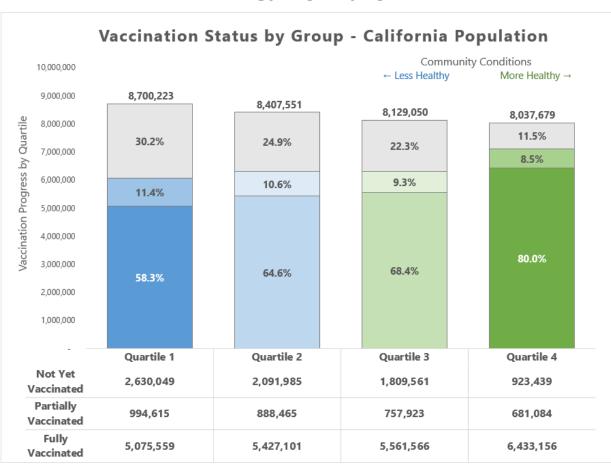
California is using the Healthy Places Index (HPI), which reflects 25 community characteristics using data related to the economy, education, healthcare access, housing, neighborhoods, clean environment, transportation, and social environment. California's 1650+ ZIP codes have been divided into four quartiles based on the HPI Index. Those with the highest HPI scores correlate to better health outcomes, while those with lower scores (first quartile) reflect worse health outcomes. In general, higher HPI scores also correlate with higher household incomes, and lower HPI scores correlate with lower incomes.

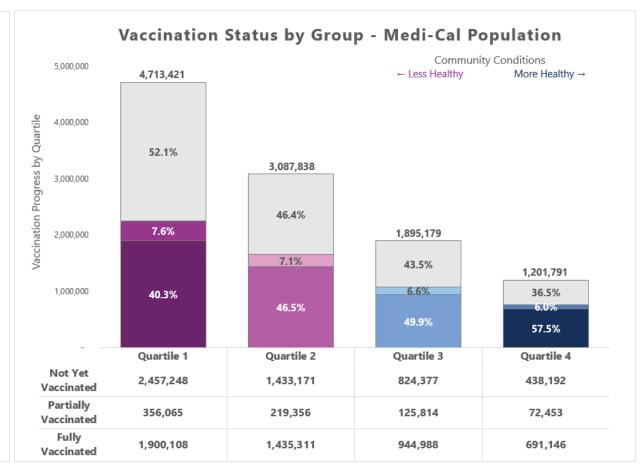
- » Equitable Vaccine Administration Fact Sheet (ca.gov)
 - » https://www.gov.ca.gov/wp-content/uploads/2021/03/Equitable-Vaccine-Administration-Fact-Sheet.pdf

COVID-19 Vaccination Status as of September 5, 2021 CA vs. Medi-Cal - by Community Conditions

All Californians

Medi-Cal Beneficiaries





Overview of Medi-Cal Vaccine Incentive Program

Category	Details Details on following page
Overview	DHCS has created a COVID-19 vaccination incentive program for managed care plans (MCPs) to increase COVID-19 vaccination
Program details	Program includes 3 components:
	High performance pool (HPP): Fundsnot claimed by MCPs placed in a pool that will be distributed among MCPs with at least 85% of Medi-Cal members age 12+ vaccinated with 1 dose of COVID-19 vaccine. Also considering HPP measures related to vaccinating member children aged 5-11 years (if EUA approval), and/or related to percent of members who are fully vaccinated.
Timing	Baseline vaccination rate is as of August 29, 2021
	Outcomes will be evaluated as of
	■ October 31, 2021
	■ January 2, 2022
	 March 6, 2022

Additional detail: DHCS outcome measures and targets

Outcome measures		Weight	Target
Intermediate outcome measures (2 of 3 must be reported)	1. Percent of homebound Medi-Cal beneficiaries who received at least one dose of a COVID-19 vaccine	5%	October 31: 10% increase over baseline January 2: 20% increase March 6: 30% increase
	2. Percent of Medi-Cal beneficiaries ages 50-64 years of age with one or more chronic diseases [as defined by the federal Centers for Disease Control and Prevention (CDC)] who received at least one dose of a COVID-19 vaccine	5%	
	3. Percent of primary care providers in the MCP's network providing COVID-19 vaccine in their office	5%	
Vaccine uptake outcome measures	4. Percent of Medi-Cal beneficiaries ages 12 years and older who received at least one dose of a COVID-19 vaccine	35%	Gap closure from baseline to target (average in county or weighted average across counties) October 31: 33.3% of gap closed January 2: 66.6% of gap closed March 6: 100% of gap closed
	5. Percent of Medi-Cal beneficiaries ages 12-25 years who received at least one dose of a COVID-19 vaccine	10%	
	6. Percent of Medi-Cal beneficiaries ages 26-49 years who received at least one dose of a COVID-19 vaccine	5%	
	7. Percent of Medi-Cal beneficiaries ages 50-64 years who received at least one dose of a COVID-19 vaccine	5%	
	8. Percent of Medi-Cal beneficiaries ages 65+ years who received at least one dose of a COVID-19 vaccine	5%	
Race/ ethnicity	9. Percent of Medi-Cal beneficiaries ages 12 years and older from the race/ethnicity group with the lowest baseline vaccination rate who received at least one dose of a COVID-19 vaccine	15%	
	10. Percent of Medi-Cal beneficiaries ages 12 years and older from the race/ethnicity group with the second-lowest baseline vaccination rate who received at least one dose of a COVID-19 vaccine	15%	

DHCS is strengthening its efforts to work with managed care plans, local public health departments, agencies and stakeholders serving our homebound populations, as well as providers, health systems and community-based organizations to improve vaccination rates and help ensure that our beneficiaries are protected against infection from current and emerging strains.

To support and empower our partners with data and transparency, we will update and publish this data on a bi-weekly basis to support monitoring of progress and to guide further interventions.

Medi-Cal COVID-19 Vaccination Status

Data sources:

- DHCS Data: Eligibility data from the Medi-Cal Data Warehouse Management Information System/Decision Support System
- CDPH Data: COVID-19 vaccination data from the California Immunization Registry. Data does not include doses administered by federal agencies who received vaccine allocated directly from CDC.
- » DHCS receives COVID-19 vaccination data every Sunday, links it securely to Medi-Cal eligibility data and loads it to the COVID-19 reporting module. The lag time between vaccinations and the corresponding data might be several days.

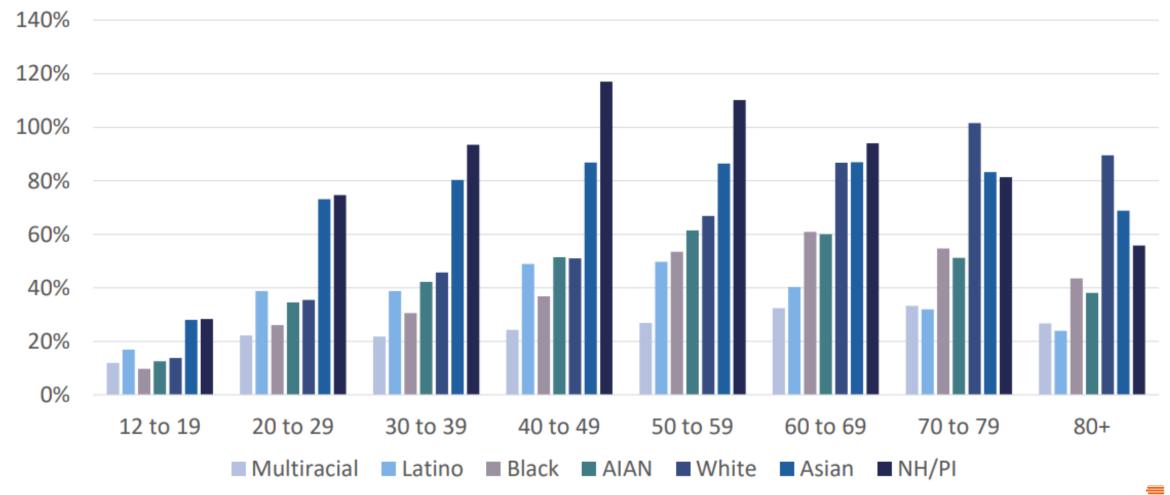


COVID Vaccine Outreach

Connie Nakano

1+ Dose Vaccination Rates by Race/Ethnicity & Age Combinations, Statewide





AIAN: American Indian or Alaskan Native

NH/PI: Native Hawaiian or Pacific Islander



Source: CVAC 5/24/21

COVID-19 Vaccine Outreach



- 82% of our 65+ older Californian population we serve have received one dose of vaccine and 72% are fully vaccinated.
- Adults 65+ make up 72% of COVID deaths in California
- Almost 70% of deaths are from communities of color



COVID-19 Vaccine Outreach





Federal funds to CDA, AAA, and ADRC for Older Adult Vaccine Outreach:

- Area Agencies on Aging -\$5,214,498
- Aging and Disability
 Resource Connections \$1,562,836

COVID-19 Vaccine Outreach: 3 Strategies



1. Ethnic Media

- Statewide press briefings
 - June 8
 - August 11
 - Sept 21
 - TBD
- Paid Ethnic advertisements



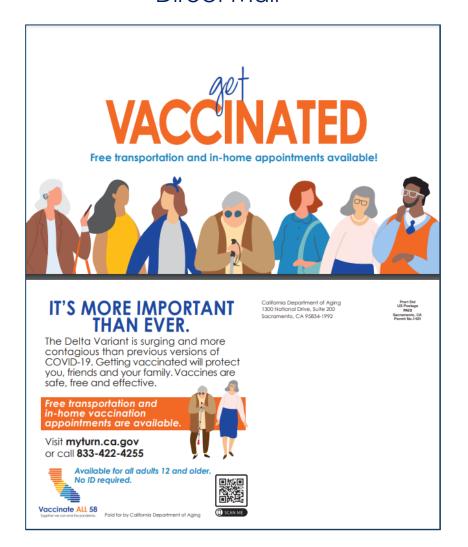
COVID-19 Vaccine Outreach: 3 Strategies



2. Paid Media

- Broadcast Radio
- Television
- Direct Mail
- Online

Direct Mail



Sample TV Spots

TV Spot 1: Protect

TV Spot 2: Barriers

TV Spot 3: Safe

TV Spot 4: Older/Wiser

Sample Radio Spots



KFBK-AM



KQOD-FM

COVID-19 Vaccine Outreach: 3 Strategies





- 3. Grants to both local AAAs and ADRCs for targeted outreach:
 - Informed by priority zip codes
 - Reports on activities and outcomes to be shared

Vaccine Outreach Campaign Resources





For more information and to keep updated about **Vaccine Outreach Campaign**, go to

<u>CDA Webpage</u> Highlights or

COVID Resources Section.

Direct link:

https://aging.ca.gov/covid19/ Vaccine Outreach/

Member Open Forum Rigo Saborio, St. Barnabas Senior Services and All



Member Open Forum

- Member Updates
- Suggested Future Agenda Items
 - 2022 MPA Goal Driven Meeting Agendas



Public Comment

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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.

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Next Steps

Kim McCoy Wade



