

Date of Hearing: April 22, 2019

ASSEMBLY COMMITTEE ON AGING AND LONG-TERM CARE

Adrin Nazarian, Chair

AB 1136 (Nazarian) – As Amended April 10, 2019

SUBJECT: California Department of Community Living.

SUMMARY: Establishes the California Department of Community Living (department) within the California Health and Human Services Agency to consolidate leadership on issues and programs serving California's older adults, people with disabilities, and caregivers.

Specifically, **this bill:**

- 1) Requires the department to realize California's commitment to person-centered, coordinated service delivery for older adults, people with disabilities, and caregivers in order to strengthen access to home and community-based services and enable individuals of all ages to live with dignity and independence.
- 2) Requires the department to provide leadership, policy development, and technical assistance to the programs within its jurisdiction while also advocating across state departments for the needs of older adults, people with disabilities, and caregivers.
- 3) Establishes that the timeline and implementation provisions for the Department of Community Living shall be further established, as appropriate, as a component of any master plan for aging established by the state.
- 4) Requires the department to establish a statewide No Wrong Door (NWD) system to support seamless access to information regarding available long-term services and supports, building upon the standards established through the Aging and Disability Resource Connection program.
- 5) Specifies that the purpose of the NWD system shall be to assist older adults, people with disabilities, and caregivers in obtaining accurate information and timely referrals to appropriate community services and supports through all of the following means:
 - a) A universal assessment process.
 - b) Information and referral services.
 - c) Person-centered options counseling concerning available programs for long-term services and supports and public and private benefits.
 - d) Short-term service coordination.
 - e) Transition services from hospitals to home and from skilled nursing facilities to the community.
- 6) Requires the department shall assist the following entities in carrying out their mandated duties and responsibilities to be an advocate for the needs of California's older adults and people with disabilities:

- a) The California Commission on Aging.
 - b) The State Independent Living Council.
 - c) The Assistive Technology Advisory Committee.
 - d) The California Senior Legislature.
- 7) Requires the department shall provide block grants to area agencies on aging to provide services through programs authorized under the Home and Community-Based Services program, with a goal of ensuring that local needs are met in accordance with the area plans.
 - 8) Allows an area agency on aging that receives a block grant pursuant to this section shall have the discretion to allocate funds to the following programs in amounts to be determined by the area agency on aging based on local need.
 - 9) Requires the department to continue funding for independent living centers based on current levels as of January 1, 2020, and as written in the State Plan for Independent Living, while working to secure additional funding sources to meet the needs of the local community and underserved populations. Independent living center programs include housing, personal assistant services, assistive technology, information and referral, peer support, individual and systems change advocacy, independent living skills training, youth transition, transition, and diversion.

EXISTING LAW:

- 1) The Mello-Granlund Older Californians Act establishes, within the California Health and Human Services Agency, the California Department of Aging. Under the act, the department is required to provide programs and strategies to support the state's older population, persons with disabilities, and their caregivers.
- 2) Establishes the California Health and Human Services Agency (CHHS), an umbrella agency over the Departments of Aging, Child Support Services, Community Services and Development, Developmental Services, Health Care Services, Managed Health Care, Public Health, Rehabilitation, Social Services, and State Hospitals.
- 3) Establishes, under federal law, the U.S. Administration for Community Living (ACL), bringing together the Administration on Aging, the Office on Disability and the Administration on Developmental Disabilities to: reduce fragmentation in federal programs that address the community living service and support needs of aging and disabled.

FISCAL EFFECT: This bill has not yet been analyzed by a fiscal committee.

COMMENTS:

According to the author, "As a component of the Master Plan for Aging, AB 1136 replaces the Department of Aging with a new Department of Community Living that provides coordinated leadership to addresses the needs of older adults, people with disabilities and caregivers, ultimately enabling Californians to age with dignity and independence in the setting of their choice."

The number of Californians over age 65 is projected to double by 2030 to 8.84 million people, or 18 percent of California's population. Working age adults with disabilities likely will increase in number to more than half a million by 2030, exerting additional pressure on California's long-term care system. The aging population also is living longer, many with physical or cognitive disabilities or chronic illnesses such as Alzheimer's disease, high blood pressure, diabetes and obesity, or with a history of heart attack or stroke. California's growing population will place unprecedented level of demand on the state's health care resources.

The California Department of Aging (CDA) was established as the State Unit on Aging responsible for administration of Older American Act programs. Enacted in 1980, the Older Californians Act (OCA) authorized California-specific programs serving older adults in their homes and communities. Under the act, the department is required to provide programs and strategies to support the state's older population, persons with disabilities, and their caregivers.

In addition to the California Department of Aging, the State Department of Health Care Services, the Department of Rehabilitation, and the State Department of Social Services are responsible for delivering a range of services to California's older adults and people with disabilities, often with duplication and without administrative efficiency.

These departments operate in a fragmented fashion, often with little data sharing and policy development across programs. This fragmentation impacts the ability to deliver services to older adults, people with disabilities, and caregivers in a coordinated, streamlined fashion that would allow them to be better served.

At the federal level, the U.S. Department of Health and Human Services (HHS) established the Administration for Community Living (ACL) in 2012, bringing together the Administration on Aging (AoA), the Administration on Intellectual and Developmental Disabilities (AIDD), and the HHS Office on Disability. The ACL serves as the Federal agency responsible for increasing access to community supports, focusing resources on the unique needs of older Americans and people with disabilities across their lifespan. ACL focuses on meeting the needs of both the aging and disability populations, enhancing access to quality health care and LTSS for all individuals, and promoting consistency in community living policy across other areas of the federal government.

For years, state policymakers have called for structural reorganization of the California Department of Aging. Yet the various restructuring proposals have not been implemented. These restructuring proposals include those offered by the Little Hoover Commission (1996 and 2011), the California Performance Review (2004), the Assembly Committee on Aging and LTC (2006), the Senate Select Committee on Aging and LTC (2015).

The Select Committee on Aging and Long Term Care's 2014 report, *"A Shattered System: Reforming Long Term Care in California"* was the result of a comprehensive effort in 2014 to identify the structural, policy, and administrative changes necessary to realize an ideal long-term care delivery system and develop recommendations and a strategy to achieve that vision. One of the critical policy areas identified by the report was the fragmented long-term care system, with the report stating that California's fragmented structure complicates comprehensive long-term care reform, and that in lieu of a cohesive strategic plan, California has instead adopted a piecemeal and reactive approach to change. To address this issue, the report recommended creating the Department of Community Living within CHHS, appointing an individual to lead the Department, and developing and implementing a long-term care strategic plan.

The Little Hoover Commission in its 2011 report, *A Long-Term Strategy for Long-Term Care*, found California's long-term care system broken. The state has no reliable means of gauging what clients need, what benefits they receive, which services are used by whom, how much each service costs the state, and which programs work the best and are the most cost-effective in keeping people in their homes. There is virtually no coordination or communication between programs and staff responsible for long-term care services. There is no integrated management or coordination of financing, service delivery or assessment of long-term care client needs or of providers. These fundamental structural flaws leave the system unable to effectively or efficiently deal with current needs and make it woefully unprepared for the "silver tsunami" of seniors who will lack services in the years to come. Furthermore, California lacks a single leader within the Health and Human Services Agency accountable for managing and modernizing long-term care in the state, which creates significant challenges to any attempt to systematically harness the dozens of long-term care programs and the many billions of dollars spent on them.

California was once seen as a leader in the provision of services to older adults and people with disabilities. Over time, however, the system has neglected to keep pace with population demand. Many people lack coordinated access to the services and supports necessary to age with dignity and independence. While the problem is multi-faceted, much of the challenge is rooted in fragmented program administration and a lack of coordinated leadership at the state level. A thoughtful departmental reorganization that emphasizes enhanced access to information, coordinated service delivery, and enhanced access to home and community based services is necessary to address the system challenges and meet the needs of California's older adults and people with disabilities.

REGISTERED SUPPORT / OPPOSITION:

Support

California Association of Area Agencies on Aging (C4A)
Congress of California Seniors
United Domestic Workers of America-AFSCME Local 3930

Opposition

None on file.

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