



# **Assembly Committee on Aging and Long-Term Care**

Assemblymember Adrin Nazarian,  
Chair

**2021-2022**

## **Legislative Summary**



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To Whom It May Concern,

As this report is published, our state is still in recovery from a crisis unforeseen and unimaginable. What began in March of 2019, is not completely behind us, yet as a state and nation we've made remarkable strides towards fortitude and resilience. As the COVID-19 pandemic continued to affect our priorities and how we do business and deliver service, the California State Legislature persevered as we finished out our second year of the 2021-2022 legislative term.

The Assembly Aging and Long-Term Care Committee was proud to advance legislation relating to, and protecting our most vulnerable citizens, the elderly and dependent adults, and bolstered the framework to support the Master Plan on Aging.

We continue to fight perpetual budget cuts to seniors and people living with disabilities this year. Final budgets passed and signed by the Governor for 2021-2022 and 2022-2023 again maintained community-based programs, family caregiving, ombudsmen services, and senior nutrition services. All programs that remain a priority for me personally and those who sit on this committee.

As we look to the future, continuing to factor in the unknowable path of the pandemic, we are resolute in our steadfast commitment to seniors, long-term care and people living with disabilities.

A handwritten signature in black ink, appearing to read "Adrin Nazarian".

ADRIN NAZARIAN/jg  
Member, 46th Assembly District

# **CALIFORNIA LEGISLATURE**

## **Assembly Aging and Long-Term Care Committee**

### **2021 - 2022 LEGISLATIVE BILL SUMMARY**

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## [Alzheimer's Disease](#)

### **AB-1684 (Voepel) - Alzheimer's Disease: Public Awareness Campaign.**

This bill would require California Department of Public Health (CDPH) to conduct a public awareness campaign to fulfill an existing requirement to provide public and professional education on Alzheimer's disease. It would include unpaid caregivers, including but not limited to, family and friends who provide care to someone with Alzheimer's disease or dementia as targets of the public awareness campaign.

AB 1684 also requires CDPH to be informed by its latest edition of the California Alzheimer's Clinical Care Guideline. This bill would also delete an obsolete provision related to the Budget Act of 2000.

**Status:** Senate-Died – Appropriations

#### **Legislative History:**

Assembly Floor - (76 - 0)

Asm Appropriations - (16 - 0)

Asm Aging and Long Term Care - (7 - 0)

Sen Appropriations - (7 - 0)

Sen Health - (9 - 0)

### **AB-2175 (Blanca E Rubio) - California Wandering Prevention Task Force.**

Establishes the California Wandering Prevention Taskforce (Taskforce) under the jurisdiction of the Department of Justice to address on a statewide basis the issue of wandering by individuals with cognitive impairment. The Taskforce will include 20 members to be appointed by the Attorney General or their designee. The Taskforce shall meet four to six times per year to accomplish objectives.

The Taskforce shall report recommendations for wandering prevention to the Legislature by June 30, 2024. The report shall address the following:

- a. Technology solutions.
- b. Social services coordination.
- c. Law enforcement coordination.
- d. Family caregiver and professional education and training.
- e. Public awareness.

**Status:** Assembly-Died – Appropriations

#### **Legislative History:**

Asm Aging and Long Term Care - (7 - 0)

## **SB-861 (Limón) - Dementia Care Navigator Grant Pilot Program.**

This bill would establish the Dementia Care Navigator Grant Pilot Program, to be administered by the California Department of Aging (Department), in partnership with organizations with expertise using community health workers, and promotores, as health navigators. The bill would provide that the purpose of the pilot program is to incentivize organizations that provide services to local communities to provide dementia care navigation training services, as defined. The bill would authorize organizations with expertise using community health worker as promotores and health navigators to apply for a grant. The bill would require the Department to award grants on a competitive basis. The bill would require an organization that receives a grant pursuant to these provisions to provide to the Department an annual report on the services provided on or before December 31 of the year the grant is received, as specified. The bill would make those provisions inoperative on July 1, 2027.

**Status:** Senate-In Floor Process

### **Legislative History:**

Assembly Floor - (75 - 0)	Senate Floor - (40 - 0)
Asm Appropriations - (16 - 0)	Senate Floor - (38 - 0)
Asm Aging and Long Term Care - (7 - 0)	Sen Appropriations - (7 - 0)
	Sen Appropriations - (7 - 0)
	Sen Human Services - (4 - 0)

### **Governor's Veto Message:**

Governor's veto message: To the Members of the California State Senate:

*I am returning Senate Bill 861 without my signature.*

*This bill would establish the Dementia Care Navigator Grant Pilot Program within the California Department of Aging to incentivize organizations that provide services to local communities to provide dementia care navigation training services.*

*The need for quality, culturally competent care is a priority of my administration. As an example of this commitment, the 2022 Budget Act included \$281.4 million over three years to recruit, train, and certify community health workers who can provide dementia care navigation, among other services. This bill creates more than \$6 million in General Fund cost pressures that were not accounted for in the budget.*

*With our state facing lower-than-expected revenues over the first few months of this fiscal year, it is important to remain disciplined when it comes to spending, particularly spending that is ongoing. We must prioritize existing obligations and priorities, including education, health care, public safety and safety-net programs.*

*The Legislature sent measures with potential costs of well over \$20 billion in one-time spending commitments and more than \$10 billion in ongoing commitments not accounted for in the state budget. Bills with significant fiscal impact, such as this measure, should be considered and accounted for as part of the annual budget process.*

*While I am unable to sign this bill, I am directing the Department of Health Care Access and Information to work with stakeholders including those that work on dementia care as they begin to develop and implement the Community Health Worker program established by SB 184 (Committee on Budget and Fiscal Review, Chapter 47, Statutes of 2022), and funded by the Budget Act of 2022.*

## Behavioral Health

### AB-383 (Salas) - Mental Health: Older Adults.

This bill established within the State Department of Health Care Services (DHCS) an Older Adult Behavioral Health Services Administrator (Administrator) to oversee behavioral health services for older adults. The bill required that position to be funded with administrative funds from the Mental Health Services Fund. The bill prescribed the functions of the Administrator and its responsibilities, including, but not limited to, developing outcome and related indicators for older adults for the purpose of assessing the status of behavioral health services for older adults, monitoring the quality of programs for those adults, and guiding decision making on how to improve those services. The bill required the Administrator to receive data from other state agencies and departments to implement these provisions, subject to existing state or federal confidentiality requirements. The bill required the Administrator to report to the entities that administer the Mental Health Services Act (Act) on those outcome and related indicators by July 1, 2022, and required the report to be posted on DHCS's internet website. The bill would also require the Administrator to develop a strategy and standardized training for all county behavioral health personnel in order for the counties to assist the Administrator in obtaining the data necessary to develop the outcome and related indicators.

This bill declared that it clarifies procedures and terms of the Act.

**Status:** Senate-Died – Appropriations

### Legislative History:

Assembly Floor - (78 - 0)

Asm Appropriations - (16 - 0)

Asm Health - (15 - 0)

Asm Aging and Long Term Care - (7 - 0)

Sen Appropriations - (7 - 0)

Sen Human Services - (4 - 0)

Sen Health - (10 - 0)



## Care Facilities

### [AB-499 \(Blanca E Rubio\) - Referral Source for Residential Care Facilities for the Elderly: Duties.](#)

(1) The California Residential Care Facilities for the Elderly Act (Act) generally requires the State Department of Social Services (Department) to license, inspect, and regulate residential care facilities for the elderly (RCFE) and imposes criminal penalties on a person who violates the Act or who willfully or repeatedly violates any rule or regulation adopted under the Act. The Act prohibits a placement agency, as defined, from placing an individual in a RCFE if the individual, because of a health condition, cannot be cared for within the limits of the license or requires inpatient care in a health facility. The Act requires an employee of a placement agency who knows, or reasonably suspects, that a facility is improperly operating without a license to report the facility to the Department, and requires the Department to investigate those reports. The Act further requires a placement agency to notify the appropriate licensing agency of any known or suspected incidents that would jeopardize the health or safety of residents in a facility. The Act specifically makes a violation of these requirements a crime.

This bill re-casted the requirements on a placement agency and its employees to instead be requirements on a referral source, defined to mean any specified county department, state-funded program, agency, or person that is engaged in identifying senior housing options at residential care facilities for the elderly. The bill prohibited a referral source from, among other things, referring a person to a RCFE in which the referral source has an ownership or management interest without a waiver. The bill required a referral source, before sending a compensated referral to a RCFE, to provide a person or their representative with specific written, electronic, or verbal disclosures that include, among others, the referral source's privacy policy. The bill additionally required a compensated referral source to comply with additional requirements that include, among others, maintaining a minimum amount of liability insurance coverage. The bill imposed criminal penalties and civil penalties for a violation of these provisions, as specified. By expanding the existing crime under the act and specifying new criminal penalties, this bill imposed a state-mandated local program.

(2) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill provided that no reimbursement is required by this Act for a specified reason.

**Status:** Assembly-Vetoed

### **Legislative History:**

Assembly Floor - (79 - 0)	Senate Floor - (38 - 0)
Assembly Floor - (78 - 0)	Sen Appropriations - (7 - 0)
Asm Appropriations - (16 - 0)	Sen Judiciary - (10 - 1)
Asm Aging and Long Term Care - (7 - 0)	Sen Human Services - (5 - 0)
Asm Human Services - (8 - 0)	

### **Governor's Veto Message:**

Governor's veto message: To the Members of the California State Assembly:

*I am returning Assembly Bill 499 without my signature.*

*This bill would recast existing law governing entities providing referrals to Residential Care Facilities for the Elderly (RCFEs) and impose certain requirements, including that the referral entity provide specified disclosures to a consumer or their representative, conduct background checks on referral sources, and carry liability insurance.*

*It is important that individuals have access to objective, independent, comprehensive, and free information about RCFEs. The Budget Act of 2022 appropriated \$1 million to the California Department of Aging to facilitate the display of this information on [CallongTermCareCompare.org](http://CallongTermCareCompare.org).*

*While I appreciate the author's attempts to enact consumer protections for older adults and their loved ones looking for a RCFE, I am concerned this bill may serve to reduce consumer options in instances where referral entities are only providing referrals to those RCFEs with whom they are contracted to receive compensation. While there is no cost to the consumer, there are equity concerns that the financial arrangements favor those facilities that can best afford remuneration fees, unfairly limiting consumer information, access, and choice.*

*This bill seeks to advance some important provisions and further conversation is needed to ensure consumers and their loved ones are provided with sufficient protections. I am directing the California Elder and Disability Justice Coordinating Council within the California Health and Human Services Agency to work with the author on a revised concept that includes stronger and more equitable consumer protections.*

*For these reasons, I cannot sign this bill.*

### **[AB-895 \(Holden\) - Skilled Nursing Facilities, Intermediate Care Facilities, and Residential Care Facilities for the Elderly: Notice to Prospective Residents.](#)**

The California Residential Care Facilities for the Elderly Act (Act) generally requires the State Department of Social Services (Department) to license, inspect, and regulate residential care

facilities for the elderly (RCFE) and imposes criminal penalties on a person who violates the Act or who willfully or repeatedly violates any rule or regulation adopted under the Act. The Act specifically requires the Department to promulgate regulations for a license that prescribe standards of safety and sanitation for the physical plant and standards for basic care and supervision, personal care, and services provided to residents. The Act specifically requires the Department to conduct unannounced inspections of licensed RCFE and to inspect these facilities as often as necessary to ensure the quality of care provided.

This bill required the Department, on or before July 1, 2022, and every month thereafter, to post on its internet website every inspection report for every licensed RCFE within 5 years from the date of posting.

This bill required the Department to administer a pilot program in 2 volunteer counties from January 1, 2024, to January 1, 2027, inclusive, to test the appropriate criteria to evaluate the quality of RCFE. The department would be required to consider evaluation criteria proposed by a pilot program stakeholder group in developing the pilot program. The bill further required the department to report the results of the pilot program to the Legislature on or before July 1, 2027. The bill repealed these provisions on January 1, 2029.

### **Legislative History:**

This bill was substantively amended in January 2022 and removed from the Committee's jurisdiction.

## **Equity**

### **SB-258 (Laird) - Aging.**

Existing law, the Mello-Granlund Older Californians Act, establishes the California Department of Aging (Department) and sets forth its mission to provide leadership to the area agencies on aging in developing systems of home- and community-based services that maintain individuals in their own homes or least restrictive homelike environments. Existing law requires the Department, in allocating specified state and federal funding to area agencies on aging, to ensure that priority consideration is given to criteria that reflect the state's intent to target services to those in greatest economic or social need. Existing law defines "greatest social need" to mean the need caused by noneconomic factors, including physical and mental disabilities, that restrict an individual's ability to perform normal daily tasks or that threaten the individual's capacity to live independently.

This bill revised this definition to include human immunodeficiency virus (HIV) status as a specified noneconomic factor.

**Status:** Chapter 132, Statutes of 2021

### **Legislative History:**

Assembly Floor - (70 - 0)

Asm Appropriations - (14 - 0)

Asm Aging and Long Term Care - (7 - 0)

Senate Floor - (36 - 0)

Sen Human Services - (3 - 0)

## **Health Care**

### **[AB-98 \(Frazier\) - Health Care: Medical Goods: Reuse and Redistribution.](#)**

Existing law, the Mello-Granlund Older Californians Act, reflects the policy mandates and directives of the Older Americans Act of 1965, as amended, and sets forth the state's commitment to its older population and other populations served by the programs administered by the California Department of Aging (Department).

This bill required the Department, upon appropriation by the Legislature, to establish a comprehensive 3-year pilot program in the Counties of Contra Costa, Napa, and Solano to facilitate the reuse and redistribution of durable medical equipment and other home health supplies. The bill required the Department to contract in each county with a local nonprofit agency to oversee the program and would require the contracting nonprofit agency to, at a minimum, develop a computerized system to track the inventory of equipment and supplies available for reuse and redistribution and organize pickup and delivery of equipment and supplies. The bill required the Department, on or before January 1, 2026, to submit a report to the Assembly Committee on Aging and Long-Term Care, the Assembly Committee on Health, and the Senate Committee on Health that includes an evaluation of the success of the pilot program and challenges in implementation, among other things. The bill repeals its provisions on January 1, 2030.

### **Legislative History:**

This bill was substantively amended in June 2022 and removed from the Committee's jurisdiction.

### **[AB-523 \(Nazarian\) - Program of All-Inclusive Care for the Elderly. \(PACE\)](#)**

This bill generally required the State Department of Health Care Services (DHCS) to make permanent the specified Program of All-Inclusive Care for the Elderly (PACE) flexibilities instituted, on or before January 1, 2021, in response to the state of emergency caused by COVID-19 by means of all-facility letters or other similar instructions taken without regulatory action, with prescribed modifications, such as instead limiting a PACE organization's use of telehealth to specified services, including conducting assessments for eligibility for enrollment in the PACE program, subject to the federal waiver process. The bill required the DCHS to work

with the federal Centers for Medicare and Medicaid Services to determine how to extend PACE program flexibilities approved during the COVID-19 emergency.

**Status:** Assembly-Vetoed

**Legislative History:**

Assembly Floor - (80 - 0)	Senate Floor - (37 - 0)
Assembly Floor - (78 - 0)	Sen Appropriations - (7 - 0)
Asm Appropriations - (16 - 0)	Sen Appropriations - (6 - 0)
Asm Health - (15 - 0)	Sen Health - (11 - 0)
Asm Aging and Long Term Care - (6 - 0)	

**Governor's Veto Message:**

Governor's veto message: To the Members of the California State Assembly:

*I am returning Assembly Bill 523 without my signature.*

*AB 523 would require the Department of Health Care Services (DHCS) to make permanent the specified Program of All-Inclusive Care for the Elderly (PACE) program flexibilities instituted, on or before January 1, 2021, in response to the public health emergency caused by COVID-19. AB 523 also requires DHCS to work with the Centers for Medicare and Medicaid Services to determine how to extend PACE flexibilities approved during COVID-19.*

*As part of the Budget Act of 2021, all telehealth flexibilities in the Medi-Cal program were extended until December 31, 2022. DHCS was also required to convene an advisory group to provide recommendations for establishing and adopting billing and utilization management protocols for telehealth modalities to increase access and equity and reduce disparities in the Medi-Cal program. This advisory group is the appropriate venue to participate and provide telehealth recommendations specific to the PACE program.*

*Additionally, the bill states that DHCS shall make the changes permanent, without conditioning the permanent changes on DHCS obtaining necessary federal approvals and federal financial participation or taking into consideration federal legal mandates.*

*For these reasons, I am returning this bill without my signature.*

**[AB-540 \(Petrie-Norris\) - Program of All-Inclusive Care for the Elderly.](#)**

This bill would exempt a Medi-Cal beneficiary who is enrolled in a Program of All-Inclusive Care for the Elderly (PACE) organization with a contract with the Department of Health Care Services (DHCS) from mandatory or passive enrollment in a Medi-Cal managed care plan and would

require persons enrolled in a PACE plan to receive all Medicare and Medi-Cal services from the PACE program. The bill would require, in areas where a PACE plan is available, that the PACE plan be presented as a Medi-Cal managed care plan enrollment option in the same manner as other Medi-Cal managed care plan options. In areas of the state where a presentation on Medi-Cal managed care plan enrollment options is unavailable, the bill would require the DCHS or its contracted vendor to provide outreach and enrollment materials on PACE. The bill would require DCHS to establish a system to identify Medi-Cal beneficiaries who appear to be eligible for PACE based on age, residence, and prior use of services, and, with respect to that system, would require the DCHS to conduct specified outreach and referrals.

**Status:** Senate-Died – Appropriations

**Legislative History:**

Assembly Floor - (78 - 0)	Sen Appropriations - (7 - 0)
Asm Appropriations - (16 - 0)	Sen Health - (10 - 0)
Asm Health - (15 - 0)	
Asm Aging and Long Term Care - (7 - 0)	

**[AB-2331 \(Calderon\) - Bridge to Recovery for Adult Day Services: COVID-19 Mitigation and Resilience Grant Program to Combat Senior Isolation.](#)**

AB 2331 establishes a two-year grant program for COVID-19 mitigation at the California Department of Aging (CDA), upon appropriation by the Legislature, to provide grants for adult day services, including adult day health care facilities (ADHCs) licensed by the California Department of Public Health and adult day programs (ADP) licensed by the Department of Social Services, to implement infection prevention control or to address workforce shortages. This bill establishes the Bridge to Recovery for Adult Day Services: COVID-19 Mitigation and Resilience Grant Program to Combat Senior Isolation within CDA to improve the health, safety, and well-being of vulnerable at-risk older adults and people with disabilities through safe access to vital services in ADHC and ADP settings.

**Status:** Senate-Died – Appropriations

**Legislative History:**

Assembly Floor - (74 - 0)	Sen Appropriations - (7 - 0)
Asm Appropriations - (16 - 0)	Sen Health - (10 - 0)
Asm Aging and Long Term Care - (7 - 0)	Sen Human Services - (5 - 0)

## Housing

### **AB-1083 (Nazarian) - Senior Affordable Housing: Nursing Pilot Program.**

Existing law establishes the California Department of Aging (Department) to provide leadership to the area agencies on aging in developing systems of home- and community-based services that maintain individuals in their own homes or the least restrictive homelike environments. Existing law permits age restrictions in connection with housing and defines senior citizen housing developments for these purposes as a residential development for senior citizens that has at least 35 dwelling units.

This bill required the Department to establish and administer the Housing Plus Services Nursing Pilot Program (Program) in the Counties of Los Angeles, Orange, Riverside, Sacramento, and Sonoma. The Program would provide grant funds to qualified nonprofit organizations that specialize in resident services for the purposes of hiring one full-time registered nurse to work at 3 senior citizen housing developments in each county to provide health education, navigation, coaching, and care to residents. The bill required the Department to submit a report to specified legislative committees and state agencies on or before January 1, 2026, and would repeal the program as of January 1, 2027.

**Status:** Assembly-Died – Appropriations

#### **Legislative History:**

Asm Aging and Long Term Care - (7 - 0)

### **AB-1327 (Ting) - Aging in Place: Home Modification.**

Existing law, subject to an appropriation, requires the California Department of Aging (Department), in consultation with the California Commission on Aging, to enter into a contract with a research-based university gerontology department, as specified, to develop information and materials relating to the concept of “aging in place” and the benefits of home modification for seniors. Existing law requires the Department to distribute that information to area agencies on aging and other appropriate entities.

This bill required the Department to update the above information and materials, as specified, to include information on the benefits of accessory dwelling units as a type of home modification to help Californians age in place, and to prominently post the distributed information on its internet website.

**Status:** Assembly-Died

#### **Legislative History:**

Asm Appropriations - (16 - 0)

Asm Aging and Long Term Care - (7 - 0)

## **AB-2547 (Nazarian) - Housing Stabilization to Prevent and End Homelessness Among Older Adults and People with Disabilities Act.**

Existing law establishes, with the Mello-Granlund Older Californians Act (OCA), the California Department of Aging (CDA) and states that the mission of the department is to provide leadership to the Area Agencies on Aging (AAAs) in developing systems of home- and community-based services that maintain individuals in their own homes or least-restrictive homelike environments.

Existing law also establishes the following housing supports:

1. CalWORKs Housing Support Program (HSP) to provide housing supports to CalWORKs recipients who are experiencing homelessness or at risk of homelessness, and for whom housing instability would be a barrier to self-sufficiency or child well-being. Supports provided by CalWORKs HSP include, but are not limited to: financial assistance, rental assistance, security deposits, utility payments, moving cost assistance, motel and hotel vouchers, housing stabilization and relocation, landlord recruitment, case management, housing search and placement, legal services, and credit repair.
2. CalWORKs Homeless Assistance (HA) program, which provides temporary and permanent assistance to a homeless family seeking shelter when the family is eligible for homeless aid. CalWORKs HA includes payment for temporary shelter, such as motel vouchers, and permanent assistance, via security deposit costs or up to two months of rent arrearages.
3. Bring Families Home Program (BFH) to provide housing-related supports to eligible families experiencing homelessness if that homelessness prevents reunification between an eligible family and a child receiving child welfare services, or where lack of housing prevents a parent or guardian from addressing issues that could lead to foster care placement.
4. Housing and Disability Income Advocacy Program, under which counties, tribes, or combinations of counties or tribes assist Californians with disabilities who may be experiencing homelessness, to increase participation among individuals who may be eligible for disability benefits programs, including, but not limited to, the Supplemental Security Income/State Supplementary Program for the Aged, Blind, and Disabled (SSI/SSP), the federal Social Security Disability Insurance (SSDI) program, the Cash Assistance Program for Immigrants (CAPI), and veterans benefits, including disability compensation.
5. Home Safe Program, administered by California Department of Social Services, which awards grants to counties, tribes, or groups of counties or tribes, that provide services to elder and dependent adults who experience abuse, neglect, self-neglect, or exploitation and otherwise meet the eligibility criteria for adult protective services, for the purpose of providing housing-related supports to individuals who are receiving or eligible for adult protective services and are homeless or at risk of homelessness.

This bill required, upon appropriation by the Legislature, CDA to create, and begin administering, the Housing Stabilization to Prevent and End Homelessness Among Older Adults and People with Disabilities Program on or before January 1, 2024. The bill required the program offer competitive grants to nonprofit community-based organizations, continuums of care, area agencies on aging, and public housing authorities to administer a housing subsidy program for older adults and individuals with disabilities who are homeless or at risk of



homelessness, as provided. This bill additionally requires CDA to develop program guidelines and conduct additional implementation activities, including working with local housing authorities to create a plan for program participants to transition into a federal housing subsidy program and to work with award recipients and recruited landlords to ensure recruited landlords meet the requirements of the Housing Choice Voucher program.

**Legislative History:**

This bill was substantively amended in June 2022 and removed from the Committee's jurisdiction.

**[AB-2548 \(Nazarian\) - Healthier Homes - Age in Place Nursing Program.](#)**

Existing law establishes the California Department of Aging (Department) to provide leadership to the area agencies on aging in developing systems of home- and community-based services that maintain individuals in their own homes or the least restrictive homelike environments. Existing law permits age restrictions in connection with housing and defines senior citizen housing developments for these purposes as a residential development for senior citizens that has at least 35 dwelling units. This bill required the Department to establish and administer the Healthier Homes- Age in Place Program (Program) in the Counties of Contra Costa, Fresno, Orange, Riverside, Sacramento, San Diego, Shasta and Sonoma. The Program would provide grant funds to qualified nonprofit organizations that specialize in resident services for the purposes of hiring one full-time registered nurse and one full-time community health worker to work at 3 senior citizen housing developments in each county to provide health education, navigation, coaching, and care to residents. The bill required the Department to submit a report to specified legislative committees and state agencies on or before January 1, 2028, and would repeal the program as of January 1, 2029.

**Legislative History:**

This bill was substantively amended in June 2022 and removed from the Committee's jurisdiction.

## **Long-Term Services and Supports**

**[AB-911 \(Nazarian\) - Long-Term Services and Supports \(LTSS\) Benefit Task Force.](#)**

Existing law, contingent upon the appropriation of funds for that purpose by the Legislature, establishes the Aging and Disability Resource Connection (ADRC) program, to be administered by the California Department of Aging (Department), to provide information to consumers and their families on available long-term services and supports (LTSS) programs and to assist older adults, caregivers, and persons with disabilities in accessing LTSS programs at the local level.

This bill required the Department to establish an LTSS Benefit Task Force, or utilize an existing

board, commission, committee, or task force, to focus on LTSS benefit needs in the State of California. The bill required the Department to report to the Legislature by July 1, 2023, on the specified findings and recommendations of the LTSS Benefit Task Force.

**Status:** Assembly-Died - Aging and Long Term Care

**[AB-1855 \(Nazarian\) - Long-Term Care Ombudsman Program: Facility Access.](#)**

Existing law, as part of the Mello-Granlund Older Californians Act, establishes the Office of the State Long-Term Care Ombudsman, under the direction of the State Long-Term Care Ombudsman, in the California Department of Aging. Existing law provides for the Long-Term Care Ombudsman Program under which funds are allocated to local ombudsman programs to assist elderly persons in long-term health care facilities and residential care facilities by, among other things, investigating and seeking to resolve complaints against these facilities, and providing services to assist residents in the protection of their health, safety, welfare, and rights. Under existing law, if an individual is a patient in a skilled nursing facility when a written advance health care directive is executed, the advance health care directive is not effective unless a patient advocate or ombudsman signs the advanced directive as a witness, as specified.

This bill would prohibit a skilled nursing facility or residential care facility from denying entry to a representative of the office acting in their official capacity, except as specified. The bill would authorize a facility, during a state of emergency, health emergency, or local health emergency to require a representative of the office entering the facility to adhere to infection control protocols for the duration of their visit that are no more stringent than those required for facility staff. The bill would make related findings and declarations.

**Status:** Chapter 583, Statutes of 2022

**Legislative History:**

Assembly Floor - (76 - 0)	Senate Floor - (40 - 0)
Assembly Floor - (65 - 0)	Sen Health - (10 - 0)
Asm Appropriations - (14 - 0)	Sen Human Services - (5 - 0)
Asm Aging and Long Term Care - (7 - 0)	

**[AB-1962 \(Voepel\) - Telephone Support Services: Seniors and Individuals with Disabilities.](#)**

This bill would, subject to an appropriation, require the Department of Aging to establish a grant program, with funds awarded to area agencies on aging and independent living centers, for the purpose of providing telephone support services for seniors and individuals with disabilities. The bill would require a grant recipient to coordinate with paraprofessional volunteers, who would receive training to recognize when a professional referral should be made. The bill would also require a grant recipient to contact seniors and individuals with disabilities and provide a

“listening setting” through the telephone support service to identify available resources for reducing anxiety or other behavioral challenges, in order to combat social isolation and to help rebuild social capital.

**Status:** Assembly-Died - Aging and Long Term Care

### **[AB-2394 \(Reyes\) - Long-Term Services and Supports.](#)**

AB 2394 would establish the California Long-Term Services and Supports Benefits Board (LTSS Board), to be composed of 10 specified members, including, among others, the Treasurer as chair, the Secretary of California Health and Human Services as vice chair, and 4 members to be appointed by the Governor. The bill would require the LTSS Board to manage and invest revenue deposited in the California Long-Term Services and Supports Benefits Trust Fund (LTSS Trust), which the bill would create in the State Treasury, to, upon appropriation, finance long-term services and supports for eligible older adults and individuals with physical and mental disabilities. The bill would also create the California Long-Term Services and Supports Advisory Committee for the purpose of providing ongoing advice and recommendations to the LTSS Board.

**Status:** Assembly-Died - Aging and Long Term Care

### **[AB-2546 \(Nazarian\) - Resident-Designated Support Persons Act.](#)**

Existing law establishes, in federal law, the Older Americans Act (OAA), which promotes the well-being of Americans 60 years old and above through services and programs designed to meet their needs and within the OAA, the Office of the Long-Term Care Ombudsman (LTCO) Program and requires states to establish and operate a LTCO for the purpose of identifying, investigating, and resolving complaints that may adversely affect the health, safety, welfare, or rights of residents of long-term care facilities. Existing law also establishes the Office of the State LTCO under the California Department of Aging (CDA), for the purpose of protecting and advocating for the rights and health and safety of long-term care facility residents, and in providing leadership, direction, and support to local LTCO programs.

This bill required the California Department of Public Health, the California Department of Social Services, and the LTCO to convene a working group with CDA comprised of stakeholders representing long-term care facility residents, consumer advocates, and long-term care facilities, for the purpose of developing recommendations for long-term care facilities during public health emergencies. The bill required the recommendations to include best practices for family and designated support person visitation policies, including the effects of limiting visitation on the health of long-term care residents.

### **Legislative History:**

This bill was substantively amended in June 2022 and removed from the Committee's jurisdiction.

### **AB-2813 (Santiago) - Long-Term Services and Supports Benefit Program.**

This bill would require the Department of Aging (Department), upon appropriation, in conjunction with an unspecified Board operating under the auspices of the State Treasurer, to establish and administer a Long-Term Services and Supports Benefits Program (Program) with the purpose of providing supportive care to aging Californians and those with physical disabilities. The bill would establish the Long-Term Services and Supports Benefit Program Fund (Fund) and would require the Department and the Board to administer the Program using proceeds from the Fund. The bill would require an individual to have paid into the Fund for an unspecified number of years to be eligible to receive benefits pursuant to the Program. The bill would authorize the maximum amount of benefit available to an eligible individual to exceed the amount the individual contributed into the fund. The bill would authorize eligible individuals to use the benefits pursuant to the Program for specified services, including in-home support services support for an individual in need of assistance for at least 2 activities of daily living. The bill would require the Department to ensure that all vendors and providers of services pursuant to the program have not taken any actions to actively discourage their employees' membership in labor organizations or collective bargaining.

**Status:** Assembly-Died - Aging and Long Term Care

## **Safety**

### **AB-636 (Maienschein) - Financial Abuse of Elder or Dependent Adults.**

This bill authorized information relevant to the incident of elder or dependent adult abuse to be given to a federal law enforcement agency, under certain circumstances, for the sole purpose of investigating a financial crime committed against the elder or dependent adult and would authorize the information to be given to a local code enforcement agency for the sole purpose of investigating an unlicensed care facility where the health and safety of an elder or dependent adult resident is at risk.

**Status:** Chapter 621, Statutes of 2021

#### **Legislative History:**

Assembly Floor - (77 - 0)	Senate Floor - (39 - 0)
Assembly Floor - (73 - 0)	Sen Judiciary - (11 - 0)
Asm Aging and Long Term Care - (7 - 0)	Sen Public Safety - (4 - 0)

## [AB-695 \(Arambula\) - Elder and Dependent Adults](#)

Existing law establishes the Home Safe Program (Program), which requires the State Department of Social Services (DSS) to award grants to counties, tribes, or groups of counties or tribes, that provide services to elder and dependent adults who experience abuse, neglect, and exploitation and otherwise meet the eligibility criteria for adult protective services, for the purpose of providing prescribed housing-related supports to eligible individuals.

This bill expanded the list of housing-related supports and services to include services to support housing transitions.

Existing law requires counties that receive grants under the Program to provide matching funds, and requires grantees applying for additional grant money to provide a description on how those requested funds are to be used.

This bill provided that, on and after the effective date of the bill, grantees are not required to match any funding provided that is above the base level of funding provided in the Budget Act of 2020. The bill would instead require grantees that administer a Home Safe Program to submit a streamlined application and program update to the department in lieu of an application.

The Elder Abuse and Dependent Adult Civil Protection Act (Act) establishes various procedures for the reporting, investigation, and prosecution of elder and dependent adult abuse. Existing law requires each county welfare department to establish and support a system of protective services for elderly and dependent adults who may be subjected to neglect, abuse, or exploitation or who are unable to protect their own interests, and requires each county to establish an adult protective services program. The Act requires each county's adult protective services program to include specific policies and procedures, including provisions for emergency shelter or in-home protection. Existing law applies the definitions of the Act on provisions relating to the county adult protective services program. For purposes of the Act, existing law defines an "elder" as a person who is 65 years of age or older and a "dependent adult" as an adult between 18 and 64 years of age who has specific limitations.

This bill additionally required the policies and procedures to include provisions for homeless prevention and longer term housing assistance and support through the Program. By imposing additional duties on counties in the administration of their adult protective services programs, this bill imposed a state-mandated local program. The bill authorized a county that receives grant funds under the Program to, as part of providing case management services to elder or dependent adults who require adult protective services, provide housing assistance to those who are homeless or at risk of becoming homeless. The bill authorized a county adult protective services agency and the Program to refer an individual with complex or intensive needs to the appropriate state or local agencies for services that support the individual's safety goals.

For the purposes of investigating or providing services under an adult protective services program, this bill instead defined an "elder" as a person who is 60 years of age or older and a "dependent adult" as a person who is between 18 and 59 years of age, inclusive, and has those

specific limitations. The bill also specifically identified that a person in that age range with traumatic brain injuries or cognitive impairments is a dependent adult. By requiring counties to provide services to additional individuals, and by expanding the scope of a crime under the Act, this bill imposed a state-mandated local program.

This bill required DSS to convene a workgroup to develop recommendations to create or establish a statewide adult protective services case management or data warehouse system. The bill required the department to submit the recommendations to the Legislature by November 1, 2022.

**Status:** Senate-Died – Appropriations

**Legislative History:**

Assembly Floor - (78 - 0)	Sen Appropriations - (7 - 0)
Asm Appropriations - (16 - 0)	Sen Judiciary - (11 - 0)
Asm Aging and Long Term Care - (7 - 0)	Sen Human Services - (5 - 0)

## Senior Services

### **[AB-774 \(Voepel\) - Senior Legal Services.](#)**

Existing law requires the California Department of Aging (Department) to establish a task force of certain members to study and make recommendations to the Legislature on the improvement of legal services delivery to senior citizens in California by exploring specified matters, including ways to ensure uniformity in the provision of legal services throughout the state and the possible establishment of a statewide legal hotline for seniors. Existing law requires the task force to report and make its recommendations to the Legislature on or before September 1, 2002.

This bill required the Department to establish a similar task force to assess the implementation of the recommendations made pursuant to the above-mentioned provisions, make additional recommendations by exploring the same matters explored by the initial task force, and to report the assessment and make its recommendations to the Legislature on or before September 1, 2023.

**Status:** Assembly-Died - Aging and Long Term Care

### **[SB-1342 \(Bates\) - Aging Multidisciplinary Personnel Teams.](#)**

This bill would specifically authorize an area agency on aging or a county, or both, to establish an aging multidisciplinary personnel team (Team), as defined, with the goal of facilitating the

expedited identification, assessment, and linkage of older adults to services and to allow provider agencies and members of the Team to share confidential information, as specified, for the purpose of coordinating services. Under the bill, any discussion relative to the disclosure or exchange of the information or writings during a Team meeting would be confidential and testimony concerning that discussion would not be admissible in any criminal, civil, or juvenile court proceeding.

The bill would require the sharing of information permitted under these provisions to be governed by protocols developed by each area agency on aging or county, as specified, and would require each area agency on aging or county to provide a copy of its protocols to the California Department of Aging. The bill would require the protocols to include a requirement that, unless otherwise permitted by law, an area agency on aging or county obtain the affirmative consent of an individual or their representative before the individual's information is shared and a requirement to notify an individual, among other things, that they may opt out of sharing information at any time.

This bill would authorize the Team to designate qualified persons to be members of the Team for a particular case and would require every member who receives information or records regarding adults and families in their capacity as a member of the team to be under the same privacy and confidentiality obligations and subject to the same confidentiality penalties as the person disclosing or providing the information or records. The bill would also require the information or records to be maintained in a manner that ensures the maximum protection of privacy and confidentiality rights.

**Status:** Chapter 621, Statutes of 2022

**Legislative History:**

Assembly Floor - (76 - 0)	Senate Floor - (40 - 0)
Asm Appropriations - (16 - 0)	Senate Floor - (39 - 0)
Asm Aging and Long Term Care - (7 - 0)	Sen Appropriations - (7 - 0)
	Sen Appropriations - (6 - 0)
	Sen Judiciary - (11 - 0)
	Sen Human Services - (5 - 0)

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