SB-228 Master Plan on Aging. (2019-2020)

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Senate Bill No. 228

CHAPTER 742

An act to add Chapter 14 (commencing with Section 9850) to Division 8.5 of the Welfare and Institutions Code, relating to aging.

[Approved by Governor October 11, 2019. Filed with Secretary of State October 11, 2019.]

LEGISLATIVE COUNSEL'S DIGEST

SB 228, Jackson. Master Plan on Aging.

Existing law requests the University of California to compile specified information, including a survey of existing resources throughout California's governmental and administrative structure that are available to address the needs of an aging society. Existing law requires the Secretary of the California Health and Human Services Agency, based upon the information compiled by the University of California and with the consultation or advice of specified entities, to develop a statewide strategic plan on aging for long-term planning purposes and submit the plan to the Legislature.

By executive order, the Governor ordered that a master plan for aging be developed and issued to serve as a blueprint to implement strategies and partnerships that promote healthy aging and prepare the state for upcoming demographic changes. The executive order requires the Secretary of the California Health and Human Services Agency to convene a Cabinet-level Workgroup for Aging to advise the secretary in developing and issuing the master plan.

This bill would require the secretary, in coordination with the Director of the California Department of Aging, to lead the development and implementation of the master plan established pursuant to that executive order. The bill would require the secretary and the director, with the assistance of the workgroup, to work with specified agencies, as needed, to identify policies, efficiencies, and strategies necessary to implement the master plan. The bill would also require the workgroup to solicit input and gather information to assist with the implementation of the master plan. The bill would require the department to submit a report to the Governor and the Legislature by October 1, 2020, and submit updates annually thereafter, until October 1, 2030, regarding the master plan.

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: no

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. (a) The Legislature finds and declares all of the following:

(1) The Public Policy Institute of California estimates that California's older population will nearly double by 2030, bringing an increase of 4 million people over 65 years of age.

(2) The implications of the population aging impact not only older adults and people with disabilities, but also their families, local communities, and the state.

(3) Twenty percent of California's older adults live in poverty, and this number is expected to increase with the rise in aging adults in the state.

(4) Ninety percent of older adults would like to age in their homes, but often lack access to the necessary services and supports to do so.

(5) The cost of long-term services and supports (LTSS) is unaffordable for most Californians.

(6) Across the state, older adults, people with disabilities, and families rely on services provided through multiple state entities, including, but not limited to, the State Department of Health Care Services, the State Department of Social Services, the California Department of Aging, the Department of Rehabilitation, the Department of Transportation, the Department of Housing and Community Development, the Department of Insurance, the Department of Veterans Affairs, and the State Department of Education.

(7) Despite the programs and services administered by a range of state departments, families struggle to weave together services and to finance care in the hopes of helping loved ones remain at home. Individuals and their families do not know where to turn for help or how to pay for services. When help is finally found, many people are left bouncing between programs with little assurance that their needs will be met.

(8) California cannot meet the workforce needs of older adults and people with disabilities, with a growing shortage of paraprofessionals and professionals needed to provide culturally competent care to an increasingly diverse population.

(9) The AARP Public Policy Institute reports that in 2015, California's 4.5 million unpaid family caregivers provided approximately $57 billion worth of unpaid care, yet often without the necessary training and support.

(10) As the population ages, the demand for health care, long-term services and supports, affordable housing, accessible transportation, oral health care, mental health care, and other services will continue to outpace supply unless there is intentional leadership and action.

(11) Numerous entities have issued reports calling for system change, including the Little Hoover Commission in both 1996 and 2011, the Strategic Planning Framework for an Aging Population, a report prepared in response to Chapter 948 of the Statutes of 1999, the Assembly Committee on Aging and Long-Term Care in 2006, and the Senate Select Committee on Aging and Long-Term Care in 2015. Despite hopeful intentions, none of these efforts led to meaningful change.

(12) The 2015 report by the Senate Select Committee on Aging and Long-Term Care, "A Shattered System: Reforming Long-Term Care in California" identified a number of system challenges including system fragmentation, lack of access to services, workforce challenges and cultural competency, and a crumbling infrastructure.

(b) It is the intent of the Legislature in enacting this act that a Master Plan for an Aging California is developed that empowers all Californians, including older adults and people with disabilities, to age with dignity, choice, and independence.

SEC. 2. Chapter 14 (commencing with Section 9850) is added to Division 8.5 of the Welfare and Institutions Code, to read:

CHAPTER 14. Master Plan for Aging in California

9850. (a) The Secretary of the California Health and Human Services Agency, in coordination with the Director of the California Department of Aging, shall lead the development and implementation of the master plan for aging established pursuant to Executive Order N-14-19.

(b) The Master Plan for Aging Stakeholder Advisory Committee established pursuant to Executive Order N-14-19 shall include representation from older Californians, adults with disabilities, local government, health care providers, health plans, employers, community-based organizations, foundations, academic researchers, and organized labor.

(c) The secretary and the director shall, with the assistance of the Cabinet-level Workgroup for Aging established pursuant to Executive Order N-14-19, work with the following state agencies, as needed, to identify policies, efficiencies, and strategies necessary to implement the master plan:

(1) Business, Consumer Services, and Housing Agency.

(2) Government Operations Agency.

(3) California Health and Human Services Agency.

(4) Labor and Workforce Development Agency.

(5) Transportation Agency.

(d) The workgroup shall solicit input from stakeholders and gather information on the impact of California's aging population to assist with the implementation process of the master plan.

(e) The workgroup shall ensure the master plan is centered on all of the following core values:

(1) Equity. The master plan shall seek to enable older adults and people with disabilities to access long-term services and supports (LTSS) in accordance with individual needs and preferences, to the extent feasible, regardless of individual health or functional status, income, race, religion, or other socioeconomic factors.

(2) Person-centered. The master plan shall seek to enable older adults and people with disabilities to remain in their own homes and communities as long as possible or desired while receiving services and supports that are in line with their individual needs and preferences.

(3) Efficiency. The master plan for aging shall seek to reduce unnecessary costs and reduce duplication through streamlined service delivery.

(4) System rebalancing. The master plan shall prioritize the delivery of home- and community-based services in a home setting as alternatives to institutionalization, in accordance with individual needs, desires, and preferences.

(5) Coordination and integration. The master plan shall seek to streamline service delivery through coordinated and integrated systems of care.

(6) Access. The master plan shall ensure access to health care and LTSS in all communities across the state, including rural, suburban, and urban settings.

(f) (1) (A) The California Department of Aging shall submit a report to the Governor and the Legislature by October 1, 2020, identifying ways to improve the organization and structure of the California Department of Aging in order to effectively implement and administer the master plan. The report shall include, but not be limited to, identification of statutory and regulatory changes that are needed to implement the master plan.

(B) The California Department of Aging shall submit updates to the Governor and the Legislature annually beginning October 1, 2021, through October 1, 2030, inclusive. The updates shall include, but are not limited to, the status of the processes described in paragraph (1) and updates on data metrics, best practices, and model policies.

(2) A report to be submitted pursuant to paragraph (1) shall be submitted in compliance with Section 9795 of the Government Code.