

DEPARTMENT OF DISABILITY AND AGING SERVICES  
COMMISSION (DAS)  
MINUTES APRIL 7, 2021

CALL TO ORDER AND ROLL CALL

Commissioner Martha Knutzen called the meeting to order at 10:05 AM.

ROLL CALL/COMMISSION SECRETARY BRIDGET BADASOW

Present: Martha Knutzen, Janet Y. Spears, Sascha Bittner, Michelle Carrington, Wanda Jung, Nelson Lum and Barbara Sklar

DAS Executive Director Shireen McSpadden was present.

A Motion to remove Item G from today's agenda:

The motion was unanimously approved.

COMMUNICATIONS:

Commission Secretary Bridget Badasow provided instructions for any members of the public that would like to submit a public comment to the DAS Commission.

APPROVAL OF MINUTES:

No public comment

A motion to approve the March 3, 2021 DAS Commission meeting Minutes.

The motion was unanimously approved.

EXECUTIVE DIRECTOR REPORT/Shireen McSpadden

Executive Director McSpadden reported on local, state and federal business regarding older adults and adults with disabilities.

EMPLOYEE OF THE MONTH

Executive Director McSpadden and the DAS Commission, honored Theresa Rey from the DAS Office of In-Home Support Services. Ms. McSpadden thanked Ms. Rey for her hard work and dedication.

ADVISORY COUNCIL REPORT/Diane Lawrence

**1) Action Item: Is there a Connector Program in Commissioner Carrington's District?**

- a) No, it does not but it does have a robust Senior Center. From the CLC website, the

neighborhoods with Connector programs: "Most of these neighborhoods don't have a senior center or community center in walking distance. Instead, neighbors meet at local churches, parks, and in each other's homes."

- b) The neighborhoods with Connector programs:
  - i) Cayuga
  - ii) Miraloma Park
  - iii) Merced Extension Triangle
  - iv) Inner Sunset
  - v) Midtown Terrace and Sunnyside are new programs that have just come on line.
  - vi) Different models and don't have senior centers
  - vii) Western Addition
  - viii) Sunset-Parkside
  - ix) In the planning
  - x) Crocker-Amazon
  - xi) Potrero Hill

## **2) Area Plan Update**

- a) Rose Johns, Adithi Vellore, and Michael Zaugg presented the final update of the Area Agency Plan for the 2021-2024. The plan is a requirement of the Older Americans Act (OAA).
- b) The Council unanimously approved the plan.

## **3) Membership**

### a) Board of Supervisors

- (1) Work continues on filing Supervisor-appointed representatives. Personalized letters are being finalized and will be sent this week.
- (2) Josh Halstead decided not to seek re-appointment.
- (3) One member is working with her supervisor, Supervisor Mandelman on reappointment.
- (4) Districts without a Council Member are:
  - (a) District 1—Chen
  - (b) District 5—Preston
  - (c) District 7—Melgar—unexpired term
  - (d) District 9—Ronan
  - (e) District 10—Walton; Commissioner Carrington reached out to some folks for us but unfortunately to no avail.
  - (f) District 11—Safai—unexpired term

### b) Commission

- i) 3 vacancies and some potential members have been recommended.

**4) Reports from the Field:**

**a) Dignity Fund Update:**

- i) Report on Dignity Fund meeting of March 15:
  - (1) Plans to develop senior housing with the Mayor's Office on Community Development (MOCD)
    - (a) 1000 housing units for seniors over 7 years
    - (b) These units will be across multiple building projects and over multiple years.
    - (c) The funding is attached to tax revenue and real estate development.

**5) LGBTQ Updates**

**a) LGBTQ Adult Survey**

- i) The target for the survey was 500 and that goal was reached and exceeded.
- ii) The responding group was very diverse
- iii) A report out will be presented at our April meeting on the 21<sup>st</sup>.

**b) Telehealth Pilot Project**

- i) LGBTQ older adults and telehealth programs is moving through the first stage and is looking for funding
- ii) Covid 19-Health pilot project
  - (1) Honoring diverse elders
  - (2) \$5 million in grants through the state for training
  - (3) They have applied to the City as well for grants.

**6) Unhoused Seniors Ad Hoc Group Report** focusing on seniors.

- a) The Ad Hoc group presented their first report.
- b) Their top priorities are
  - i) Case management
  - ii) Housing Case Management
  - iii) Food
- c) A series of interviews have been done, outreach to UC Berkeley for data and additional interviews planned.
- d) They are looking at shelters, Navigation Centers and SIP Hotels.
  - i) Information has been difficult to obtain.
  - ii) Need to take a whole person approach to the unhoused. Some of whom have run out of money.
  - iii) Regular updates are planned and like our previous Pedestrian Safety Ad Hoc Committee this is informational.

**7) Old Business and Updates:**

**a) Site Visits**

- i) A new coordinator is in place and we are awaiting an updated list of sites.
- ii) We are planning on a 6-month test of virtual site visits while sites are not fully open.

**b) Education Committee**

- i) A meeting is to be scheduled to re-engage our collaboration with DAS.
- ii) There is a meeting scheduled for April 12, 2021

**c) Announcements**

- d) Senior Power, District 4 will be starting up their in-person meetings again at SENIOR POWER PRESENTS A SUNSET SENIOR SHOWCASE an Open Air Happening in A Tent**  
Please come & join us: April 8, 2021, from 9A-1P @ Sunset Wellness Mercantile 37th Ave between Ortega & Pacheco. Featuring  
Watercolors by local artist James  
Succulents by gardener Les  
Free & Everyone Welcome. Drop in anytime.  
Masks required. Distance spacing requested.

**8) Next meeting:** Wednesday, April 21, 2021.

**9) Senior Rally Day:** May 4, 2021

JOINT LEGISLATIVE COMMITTEE:

- 1) There were additional bills to track and many are focused on Master Plan on Aging recommendations
- 2) We reviewed 43 bills at this meeting; the bills are split into 3 buckets
- 3) The blue highlights include bills that Justice in Aging has identified as addressing the goals put forward by the Master Plan for Aging (MPA) but the list we discussed were not all of the MPA bills, some are Advisory Council bills to track.
- 4) The bills that have yellow highlights are all the other bills that have been added to our list that have not been discussed.
- 5) There are other bills being tracked by CWDA, CDA, CDSS, MPA, but they have not been included because they primarily they fall outside the scope of DAS.
- 6) For Reference—Master Plan Goals
  - a) Goal One: Housing for all Ages and Stages
  - b) Goal Two: Health Reimagined
  - c) Goal Three: Inclusion and Equity, Not Isolation
  - d) Goal Four: Caregiving that Works
  - e) Goal Five: Affording Housing

7) Highlighted bills were discussed at the meeting.

Bill Number	Sponsor	Summary	Status	Organization & Support
AB 123	Gonzalez	<p><b>Paid Family Leave: Weekly Benefit Amount</b>            Existing law defines “weekly benefit amount” for purposes of both employee contributions and benefits under this program to mean the amount of weekly benefits available to qualifying disabled individuals pursuant to unemployment compensation disability law, calculated pursuant to specified formulas partly based on the applicable percentage of the wages paid to an individual for employment by employers during the quarter of the individual’s disability base period in which these wages were highest, but not to exceed the maximum workers’ compensation temporary disability indemnity weekly benefit amount established by the Department of Industrial Relations.</p> <p>This bill would revise the formula for</p>	<p>1/11/21 Referred to Com on Insurance            1/11/21 Read first time            12/19/21 From printer. May be heard in committee Jan. 18</p>	MPA Goal 4

		<p>determining benefits available pursuant to the family temporary disability insurance program, for periods of disability commencing after January 1, 2022, by redefining the weekly benefit amount to be equal to 90% of the wages paid to an individual for employment by employers during the quarter of the individual's disability base period in which these wages were highest, divided by 13, but not exceeding the maximum workers' compensation temporary disability indemnity weekly benefit amount established by the Department of Industrial Relations.</p> <p>By providing for the deposit of additional contributions in, and by authorizing an increase in disbursements from, the Unemployment Compensation Disability Fund, this bill would make an appropriation.</p>		
AB 234	Ramos	<p><b>Office of Suicide Prevention</b> Existing law authorizes the State Department of Public Health to establish the Office of Suicide Prevention within the department,</p>	<p>3/15/21 Set for Hearing 3/23/21 1/28/21 Referred to Com. On Health 1/13/21 From printer: May be heard in</p>	<p><b>Advisory Council</b></p>

		and requires the office to perform specified duties, including providing information and technical assistance to statewide and regional partners regarding best practices on suicide prevention policies and programs and reporting on progress to reduce rates of suicide, and authorize the office to apply for and use federal, state, and foundation grants. This bill would remove the limitation that, should the office be established, all duties and responsibilities of the office be carried out using existing staff and resources.	committee Feb. 12 1/12/21 Read first time. To print.	
AB 279	Muratsuchi	<b>Intermediate care facilities and skilled nursing facilities.</b> (1) Existing law requires the State Department of Public Health to license, inspect, and regulate intermediate care facilities (ICF) and skilled nursing facilities (SNF). Existing law generally requires an ICF or SNF to comply with certain procedures and disclosures when transferring ownership or management of the facility, as specified. Existing law imposes	1/28/21 Referred to Com. on HEALTH. 1/22/21 From printer. May be heard in committee February 21. 1/21/21 Read first time. To print.	AA Advocates for Nursing Home Reform MPA Goal 2

		<p>criminal penalties on a person who violates the requirements imposed on these facilities. This bill would prohibit the owner of an ICF or SNF from ceasing to deliver or making significant changes to the nature of residential care services, or from transferring a resident to another facility, during any declared state of emergency relating to the coronavirus disease 2019 (COVID-19), except if the owner files for bankruptcy. The bill would require, upon termination of the same type of state of emergency, the owner of an ICF or SNF to issue a 6- month advance notice of any proposed sale or termination of the licensed operation of the facility to each resident before the sale or termination goes into effect. The bill would also prohibit during the same type of state of emergency, any changes in all conditions for the sale of assets imposed by the Attorney General, except if the owner of an ICF or SNF files for bankruptcy. By</p>		
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		expanding the requirements and prohibitions imposed on a licensee of ICF or SNF, the failure to comply with would be a crime, this bill would impose a state-mandated local program. The bill would repeal these provisions on January 1, 2026. This bill contains other related provisions and other existing laws.		
AB 457	Santiago	<p><b>Telehealth Patient Bill of Rights</b></p> <p>Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Under existing law, Medi-Cal services may be provided pursuant to contracts with various types of managed care health plans, including through a county organized health system. Under existing law, in-person contact between a health care provider and a patient is not required under the Medi-Cal program for</p>	<p>2/18/21 Referred to Com on Health</p> <p>2/9/21 From printer. May be heard in committee March 11</p> <p>2/8/21 Read first time. To print.</p>	<p>CSL Sponsored</p> <p>MPA Goal 2</p>

		<p>services appropriately provided through telehealth.</p> <p>Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a contract issued, amended, or renewed on or after January 1, 2021, between a health care service plan or health insurer and a health care provider to require the plan or insurer to reimburse the provider for the diagnosis, consultation, or treatment of an enrollee, subscriber, insured, or policyholder appropriately delivered through telehealth services on the same basis and to the same extent as the same service through in-person diagnosis, consultation, or treatment.</p> <p><b>This bill would create</b></p>		
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		<p>the TeleHealth Patient Bill of Rights, which would, among other things, protect the rights of a patient using telehealth to be seen by a health care provider with a physical presence within a reasonable geographic distance from the patient's home, unless specified exceptions apply. The bill would require a health plan, as defined, to comply with the requirements in the Telehealth Patient Bill of Rights and to provide written notice to patients of all their rights under the Telehealth Bill of Rights. The bill would also exempt a health care service plan or a health insurer from the existing telehealth payment parity provisions for any interaction where the health care provider is not located within a reasonable geographic distance of the patient's home, unless that provider holds specialized knowledge not available in the patient's region. Because a willful violation of the bill's requirements relative to health care service plans would be a crime,</p>		
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		<p>the bill would impose a state-mandated local program.</p> <p>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.</p> <p>This bill would provide that no reimbursement is required by this act for a specified reason.</p>		
AB 470	Carrillo	<p><b>Medi-Cal: Eligibility</b></p> <p><i>This bill would prohibit the use of resources, including property or other assets, to determine eligibility under the Medi-Cal program to the extent permitted by federal law, and would require the department to seek federal authority to disregard all resources as authorized by the flexibilities provided pursuant to federal law. The bill would authorize the department to implement this prohibition by various means, including provider bulletins, without taking regulatory authority. By January 1, 2023, the bill would require</i></p>	<p>3/18/21 From committee chair with author's amendments: Amend, and re-refer to Com. On Health. Read 2<sup>nd</sup> time and amended.</p> <p>3/18/21 Referred to Com on Health</p> <p>2/9/21 From printer. May be heard in committee March 11</p> <p>2/8/21 Read first time. To print.</p>	<p><b>Advisory Council</b></p> <p>(Self Sufficiency Tracking)</p>

		<p><i>the department to adopt, amend, or repeal regulations on the prohibition, and to update its notices and forms to delete any reference to limitations on resources or assets. Because counties are required to make Medi-Cal eligibility determinations, and this bill would expand Medi-Cal eligibility, the bill would impose a state-mandated local program. With respect to the prohibition on resources, the bill would make various conforming and technical changes to the Medi-Cal Act. 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 would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.</i></p>		
<b>AB 665</b>	Garcia	<b>RCFE:</b>	<b>Basic</b>	2/25/21 Referred

		<p><b>Services: Internet Access</b></p> <p>This bill would add to basic services required for a licensed residential care facility for the elderly, by requiring a facility that has internet service for business administration or entertainment purposes to provide at least one common internet access tool with microphone and camera functions, to enable residents to participate in virtual visits or meetings in a manner that allows for discussion of personal or confidential information. Because a violation of the bill would be a misdemeanor, the bill would create a state-mandated local program.</p>	<p>to Com on Human services 2/13/21 From printer. May be heard in committee March 15. 2/12/21 Read first time. To print.</p>	
AB 695	Arambula	<p><b>Elder and Dependent Adults</b></p> <p>Existing law authorizes, in certain circumstances, an elder or dependent adult to be taken into temporary emergency protective custody. For the purposes of the above-described</p>	<p>3/10/21 In committee: Set first hearing. Hearing canceled at the request of author. 3/2/21 Set for hearing on 4/6/21 9am 2/25/21 Referred</p>	MPA Goal 3

		<p>provisions, 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 would instead define 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 and has those specific limitations. The bill would also specifically identify that a person in that age range with traumatic brain injuries or cognitive impairments is a dependent adult. By requiring counties to provide services under the above described provisions for additional individuals, and by expanding the scope of a crime under the Elder Abuse and Dependent Adult Civil Protection Act, this bill would impose a state-mandated local program.</p> <p>(2) Existing law establishes the Home Safe Program, which requires the State Department of Social Services to award grants to counties, tribes, or groups of counties or tribes, that provide services to elder and dependent adults who</p>	<p>to Com on Aging &amp; LTC 2/17/21 From printer. May be heard in committee March 19. 2/16/21 Read first time. To print.</p>	
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		<p>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.</p> <p>This bill would expand the list of housing-related supports and services to include services to support housing transitions.</p> <p>Existing law requires counties that receive grants under the Home Safe Program to provide matching funds.</p> <p>This bill would provide 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.</p> <p>(3) The Elder Abuse and Dependent Adult Civil Protection Act requires, as part of the procedures described in paragraph (1), each county to establish an adult protective services program that includes specific policies and procedures, including provisions for emergency shelter or in-home protection.</p> <p>This bill would also require the policies and procedures to include</p>		
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		<p>provisions for homeless prevention and longer term housing assistance and support through the Home Safe Program. The bill would authorize a county that receives grant funds under the Home Safe 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. If an elder or dependent adult comes to the attention of adult protective services because they are homeless, and an investigation indicates that they are homeless because they have a serious mental illness or substance use disorder, the bill would require the county to refer the adult to the appropriate state or local agency to receive services and supports. By imposing additional duties on counties in the administration of their adult protective services programs, this bill would impose a state-mandated local program. The bill would require the department to convene a workgroup to develop</p>		
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		<p>recommendations to create or establish a statewide adult protective services case management or data warehouse system. The bill would require the department to submit the recommendations to the Legislature by November 1, 2022.</p> <p>The bill would establish the Adult Protective Services FAST/Forensic Center Grant Program, to be administered by the department, for the purpose of awarding grants to counties to create, enhance, and maintain a FAST or forensic center. The bill would define, for these purposes, a FAST as a team that handles cases involving financial abuse and a forensic center as a cross-disciplinary group of professionals who collectively review, make recommendations, and provide assistance on the most complex cases of elder and dependent adult abuse and neglect.</p> <p>(4) 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.</p> <p>This bill would provide</p>		
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		that no reimbursement is required by this act for specified reasons		
AB 774	Voepel	<p><b>Senior Legal Services</b> Existing law requires the California Department of Aging 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.</p> <p>This bill would require 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</p>	<p>3/2/21 Set for hearing on 4/6/21 9am 2/25/21 Referred to Com on Aging &amp; LTC 2/17/21 From printer. May be heard in committee March 19. 2/16/21 Read first time. To print.</p>	<p>CWDA; Justice in Aging – related to MPA goal 1</p>

		report the assessment and make its recommendations to the Legislature on or before September 1, 2023.		
AB 848	Calderon	<b>Medi-Cal: Long Term Care: Personal Needs Allowance</b> Increases the personal needs allowance from \$35 to \$80 per month and annually adjusts the allowance by the same percentage as the Consumer Price Index.	3/15/21 Set for Hearing 3/23/21 2/25/21 Referred to Com on Health 2/18/21 From printer. May be heard in committee March 20. 2/17/21 Read first time. To print.	MPA Goal 3
AB 849	Reyes	<b>Skilled Nursing Facilities: Intermediate Care Facilities: Liability</b> Existing law authorizes a current or former resident or patient of a skilled nursing facility or intermediate care facility, as defined, to bring a civil action against the licensee of a facility who violates any of specified rights of the resident or patient or any other right provided for by federal or state law or regulation. Existing law makes the licensee liable for up to \$500.  This bill would make the licensee liable for up to \$500 per violation.	2/25/21 Referred to Com on Health 2/18/21 From printer. May be heard in committee March 20 2/17/21 Read first time. To print.	CSL Sponsored MPA Goal 2

<p>AB 911/SB 515</p>	<p>Nazarian/Pan</p>	<p><b>Long-Term Services and Supports</b> Existing law requires the Secretary of CA and the Director of the Dept. of Aging, with the assistance of the MPA workgroup, to work with specified agencies, as needed, to identify policies, efficiencies, and strategies necessary to implement the master plan. Existing law requires the workgroup to solicit input and gather information to assist with the implementation of the master plan. This bill 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 3 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,</p>	<p>3/2/21 Set for hearing on 4/6/21 9am 2/25/21 Referred to Coms on Aging &amp; LTC and Human Services 2/18/21 From printer. May be heard in committee March 20 2/17/21 Read first time. To print.</p>	<p>MPA Goal 2</p>
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		upon appropriation, finance long-term services and supports for eligible individuals. The bill would require the Long Term Supports and Services Subcommittee of the Master Plan on Aging to provide ongoing advice and recommendations to the board.		
AB 1243	Blanca Rubio	<p><b>Protective Orders: Elder and dependent Abuse</b></p> <p>This bill would require an action seeking a protective order to be heard in the probate or family division of the superior court. The bill would include within the definition of protective order an order enjoining a party from isolating an elder or dependent adult. The bill would require certain requirements to be met for that order to be issued, including a showing by a preponderance of the evidence that the respondent's past act or acts of isolation of the elder or dependent adult prevented contact with the interested party and that the elder or dependent adult desires contact with the interested party. The bill would authorize the</p>	<p>3/4/21 Referred to Com Jud.</p> <p>2/22/21 Read first time.</p> <p>2/20/21 From printer. May be heard in committee March 22.</p> <p>2/19/21 Introduced. To print.</p>	MPA Goal 2

		order to specify the actions to be enjoined, including enjoining the respondent from preventing an interested party from in-person or remote online visits with the elder or dependent adult. The bill would also include within the definition of protective order an order that specific debts were incurred as the result of financial abuse of the elder or dependent adult.		
AB 1300	Voepel	<p><b>Residential Care Facilities for the Elderly: Electronic Monitoring</b></p> <p>This bill would enact the Electronic Monitoring in Residential Care Facilities for the Elderly Act to authorize the use of electronic monitoring devices either inside a resident's room by a resident or in certain areas of a facility by the facility under specified conditions. For the use of a personal electronic monitoring device inside a resident's room by a resident, the bill would require, among other things, the resident or the resident's representative, as defined, to provide the</p>	<p>3/4/21 Referred to Coms on Human Services and P. and C.P.</p> <p>2/22/21 Read first time.</p> <p>2/20/21 From printer. May be heard in committee March 22.</p> <p>2/19/21 Introduced. To print.</p>	AB 1300

		<p>facility with a completed notification and consent form, as specified, that includes the consent of the resident's roommate, if any. The bill would also require the resident or the resident's representative to post a sign at the entrance to the resident's room stating that the room is monitored electronically. For the use of a facility electronic monitoring device, the bill would require the facility to, among other things, post signage at all entrances and exits that provides notice of electronic monitoring, archive the electronic monitoring digital data for 365 days, and provide the department access to the data upon 24 hours' notice. By expanding the duties of licensed facilities under the act with regard to authorizing residents and facilities to conduct electronic monitoring under these conditions, the bill would expand an existing crime, thereby imposing a state-mandated local program.</p> <p>The bill would make it a misdemeanor to knowingly hamper, obstruct, tamper with,</p>		
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		or destroy a personal electronic monitoring device or a facility electronic monitoring device or the recordings made therefrom, except as provided. The bill would make it a felony to knowingly hamper, obstruct, tamper with, or destroy a personal electronic monitoring device or a facility electronic monitoring device or the recordings made therefrom in the commission of, or in the attempt to conceal the commission of, a felony. By creating new crimes, the bill would impose a state-mandated local program.		
<b>SB 91</b>	Com Budget & Fiscal Review	Extend eviction moratorium until June 30, 2021. Provide rental assistance for tenants facing financial hardship due to COVID.	1/29/21 Chaptered by Secretary of State 1/29/21 Approved by Governor 1/28/21 Enrolled and presented to Governor 1/28/21 Assembly amendments concurred 1/28/21 In Senate. Concurrence in Assembly amendments pending	CSL (support) MPA Goal 2
<b>SB 256</b>	Pan	<b>Medi-Cal: Covered Benefits</b>	2/22/21 Joint Rule 55 suspended.	CSL Support (Self

		<p>This bill would require those mandatorily developed health-plan- and county-specific rates for specified Medi-Cal managed care plan contracts to include in lieu of services and settings provided by the Medi-Cal managed care plan. The bill would require each Medi-Cal managed care plan to disclose the availability of in lieu of services on its internet website and its beneficiary handbook, and to disclose to the department specified information on in lieu of services that are plan specific, including the number of people receiving those services. The bill would require the department to publish that information on its internet website.</p> <p>This bill would, to the extent that federal financial participation is available and any necessary federal approvals have been obtained, expand the schedule of benefits under the Medi-Cal program to include enhanced care management if the service is provided in person to a beneficiary and, at a minimum, the</p>	<p>2/22/21 Art. IV. Sec 8(a) of the Constitution dispensed with. 2/3/21 Referred to Com on Health 1/27/21 From printer. May be acted upon on or after Feb 26.</p>	<p>Sufficiency tracking)</p>
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		<p>service includes coordinating primary, acute, behavioral, oral, and long-term services and supports for that person. The bill would authorize the department to implement these provisions by various means, including all-county letters or provider bulletins, without taking regulatory action. The bill would require the department to adopt, by July 1, 2024, regulations on these provisions, and, commencing January 1, 2023, to provide a status report to the Legislature on a semiannual basis until regulations are promulgated. The bill would make technical, nonsubstantive changes to provisions on the Medi-Cal schedule of benefits.</p>		
SB 258	Laird	<p><b>Aging</b> Existing law, the Mello-Granlund Older Californians Act, establishes the California Department of Aging 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</p>	<p>3/10/21 From committee: Do pass and re-refer to Com on APPR. Re-referred to APPR 2/23/21 Set for Hearing March 9 2/22/21 Joint Rule 55 suspended. (Ayes 32. Noes 4) 2/22/21 Art. IV Sec. 8(a) of the Constitution dispensed with 2/3/21 Referred to Com. On Human</p>	<p>(Self Sufficiency tracking) MPA Goal 2</p>

		<p>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 would revise this definition to include human immunodeficiency virus (HIV) status as a specified noneconomic factor.</p>	Services	
SB 281	Dodd	<p><b>Medi-Cal: California Community Transitions Program</b>  This bill would require the DHCS to provide those services, consistent with Money Follows the Person Rebalancing Demonstration transitions, for individuals who have not resided in the facility for at least 60 days, and would make</p>	<p>3/18/21 Read second time and amended. Re-referred to Com. on APPR.  3/17/21 From committee: Do pass as amended and re-refer to Com. on APPR with recommendation: To consent calendar.  3/3/21 From committee with author’s</p>	CWDA MPA Goal 3

		<p>conforming changes  This bill would instead require the department to provide those services for individuals who have not resided in the facility for at least 60 days, and would make conforming changes. <del>The bill would require the department to use federal funds, which are made available through the Money Follows the Person Rebalancing Demonstration, to implement prescribed services, and to administer those services in a manner that attempts to maximize federal financial participation if those services are not reauthorized or if there are insufficient funds.</del> <i>The bill would extend the provision of those services to January 1, 2029, and would extend the repeal date of those provisions to January 1, 2030.</i> This bill would require the department to implement and administer the California Community Transitions program to provide services for qualified beneficiaries who have resided in the facility for 60 days or longer. The bill would</p>	<p>amendments. Read second time and amended. Re-referred to Com. On Health 3/2/21 Set for hearing on 3/17/21 1pm 2/22/21 Joint Rule 55 suspended. 2/22/21 Art. IV. Sec 8(a) of the Constitution dispensed with. 2/10/21 Referred to Com on Health 2/2/21 From printer. May be acted upon or after March 4</p>	
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		<p>require a lead organization to provide services under the program. The bill would require program services to include prescribed services, such as transition coordination services. The bill would authorize a Medi-Cal beneficiary to participate in this program if the Medi-Cal beneficiary meets certain requirements, and would require eligible Medi-Cal beneficiaries to continue to receive program services once they have transitioned into a qualified residence. The bill would require the department to use federal funds, which are made available through the Money Follows the Person Rebalancing Demonstration, to implement this program, and to administer the program in a manner that attempts to maximize federal financial participation if that program is not reauthorized or if there are insufficient funds. <del>The bill would repeal these provisions January 1, 2030.</del></p> <p>This bill would declare</p>		
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		that it is to take effect immediately as an urgency statute.		
<b>SB 591</b>		<p><b>Senior Citizens: Intergenerational Housing Developments</b></p> <p>This bill would, among other things, permit the covenants, conditions, and restrictions to permit the establishment of an intergenerational housing development that includes senior citizens along with caregivers and transition age youths. The bill would define, among other terms, “senior citizen” to mean a person 55 years of age or older for these purposes. The bill would permit the establishment of an intergenerational housing development if (1) at least 80 percent of the occupied dwelling units are occupied by at least one senior citizen, as specified, and up to 20 percent of the occupied dwelling units are occupied by at least one caregiver or transition age youth, as defined, and (2) the development is an affordable rental housing development, as defined, and has received an allocation of low-income housing</p>	<p>3/4/21 Referral to Com on Human Services rescinded because of the limitations placed on committee hearings due to ongoing health and safety risks of COVID virus.</p> <p>3/3/21 Referred to Coms on Jud., Housing, &amp; Human services</p> <p>2/22/21 Joint Rule 55 suspended.</p> <p>2/22/21 Art. IV. Sec. 8(a) of the Constitution dispensed with</p> <p>2/19/21 From printer. May be acted upon after March 21</p>	

		<p>tax credits from the California Tax Credit Allocation Committee. This bill would prohibit a housing facility or community from evicting or terminating the lease of a family with children in order to comply with the requirement that at least 80 percent of the occupied units be occupied by at least one senior citizen.</p>		
SB 648	Hurato	<p><b>Care Facilities</b>  This bill would provide that a resident in an adult residential facility or a residential care facility for the elderly in which at least 75 percent of the residents receive benefits pursuant to the State Supplementary Program for the Aged, Blind, and Disabled is also eligible to receive IHSS following an assessment for IHSS. The bill would authorize an adult residential facility or residential care facility to receive up to 60 hours of IHSS a week and would require an adult residential facility or residential care facility that receives benefits pursuant to those provisions to use the savings derived from IHSS towards certain expenses,</p>	<p>3/3/21 Referred to Com on Human services 2/22/21 Joint Rule 55 suspended. 2/22/21 Art, IV. Sec. 8(a) of the Constitution dispensed with. 2/22/21 Read for the first time 2/22/21 From printer. May be acted upon or after March 24.</p>	MPA Goal 1



		<p>including, among others, facility upkeep or upgrades. By imposing additional administrative duties on local officials administering the IHSS program and by expanding the scope of an existing crime, the bill would impose a state-mandated local program.</p> <p>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.</p> <p>This bill would provide that with regard to certain mandates no reimbursement is required by this act for a specified reason.</p> <p>With regard to any other mandates, this bill would provide that, if the Commission on State Mandates determines that the bill contains costs so mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.</p>		
<b>SB 675</b>	Bogh	<p><b>Property Taxation: Automated Clearing House Payments</b></p> <p><del>This bill would state</del></p>	3/18/21 Re-referred to Com on Gov and F 3/10/21 From	MPA Goal 2

		<p><del>that the Legislature encourages every board of supervisors to establish payment systems authorizing homeowners to pay their real property taxes in monthly installments with an Automated Clearing House Payment system.</del></p> <p><i>This bill would authorize a county board of supervisors to adopt a resolution or ordinance to implement a monthly property tax payment program, which would authorize a homeowner to pay, in monthly installments, their real property taxes on their principal residence, as defined.</i></p>	<p>committee with author's amendments. Read second time and amended. Re-referred to Com on RLS 3/3/21 Referred to Com on RLS 2/22/21 Joint Rule 55 suspended 2/22/21 Art. IV. Sec. 8(a) of the Constitution dispensed with 2/22/21 Read first time</p>	
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**Key Bills to be discussed**

AB 305	Maienschein	<p><b>Veteran Services: Notice</b> Existing law requires every state agency that requests on any written form or written publication, or through its internet website, whether a person is a veteran, to request that information in a specified manner. This bill would delete that requirement, and would instead require specified governmental</p>	<p>2/12/21 Referred to Com on M &amp; VA 1/26/21 From printer. May be heard in committee Feb. 25 1/25/21 Read first time. To</p>	
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		<p>agencies to include, at their next scheduled update, questions on their intake and application forms to determine whether a person is affiliated with the Armed Forces of the United States. The bill would require those agencies, through the intake or application form, to request permission from that person to transmit their contact information to the Department of Veterans Affairs so that the person may be notified of potential eligibility to receive state and federal veterans' benefits.</p> <p>This bill would require the agencies to electronically transmit to the Department of Veterans Affairs specified information regarding each person who has identified that they, or a family member, has served in the Armed Forces of the United States and has consented to be contacted about military, veterans, family member, or survivor benefits. By requiring community college districts to comply with these requirements, this bill would impose a state-mandated local program.</p> <p>This bill would request the Regents of the University of California to comply with the above-described provisions.</p> <p>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 would provide that, if</p>	<p>print.</p>	
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		the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.		
AB 344	Flora	<p><b>IHSS Provider Orientation</b> Existing law provides for the In-Home Supportive Services (IHSS) program, under which qualified aged, blind, and disabled persons receive services enabling them to remain in their own homes. Existing law requires prospective providers of in-home supportive services to complete a provider orientation at the time of enrollment and, at the conclusion of the provider orientation, to sign a specified statement. Existing law requires the county to retain this statement indefinitely in the provider's file.</p> <p>This bill would instead require the county to retain the statement in the provider's file for a period of 7 years.</p>	2/12/21 Referred to Com on Human services 1/29/21 From printer 1/28/21 Read first time. To print	CSL Support
AB 499	Rubio	<p><b>Referral Source for RCFE: Duties</b> (1) The California Residential Care Facilities for the Elderly Act generally requires the State Department of Social Services to license, inspect, and regulate residential care facilities for the elderly 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 licensed residential care facility for the</p>	2/18/21 Referred to Coms on Human Services and Aging & LTC 2/10/21 From printer. 2/9/21 Read first time. To print.	Western Center; Justice in Aging (Self Sufficiency Tracking) MPA Goal 2

		<p>elderly 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 would recast the requirements on a placement agency and its employees to instead be requirements on a referral source, defined to mean a person or entity that provides a referral to a residential care facility for the elderly, as specified. The bill would prohibit a referral source from, among other things, referring a person to a residential care facility for the elderly in which the referral source has an ownership or management interest without a waiver. The bill would require a referral source, before sending a compensated referral to a residential care facility for the elderly, to provide a senior or their representative with specific written, electronic, or verbal disclosures that include, among others, the referral source's privacy policy. The bill would additionally require a compensated referral source to</p>		
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		<p>comply with additional requirements that include, among others, maintaining a minimum amount of liability insurance coverage. The bill would impose 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 would impose a state-mandated local program.</p> <p>(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.</p> <p>This bill would provide that no reimbursement is required by this act for a specified reason</p>		
AB 574	Chen	<p><b>Guardians ad litem: mental illnesses</b></p> <p>Existing law authorizes a court, on its own motion or on request of certain specified persons, to appoint a guardian ad litem in a probate proceeding, as specified, to represent the interests of certain persons, including a minor or an incapacitated person. Existing law prohibits the appointment of a public guardian as a guardian ad litem in a probate proceeding, unless the court finds that no other qualified person is willing to act as a guardian ad litem.</p> <p>Existing law, the Lanterman-Petris-Short Act, provides for the involuntary commitment and treatment of a person who is a danger to themselves or others or who is gravely disabled.</p>	2/18/21 Referred to Coms on Health and Jud 2/12/21 From printer. May be heard in committee March 14 2/11/21 Read first time. To print	

		<p>Existing law also provides for a conservator of the person or estate to be appointed for a person who is gravely disabled. Existing law, for the purposes of involuntary commitment and conservatorship, defines “gravely disabled,” among other things, as a condition in which a person, as a result of a mental health disorder, is unable to provide for the person’s basic personal needs for food, clothing, or shelter.</p> <p>This bill would establish an additional procedure for the appointment of a guardian ad litem for a person who lacks the capacity to make rational informed decisions regarding medical care, mental health care, safety, hygiene, shelter, food, or clothing with a rational thought process due to a mental illness, defect, or deficiency. The bill would authorize certain persons to petition the court for the appointment of a guardian ad litem under these provisions, and would establish the procedures that would govern the filing of a petition, its notice provisions, and court procedures. Under certain circumstances, the bill would require the court to appoint the public defender or private counsel to represent a person who is the subject of a petition.</p>		
AB 580	Rodriguez	<p><b>Emergency Services: Vulnerable Populations</b></p> <p>Existing law, the California Emergency Services Act, establishes, within the office of the Governor, the Office of Emergency Services (OES)</p>	2/18/21 Referred to Com on E.M. 2/12/21 From printer. May be heard in committee	

	<p>under the supervision of the Director of Emergency Services. Existing law makes OES responsible for addressing natural, technological, or manmade disasters and emergencies, including activities necessary to prevent, respond to, recover from, and mitigate the effects of emergencies and disasters to people and property.</p> <p>Existing law requires OES to establish a standardized emergency management system for use by all emergency response agencies. Existing law requires the director to appoint representatives of the disabled community to serve on pertinent committees related to that system, and to ensure that the needs of the disabled community are met within that system by ensuring certain committee recommendations include the needs of people with disabilities. Existing law requires those representatives to be from groups of persons who are blind or visually impaired, persons with sensory or cognitive disabilities, and persons with physical disabilities.</p> <p>This bill instead would require the director to appoint representatives of the access and functional needs population to serve on those committees and to ensure the needs of that population are met within that system. The bill would require those representatives to include persons not within the above-described groups of people with</p>	<p>March 14 2/11/21 Read first time. To print.</p>	
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		<p>disabilities but who are part of the access and functional needs population.</p> <p>Under existing law, political subdivisions, as defined, have full power during a local emergency to provide mutual aid to any affected area in accordance with local ordinances, resolutions, emergency plans, or agreements. Existing law defines “emergency plan” for these purposes to mean official and approved documents that describe the principles and methods to be applied in carrying out emergency operations or rendering mutual aid during emergencies. Existing law requires a county, upon the next update to its emergency plan, to integrate access and functional needs into its emergency plan and to include representatives from the access and functional needs population, as defined, regarding that integration.</p> <p>This bill would require a county to send a copy of its emergency plan to OES on or before March 1, 2022, and upon any update to the plan after that date. By creating a new duty for counties, this bill would impose a state-mandated local program. The bill would require OES, in consultation with representatives of people with a variety of access and functional needs, to review the emergency plan of each county to determine whether the plans are consistent with certain best practices and guidance, as specified. The bill</p>		
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		<p>would require OES to report to the Legislature and to post on its internet website the results of its reviews. The bill would require OES to provide technical assistance to a county in developing and revising its emergency plan to address the issues that the office identified in its review.</p> <p>Existing law, on or before July 1, 2019, requires OES, in consultation with specified groups and entities, including the disability community, to develop guidelines for alerting and warning the public of an emergency, as specified, and to provide each city and county with a copy of the guidelines. Existing law requires OES, within 6 months of making those guidelines available and at least annually, to develop an alert and warning training that includes information regarding certain emergency alert systems and the alert and warning guidelines.</p> <p>This bill, instead, would require OES to develop those guidelines on or before July 1, 2022, would include the access and functional needs community instead of the disability community in the list of groups that OES is required to consult, and would require OES to develop the alert and warning training with involvement of representatives of the access and functional needs community.</p> <p>Existing law requires OES, in cooperation with involved state and local agencies, to complete an after-action report within 180 days after each declared disaster</p>		
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		<p>that reviews public safety response and disaster recovery activities.</p> <p>This bill would require OES to include conclusions and recommendations based on findings in the report, and to disseminate annually guidance that summarizes those conclusions and recommendations.</p> <p>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.</p> <p>This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.</p>		
AB 596	Nguyen	<p><b>Appointed legal counsel</b></p> <p>The Guardianship-Conservatorship Law authorizes the court to appoint private legal counsel for a ward, a proposed ward, a conservatee, or a proposed conservatee in any proceeding under its provisions if the court determines the person is not otherwise represented by legal counsel and that the appointment would be helpful to the resolution of the matter or is necessary to protect the person's interests. The law requires the court to appoint the public defender or private counsel to represent the interest of a conservatee, proposed conservatee, or person alleged to</p>	2/18/21 Referred to Com on Jud 2/12/21 From printer. May be heard in committee March 14 2/11/21 Read first time. To print.	

		<p>lack legal capacity for assistance in particular proceedings that include, among others, proceedings to establish a conservatorship or to remove the conservator.</p> <p>This bill would require an attorney, who is appointed under these provisions and determines that a conservatee or proposed conservatee is unable to communicate, to report the nature of that inability to the court, and would require the court, upon a determination of the inability to communicate, to discharge the appointed attorney and appoint a guardian ad litem. The bill would specifically require an attorney who is appointed under these provisions to represent a conservatee, a proposed conservatee, or person alleged to lack legal capacity to act as an advocate for the client, and would prohibit the attorney from substituting their own judgment for that of the client's expressed interests.</p>		
AB 636	Maienschein	<p><b>Financial Abuse of Elder or Dependent Adults</b> Existing law, the Elder Abuse and Dependent Adult Civil Protection Act, establishes procedures and requirements for the reporting, investigation, and prosecution of elder and dependent adult abuse. Existing law makes specified reports, including reports of known or suspected financial abuse of an elder or dependent adult, confidential. Existing law requires information relevant to the incident of elder or</p>	<p>2/25/21 Referred to Com on Aging &amp; LTC 2/13/21 From printer. May be heard in committee March 15 2/12/21 Read first time. To print.</p>	

		<p>dependent adult abuse to be given to specified investigators, including investigators from 15 an adult protective services agency, a local law enforcement agency, and the probate court.</p> <p>This bill would also authorize information relevant to the incident of elder or dependent adult abuse to be given to a federal law enforcement agency charged with the investigation of elder or dependent adult abuse or to a local code enforcement agency for the sole purpose of investigating a property where the health and safety of an elder or dependent adult resident is at risk.</p>		
SB 221	Weiner	<p>This bill would codify the regulations adopted by the Department of Managed Health Care and the Department of Insurance to provide timely access standards for health care service plans and insurers for nonemergency health care services. The bill would require both a health care service plan and a health <del>insurer</del> <i>insurer, including a Medi-Cal Managed Care Plan</i>, to ensure that appointments with nonphysician mental health and substance use disorder providers are subject to the timely access requirements. The bill would additionally require a health care service plan <del>or</del> <i>and a health <del>insurer</del> insurer, including a Medi-Cal Managed Care Plan</i>, to ensure that an enrollee or insured that is undergoing a course of treatment for an ongoing mental health or substance use disorder condition</p>	<p>3/18/21 From committee: Do pass as amended and re-refer to Com. on APPR 3/9/21 From committee with author's amendments. Read second time and amended. Re-referred to Com on Health. 3/3/21 Set for hearing on 3/17/21 1pm 1/28/21 Referred to Com on Health 1/14/21 From printer. May be acted upon or after Feb. 13 1/13/21</p>	<p>CSL (support) MPA Goal 5</p>

		<p>is able to get a follow-up appointment with a nonphysician mental health care or substance use disorder provider within 10 business days of the prior appointment. <i>If a health care service plan is operating in a service area that has a shortage of providers and the plan is not able to meet the geographic and timely access standards for providing mental health or substance use disorder services with an in-network provider, the bill would require the plan, including a Medi-Cal Managed Care Plan, to arrange coverage outside the plan's contracted network.</i> By imposing new requirements on health care service plans, the willful violation of which would be a crime, the bill would impose a state-mandated local program.</p> <p>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 would provide that no reimbursement is required by this act for a specified reason.</p>	<p>Introduced. Read first time. To Com on RLS for assignment. To print.</p>	
<p><b>SB 380</b></p>	<p>Eggman with Cooper, Wood, Aguiar-Cury, Bonta, Frazier, Garcia, Rivas</p>	<p><b>End of Life</b> Existing law, the End of Life Option Act, until January 1, 2026, authorizes an adult who meets certain qualifications, and who has been determined by their attending physician to be suffering from a terminal disease, as defined, to make a request for an aid-in-dying drug for the purpose of ending their</p>	<p>3/16/21 Set for Hearing March 24 2/22/21 Joint Rule 55 suspended. (Ayes 32. Noes 4) 2/22/21 Art. IV Sec. 8(a) of the Constitution</p>	<p>(Self Sufficiency tracking) MPA Goal 2</p>

		<p>life. Existing law establishes the procedures for making these requests, including that two oral requests be made a minimum of 15 days apart, specified forms to request an aid-in-dying drug be submitted, under specified circumstances, and a final attestation be completed. Existing law requires specified information to be documented in the individual's medical record, including, among other things, all oral and written requests for an aid-in-dying drug.</p> <p>This bill would allow for an individual to qualify for aid-in-dying medication by making two oral requests, regardless of the period between oral requests, and a written request when a physician has determined, within reasonable medical judgment, that the individual will die from their terminal illness in 15 days or less. The bill would eliminate the requirement that an individual who is prescribed and ingests aid-in-dying medication make a final attestation. The bill would require that the date of all oral and written requests be documented in an individual's medical record and would require that upon a transfer of care, that record be provided to the qualified individual. The bill would extend the operation of the act indefinitely, thereby imposing a state-mandated local program by extending the operation of crimes for specified violations of the act.</p> <p>Existing law requires that an individual seeking aid-in-dying</p>	<p>dispensed with 2/17/21 Referred to Coms on Health and Jud 2/11/21 From printer. May be acted upon or after March 13 2/10/21 Introduced. Read first time. To Com on RLS for assignment. To print</p>	
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		<p>medication be subject to specific findings by their attending physician, a consulting physician, and, if determined to be necessary, a licensed psychologist or psychiatrist.</p> <p>This bill would allow for a mental health professional other than a licensed psychologist or psychiatrist to conduct a mental health exam for the purpose of qualifying an individual for aid-in-dying medication.</p> <p>Existing law makes participation in activities authorized pursuant to the act voluntary, and makes individual health care providers immune from liability for refusing to engage in activities authorized pursuant to its provisions, including providing information about the act or referring an individual to a provider who prescribes aid-in-dying medication.</p> <p>This bill would redefine those activities that are considered “participation” for these purposes to exclude diagnosis of an individual with a terminal illness, prognosis of an individual’s illness, determination of an individual’s capacity to make medical decisions, provision of information regarding the act, and referral to a medical provider who will participate in the activities under the act. The bill would state that failure to provide information about medical aid in dying to an individual who requests it, or failure to refer the individual, upon request, to another health</p>		
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		<p>care provider or health care facility that is willing to provide the information, is considered a failure to obtain informed consent for subsequent medical treatments.</p> <p>Existing law authorizes a health care provider to prohibit its employees, independent contractors, or other persons or entities, including other health care providers, from participating in activities under the act, including acting as a consulting physician, while on the premises owned or under the management or direct control of that prohibiting health care provider, or while acting within the course and scope of any employment by, or contract with, the prohibiting health care provider.</p> <p>This bill would instead authorize health facilities to prohibit employees and contractors, as specified, from prescribing aid-in-dying drugs while on the facility premises or in the course of their employment.</p> <p>Under existing law, it is a felony to knowingly alter or forge a request for drugs to end an individual's life without their authorization, to conceal or destroy a withdrawal or rescission of a request for a drug, if it is done with the intent or effect of causing the individual's death, to knowingly coerce or exert undue influence on an individual to request a drug for the purpose of ending their life, or to destroy a withdrawal or rescission of a request, or to administer an aid-</p>		
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		<p>in-dying drug to an individual without their knowledge or consent.</p> <p>This bill would add a definition of “coercion or undue influence” that includes deception and would create civil liability for anyone who obstructs an individual’s request for aid-in-dying medication. The bill would prohibit a medical facility or provider from making false or misleading statements as to their willingness to participate, as defined, in activities under the act and requires that medical facilities post their policy regarding participation in the act on their internet website.</p>		
<p><b>SB</b> <b>441</b></p>	<p>Hurtado</p>	<p><b>Health Care Workforce Training Programs: Geriatric Medicine</b></p> <p>Existing law, the Song-Brown Health Care Workforce Training Act, provides for specified training programs for certain health care workers, including family physicians, registered nurses, nurse practitioners, and physician assistants. Existing law establishes a state medical contract program with accredited medical schools, hospitals, and other programs and institutions to increase the number of students and residents receiving quality education and training in specified primary care specialties and maximize the delivery of primary care and family physician services to underserved areas of the state.</p> <p>This bill would add geriatric medicine to the list of specified primary care specialties under the program. The bill would add training in geriatric medicine to</p>	<p>3/18/21 Set for Hearing on 4/7/21 2/25/21 Referred to Com on Health 2/22/21 Joint Rule 55 suspended 2/22/21 Art. IV. Sec. 8(a) of the Constitution dispensed with</p>	

		the definition of a “family physician” as that term is used in the act.		
SB 460	Pan	<p><b>SB 460, as amended, Pan. <del>Office of the Patient Representative.</del> <i>Long-term health facilities: patient representatives.</i></b></p> <p>This bill would create the Office of the Patient Representative in the Department of Aging to train, certify, provide, and oversee patient representatives to protect the rights of nursing home residents, as specified. The bill would, among other things, require the office to establish appropriate eligibility, training, certification, and continuing education requirements for patient representatives and to convene a group of stakeholders to advise the office regarding the eligibility requirements. The bill would, among other things, require the office to collect and analyze data, including the number of residents represented, the number of interdisciplinary team meetings attended, and the number of cases in which judicial review was sought and to present that data in an annual public report delivered to the Legislature and posted on the office’s internet website. The bill would require patient representatives to perform various duties including reviewing the determinations that the resident lacks <del>decision-making capacity</del> <i>capacity, as defined, to make decisions</i> and no surrogate decisionmaker is available, as specified.</p>	<p>3/16/21 From committee with author’s amendments. Read second time and amended. Re-referred to Com on Human Services</p> <p>3/9/21 Set for Hearing March 23</p> <p>2/25/21 Referral to Com on Jud rescinded because of the limitations placed on committee hearings due to ongoing health and safety risks of COVID-19</p> <p>2/25/21 Referred to Coms on Human Services and Health and Jud</p> <p>2/22/21 Joint Rule 55 suspended</p> <p>2/22/21 Art. IV. Sec. 8(a) of the Constitution dispensed with</p>	

		<p><i>Existing law requires the attending physician and surgeon of a resident in a skilled nursing facility or intermediate care facility that prescribes or orders a medical intervention of a resident that requires the informed consent of a resident who lacks capacity to provide that consent and who does not have a person with legal authority to make those decision on behalf of the resident to inform the skilled nursing facility or intermediate care facility. Existing law requires the facility to conduct an interdisciplinary team review of the prescribed medical intervention prior to the administration of the medical intervention, subject to specified proceedings. Existing law authorizes a medical intervention prior to the facility convening an interdisciplinary team review in the case of an emergency, under specified circumstances. Existing law imposes civil penalties for a violation of these provisions. This bill would require the physician and surgeon to document the determination that the resident lacks capacity, as defined, in the resident's medical record, and would require the skilled nursing facility or intermediate care facility to identify, or use due diligence to search for, a surrogate decisionmaker, as defined. The bill would require, among other things, if the resident lacks capacity and there is no surrogate</i></p>		
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		<p><i>decisionmaker, the skilled nursing facility or intermediate care facility to provide written notice to the resident and to the Office of the Patient Representative, as specified. The bill would require a copy of the notice to be included in the resident's records and to include specified information, including notice that the resident has the right to a patient representative. The bill would require the Office of the Patient Representative to designate someone to serve as the patient's representative if no family member or friend is available to serve in that capacity, and would prohibit a patient representative from being, among others, an employee or former employee of the facility, as specified.</i></p>		
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TACC REPORT/Diane Lawrence

1. The California Commission on Aging administers the TRIPLE-A COUNCIL OF CALIFORNIA (TACC), representing the state's 33 Area Agency on Aging advisory councils.
2. March 9, 2021 meeting summary
  - a. At our June meeting, there will be a focus on Shared Housing
  - b. The Department is focusing on Master Plan on Aging and redrafting the Strategic Plan. There will be meetings in April on this plan and a draft report will be released.
  - c. The Department has an intern who is developing as their project, an Aging Lesson Plan for High School. The intern is from Sacramento State and she presented the key elements of the Lesson Plan.
    - i. It is targeted at 9<sup>th</sup> graders making them aware of aging issues and aging throughout one's life.
  - d. The presentation sparked a discussion among the representatives
    - i. San Diego County is looking at including young people on their commission
    - ii. Ventura County has been sponsoring a card and letter writing campaign through scouting. Over 10,000 letters and cards from different groups have been put into the grab and go meals for seniors.
    - iii. Fresno/Kings County has intergenerational day care

- iv. Los Angeles County is working on how to be an advocate for seniors
- e. As always, each county prepared and presented a report on their activities since we last met. The key takeaways include:
  - i. Meals on Wheels up 40% in one area and 80% of that PSA's persons over 75 had received at least one shot; 1.2 m boxes of food delivered by volunteers; senior nutrition garden
  - ii. Meal delivery service in areas that are not part of the regular route;
  - iii. Work on digital inclusion and access to devices
  - iv. Robotic pet project in San Diego, battery operated
  - v. Use of senior center parking lots for outdoor activities such as movies, bingo, comedy night.
  - vi. Looking at use of Johnson and Johnson vaccine with hospital discharges.
  - vii. Handling vaccine hesitancy
  - viii. Secret Shopper at Grab and Go sites—observe everything and developing a report. (this was brought up at the Advisory Council as a possibility with our virtual site visits.
  - ix. Donated insulated bags for food pick-up
  - x. Federal Broadband program in Lake and Mendocino counties as part of federal emergency broadband program.
  - xi. El Dorado County was using the Highway 50 corridor for vaccination sites
  - xii. Push for senior housing and launching Home Share program—goal the next few months
- f. Two presentations
  - i. Master Plan for Aging presentation by Amanda Lawrence, MPH, Project Director with California Dept. of Aging
    - 1. Five Bold Goals for 2030—it is a 10-year plan with a 2-year initiation to get started.
      - a. Goal One: Housing for all Ages and Stages
        - i. Working with San Diego's Beyond Cars Program
      - b. Goal Two: Health Reimagined
        - i. Partnering with Care Foundation of the Inland Empire Health Plan
      - c. Goal Three: Inclusion and Equity, Not Isolation
        - i. Purposeful Aging partnering in Los Angeles County
      - d. Goal Four: Caregiving that Works
        - i. Partnering with Contra Costa County on Healthcare Pathway
      - e. Goal Five: Affording Housing

- i. SF Project Homekey and Covid-19 Meals Expansion
- 2. There are 23 strategies in total
- 3. There is a Local Playbook for use; focuses on 7 steps
  - a. Engage Local Leaders
  - b. Explore Local Data
  - c. Review existing Local Aging Methods
  - d. MPA Initiatives for Implementation
  - e. Build Your Action Plan
  - f. Evaluate Your Initiative—Age Friendly Community Planning
  - g. Stay Connected.
- 4. 10 Cabinet agencies and strong partnerships—IMPACT
  - a. I—implementing
  - b. M—master
  - c. P—Plan
  - d. A—Aging
  - e. C—in community
  - f. T—together.
- 5. Covid-19 helped the MPA groups think differently
- 6. CDA has monthly webinars on equity and intersections with aging. Meetings are the first Wednesday of the month
- 7. Elder Justice Coordinating Council is considering joining AARP Age Friendly Network
- 8. All materials including data are available on line at <https://mpa.aging.ca.gov>
- ii. Update on COVID-19 Vaccination Outreach Ron Chapman, MD, MPA and Sonya Harris, Senior Advisor, CDPH COVID-19 Vaccine Task Force
  - 1. Vaccinate All 58 focus—Vaccinate All 58 website
    - a. Educate, motivate, and activate
    - b. Combating mis- and dis-information
    - c. Addressing barriers like lack of access and hesitancy
    - d. Helping navigate eligibility
    - e. Creating materials in language content with focus on ethnic/multicultural
    - f. \$52.7 awarded to 337 CBOs to date and trusted messengers
  - 2. Addressing Vaccine Hesitancy
    - a. California has its own Scientific Safety Review Workgroup which is comprised of public health professionals, academics and other experts
    - b. Ensuring transparency
    - c. That vaccine meets safety requirements
    - d. Safe distribution and equity
  - 3. Lots of outreach and partnerships developed with

- a. Department of Aging
  - b. California Commission on Aging
  - c. Department of Social Services
  - d. Department of Health Care Services
  - e. Office of Emergency Services and the Listos CA program
  - f. Targeted and paid media
4. CA COVID Hotline—1-833-422-4255

CASE REPORT/DANIEL GALLAGHER

The March 8 CASE membership meeting focused on the Master Plan for Aging, advocacy, case study project, collaborative efforts to increase access to the COVID vaccine, and re-opening strategies.

**A. Master Plan for Aging** - Shireen McSpadden presented the Five Bold Goals (and 23 strategies to help achieve goals):

- 1. Housing
- 2. Health Reimagined
- 3. Inclusion and Equity, not Isolation
- 4. Caregiving That Works
- 5. Affording Aging – economic security

**B. Advocacy**

- Bridging the Digital Divide
  - Final \$100K of \$300K allotted for FTY21 will help adult day programs continue to engage participants by affording access to the internet and virtual services.
    - Community Living Campaign is the fiscal agent
    - GrandPads are the preferred device
    - Evaluative process
- Contracting Process – complete. Agreements on:
  - Timing
  - Contract Complexity
  - Outcome Measures and Reporting
  - New Contract Funding
- Dignity Fund - Restore the annual \$3 million allocation to the Department of Disability and Aging Services, which administers the funds and ensures delivery of critical services.

**C. Case Study Project** - community-based service providers’ efforts to document new service models that engaged their clients to mitigate



isolation, loneliness, and the threat of COVID-19. These studies are intended to inform community-based agencies, local and state government, private partners, and perhaps the Master Plan for Aging by describing successes and lessons learned as useful tools in a changing service environment.

- CASE entered into an MOU with the Community Living Campaign to help hire a ReServist to coordinate the project.
  - Currently interviewing candidates
  - Funding by DAS

**D. Access to the Vaccine** – coordinating efforts with DAS

- Supply, location, transportation, and assistance have been barriers, along with on-line registration
- Greater supply, call centers, mobile vaccination teams, and education have helped

**E. Re-opening strategies** – CASE will convene a presentation in the April 12 membership meeting to discuss re-opening planning, strategies and concerns with a panel consisting of community providers, a DAS representative, and a member of the medical profession.

- Toby Shorts, Curry Senior Center
- Patty Clement – Catholic Charities Adult Day Program
- Cathy Michalec – Little Brothers-Friends of the Elderly
- Cindy Kaufmann – DAS
- Dr. Jay Luxenberg – Chief Medical Officer, On Lok

NOMINATING COMMITTEE REPORT AND POSSIBLE VOTE

The Commission Nominating Chair, Commissioner Nelson Lum reported on the outcome of the DAS Commission’s Nomination Committee and recommended to the Commission that four members be reappointed.

A motion to reappoint:

- Dr. Marcy Adelman
- Allegra Fortuanati
- Louise Hine
- Anne Warren

The motion was unanimously approved.

GENERAL PUBLIC COMMENT

Richard Rothman-suggested we spell out acronyms and also would like DAS to take up the issue of the City allowing restaurants to keep outside service. Mr. Rothman said that it is difficult for older adults and adults with disabilities to find parking as it is. Permitting the restaruants to keep their outside service makes things much harder. Mr. Rothman would also like DAS to take up the issue of keeping JFK closed in Golden Gate Park.

A constituent would like to see more action in more locations with the older adults in San Francisco.

Winnie Yu-Self Help for the Elderly, thanked the DAS Commission and Executive Director McSpadden for their leadership and support for making the critical Senior Escort Services program possible. This program provides safety for seniors when traveling outside their homes. Especially since crimes against the Asian/Pacific Islander community have escalated during the pandemic and created another level of fear. Ms. Yu hopes that DAS continues to support seniors with day-to-day outside activities particularly now since the City is reopening.

OLD BUSINESS

No old business.

Item 14-Approval of the Consent Agenda/Action Item

<b>Grantee</b>	<b>Original amount</b>	<b>Additional amount</b>	<b>10% contingency</b>	<b>Not-to-Exceed</b>	<b>Funding source</b>	<b>Term</b>	<b>Effective Date</b>
Russian American Community Services	\$21,671	<b>\$1,948</b>	\$2,362	\$25,981	Local and Federal fund	10/01/20 – 06/30/21	10/01/20

\*The additional fund is to support additional intake assessments and reassessments in the Nutrition Compliance and Quality Assurance (NCQA) budget of the Home Delivered Meal for Older Adults program. NCQA includes quarterly monitoring of a grantee’s food service production and meal service to ensure state and local food safety and sanitation requirements. NCQA also includes nutrition education, in-service training, home delivered meal assessments, and nutrition counseling.

Public Comment

No public comment

A motion to approve the Consent Agenda

The motion was unanimously approved

NEW BUSINESS

All three items below are presentation and discussion only:

- Informational review of the FY20-21 Area Plan budget amendment funding. Alex Gleason presented the item.
- CLF 6 Month Report and Annual Plan. Fanny Lapitan presented the item.
- Presentation of the County Veterans Service Office budget and DAS Veterans Services. Cindy Kauffman and Alfred Sims presented the item.

A Review and approval of the FY 2021-22 Area Plan Update for the California Department of Aging. Shireen McSpadden and Rose Johns presented the item.

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

B. The Department of Disability and Aging Services (DAS) requests authorization to renew the existing grant agreements with multiple providers for the provision of intergenerational programming for older adults and adults with disabilities for the time period beginning July 1, 2021 and ending June 30, 2023 in the combined amount of \$1,332,964, plus a 10% contingency for a total not to exceed amount of \$1,466,260. Tiffany Kearney presented this item.

<b>Grantee</b>	<b>Grant total</b>	<b>10% Contingency</b>	<b>Not to exceed</b>
Bayview Hunters Point Multipurpose Senior Services	\$193,108	\$19,311	\$212,419
Kimochi	\$202,488	\$20,249	\$222,737
Lighthouse	\$60,544	\$6,054	\$66,598
Mission Neighborhood Centers	\$134,364	\$13,436	\$147,800
Openhouse	\$433,460	\$43,346	\$476,806
Sequoia Living	\$309,000	\$30,900	\$339,900
<b>Total</b>	<b>\$1,332,964</b>	<b>\$133,296</b>	<b>\$1,466,260</b>

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

- C. Requesting authorization to renew the existing grant agreement with Self-Help for the Elderly for the provision of Workforce Support Program for older adults and/or adults with disabilities during the period of July 1, 2021 through June 30, 2023; in the amount of \$468,560 plus a 10% contingency for a total grant amount not to exceed \$515,416. Melissa McGee presented the item.

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

- D. Requesting authorization to renew the existing grant agreement with Self-Help for the Elderly for the provision of Peer Ambassador Program for older adults and/or adults with disabilities during the period of July 1, 2021 through June 30, 2023; in the amount of \$456,910 plus a 10% contingency for a total grant amount not to exceed \$502,601. Melissa McGee presented the item.

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

- E. Requesting authorization to modify the existing grant agreement with SELF HELP FOR THE ELDERLY for the provision of Peer Ambassador Program for older adults and/or adults with disabilities during the period of April 1, 2019 through June 30, 2021; in the additional amount of \$30,000 plus a 10% contingency for a total amount not to exceed of \$315,767. Melissa McGee presented the item.

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

- F. Requesting authorization to modify the existing grant agreements with Episcopal Community Services for the provision of nutrition services to older adults and adults with disabilities during the period of November 1, 2020 to June 30, 2021; in the additional amount of \$100,873 plus a 10% contingency for a total amount not to exceed \$307,151. Lauren McCasland presented this item.

Program	Current Grant Amount 11/01/20 – 06/30/21	Modification Amount 11/01/20 – 06/30/21	Revised Amount 11/01/20 – 06/30/21	10% Contingency	Not-To-Exceed
Congregate Meal Program for Older Adults	\$155,651	\$64,099	\$219,750	\$21,975	\$241,725
Congregate Meal Program for Adults with Disabilities	\$22,704	\$36,774	\$59,478	\$5,948	\$65,426
<b>Total</b>	<b>\$178,355</b>	<b>\$100,873</b>	<b>\$279,228</b>	<b>\$27,923</b>	<b>\$307,151</b>

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

**G. Item G was removed.**

- H. Requesting authorization to renew the grant agreements with multiple vendors for the provision of the Volunteer Visitor Program during the period of July 1, 2021 to June 30, 2023; in the amount of \$178,547 plus a 10% contingency for a total amount not to exceed \$196,431 Hanna Teferi presented the item.

Grantee	Annually for 2 years <sup>1</sup> Total	Contingency (10%)	Not to exceed

LightHouse for the Blind and Visually Impaired	\$22,337 \$44,674	\$4,467	\$49,141
Covia Foundation	\$66,950 \$133,390	\$13,390	\$147,290
<b>Total</b>	<b>\$89,287</b> <b>\$178,574</b>	<b>\$17,857</b>	<b>\$196,431</b>

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

- I. Requesting authorization to enter into a new grant agreement with On-Lok Day services for the provision of the Health Promotion (Self-Management of Chronic Health Conditions & Physical Fitness and Fall Prevention) program during the period of July 1, 2021 to June 30, 2025; in the amount of \$2,308,732 plus a 10% contingency for a total amount not to exceed \$2,539,605. Lauren McCasland presented the item.

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

- J. Requesting authorization to modify the existing grant with Institute on Aging for the provision of the Community Living Fund Program during the period of July 1, 2021 to June 30, 2023; in the amount of \$9,788,758 plus a 10% contingency for a total not to exceed \$22,408,928. Fanny Lapitan presented the item.

Public Comment

No public comment

A motion to approve:

The motion was unanimously approved

ANNOUNCEMENTS:

Commissioner Sascha Bittner announced that Senior and Disability Action will hold a webinar to help people with COVID-19 vaccination appointments on Thursday, April 8, 2021 from 4-6:00 PM. Please contact Senior and Disability Action for further details.

MOTION TO ADJOURN,

The motion was unanimously approved

Meeting adjourned 12:30 PM

Respectfully submitted,

Bridget Badasow  
Commission Secretary