

ALZHEIMER'S DISEASE & RELATED CONDITIONS ADVISORY COMMITTEE (ADRCAC) MEETING MAY 1, 2025

0:01

GOOD MORNING EVERYONE THANK YOU FOR JOINING US THIS IS THE CALIFORNIA 0:08

HEALTH AND HUMAN SERVICE AGENCIES OR CAL HHS ALZHEIMER'S DISEASE AND RELATED

0:15

CONDITIONS ADVISORY COMMITTEE MEETING TODAY IS MAY 1ST THE 1ST OF MAY 2025

0:22

AND THIS MEETING RUNS FROM 10:00 A.M. TO APPROXIMATELY 2 P.M. SO WE 0:28

APPRECIATE YOUR BEING HERE WITH US WE ARE MEETING BOTH IN PERSON AT THE CALIFORNIA DEPARTMENT OF AGING'S OFFICE

0:35

IN SACRAMENTO AS WELL AS VIRTUALLY AND NEXT SLIDE PLEASE AND I AM CARROLL

0:42

DE ANDREIS THANK YOU FOR JOINING US I'M WITH THE MPA TEAM HERE AT THE CALIFORNIA DEPARTMENT OF AGING

0:49

AND IF WE GO TO THE NEXT SLIDE HERE ARE SOME MEETING LOGISTICS FOR YOU 0:56

IF YOU'RE ATTENDING VIRTUALLY WE HAVE THESE LINKS FOR YOU AS WELL AS 1:02

IF YOU WOULD LIKE TO JOIN VIA AUDIO NUMBER IS

1:08

8887880099 AND YOU WOULD PUT IN OUR WEBINAR IDD WHICH IS 84170020247 1:17

WE HAVE LIVE CAPTIONING AND AMERICAN SIGN LANGUAGE INTERPRETING WE THANK

1:23

BAILEY AND REX FOR BEING WITH US TO BE OUR ASL INTERPRETERS THANK YOU GUYS

AND FOLLOWING THIS

1:33

MEETING YOU CAN FIND ALL OF THE DOCUMENTS THE POWERPOINT SLIDE AND 1:40

RECORDING POSTED ON THE CAL HHS ALZHEIMER'S DISEASE AND RELATED CONDITIONS ADVISORY COMMITTEE WEB PAGE

1:47

THANK YOU AND I DO WANT TO REMIND FOLKS TO

1:52

MUTE THEMSELVES I'M GOING TO GO AHEAD JUST TO REDUCE THE BACKGROUND NOISES

1:58

LETTING YOU KNOW THAT THE CHAT FUNCTION IS ENABLED FOR COMMITTEE MEMBERS CALIFORNIA DEPARTMENT OF

2:05

AGING STAFF CAL HHS STAFF AND OTHER INVITED GUESTS TO SHARE OUT MEETING 2:10

RESOURCES AND INFORMATION AND YOU'RE ABLE TO VIEW THAT AND CLICK ON THAT AND

2:16

DURING THE MEETING WE INVITE THE PUBLIC TO PROVIDE COMMENTS AND HOLD 2:22

THOSE COMMENTS UNTIL THE DESIGNATED PUBLIC COMMENT PERIOD WHICH TODAY ON THE

2:27

AGENDA IS APPROXIMATELY AT 11:30 A.M AND AGAIN A SECOND TIME AT 1:15 BUT YOU ARE

2:35

THE Q&A IS ALSO ENABLED SO FEEL FREE TO PUT IN YOUR QUESTION THERE AND THE

2:41

COMMITTEE WILL EITHER RESPOND OR WE WILL TAKE IT BACK AND GET YOU BACK A RESPONSE AS ALWAYS IF YOU HAVE ANY

2:50

ADDITIONAL COMMENTS OR QUESTIONS FOLLOWING THIS COMMITTEE YOU MAY 2:55

EMAIL THE ENGAGE EMAIL BOX THAT IS ENGAGE

3:05

E N G A G E AT AGING DOT C A DOT GOV NEXT SLIDE LIVE CAPTIONING IS AVAILABLE 3:10

AND IT IS AVAILABLE THROUGH YOUR ZOOM WEBINAR FUNCTIONS YOU SHOULD HAVE

3:16

THIS ICON THE CC SHOW CAPTIONS YOU CAN ENABLE THAT YOURSELF IF FOR SOME 3:21 REASON ON YOUR TOOLBAR IT IS NOT READILY APPARENT PLEASE HIT THAT MORE BUTTON 3:28 IT'S A THREE DOTS MORE IT HOPEFULLY IS HIDING UNDERNEATH THERE SO 3:34 PLEASE ENABLE THAT IF YOU NEED THAT NEXT 3:39 SLIDE AGAIN IF YOU WOULD LIKE TO MAKE PUBLIC COMMENT WE DO HAVE TWO PUBLIC 3:46 COMMENT PERIODS IF YOU'RE IN PERSON IN THE ROOM YOU CAN RAISE YOUR HAND AND ONE OF OUR STAFF MEMBERS WILL CALL ON YOU 3:52 GIVE YOU YOUR TURN FOR OUR VERBAL COMMENTS USE YOUR RAISED HAND ICON 3:58 VIA ZOOM AND WE'LL CALL ON YOU VIA THAT AND WRITTEN COMMENTS AGAIN TO 4:07 ENGAGE E N G A G E AT AGING DOT C A DOT GOV WE DO WANT TO NOTE THAT 4:13 PUBLIC COMMENTERS WILL HAVE TWO MINUTES EACH JUST SO THAT WE MAKE SURE THAT WE'RE ABLE TO HAVE TIME 4:20 TO GET TO EVERYONE WHO MAY WANT TO LEAVE A COMMENT NEXT 4:27 SLIDE SO GOOD MORNING DR CANIO I WILL 4:34 SPOTLIGHT YOU HOLD ON TWO SECONDS GOOD MORNING THANK YOU FOR BEING 4.41HERE AND GO AHEAD GOOD MORNING EVERYONE WELCOME TO TODAY'S ALZHEIMER'S 4:47 DISEASE AND RELATED CONDITIONS ADVISORY COMMITTEE I WANTED TO BEGIN BY THANKING EACH OF YOU FOR BEING HERE 4:53 WHETHER YOU'RE JOINING US IN PERSON OR VIRTUALLY AND FOR THE COMMITMENT YOU BRING TO THIS IMPORTANT WORK AND JUST A 5:01 REMINDER FOR THE COMMITTEE MEMBERS WHO ARE PARTICIPATING VIA ZOOM PLEASE 5:06 HAVE YOUR CAMERA ON AND LET US KNOW IF THERE'S A TECH REASON WHY YOU CAN'T HAVE YOUR CAMERA ON PER THE BAGLEY-KEENE ACT

JUST A QUICK SHOUT OUT TO THE ALZHEIMER'S LOS ANGELES FOR BEING AWARDED AMERICAN SOCIETY ON AGING 2025 5:22 HEALTH AND WELL-BEING AWARD SO KUDOS TO ALZHEIMER'S LA AND I THINK RIGHT 5:29 NOW WE SHOULD LOOK AT THE AGENDA LET'S GO TO THE NEXT SLIDE SO WE 5:36 HAVE A PACK AGENDA WE'LL START WITH THE NAVIGATING LONG-TERM SERVICES AND SUPPORTS AND CALIFORNIA'S NO WRONG DOOR 5:43 POLICY FOLLOWED BY COMMITTEE UPDATE CALIFORNIA DEPARTMENT OF AGING UPDATE 5:48 CALIFORNIA DEPARTMENT OF PUBLIC HEALTH UPDATE AND LEGISLATIVE UPDATE AND THEN WE WILL FINALIZE RECOMMENDATIONS AS 5:55 WE USUALLY DO LATER THIS AFTERNOON GO AHEAD AND GO TO THE NEXT SLIDE 6:03 SO BEFORE WE GET THE ATTENDANCE RIGHT NOW 6:09 WE WILL REVIEW THE FEBRUARY MINUTES EACH OF YOU SHOULD HAVE RECEIVED THE 6:14 MINUTES VIA EMAIL SO ANY QUESTIONS OR COMMENTS ABOUT 6:21 THE MINUTES WE HAD IN FEBRUARY 6:29 NO OUESTIONS OKAY WELL CAN I GET A MOTION TO APPROVE THE MINUTES I MAKE A MOTION 6:37 TO APPROVE THE MINUTE I THINK THAT WAS BARBRA THANK YOU AND THE SECOND I THINK 6:42 THAT WAS DR MOBLEY RIGHT RIGHT ANY FURTHER 6:48 DISCUSSION ALL RIGHT ALL IN FAVOR SAY III 6:55 I SOUNDS LIKE WE ONLY HAVE TWO PEOPLE I WHY DON'T WE DO ANY 7:06 **OPPOSITION ANY ABSTENTION OKAY WELL THE MINUTES ARE** 7:14 APPROVED WE WILL CALL I'LL DO THE ROLL CALL NOW LET'S PUT UP THE SLIDES 7:20

AGAIN PROBABLY SHOULD HAVE DONE THAT FIRST 7:26 I'LL JUST CALL ON THE FOLKS ON THE SLIDE HERE I'M WYNN CANIO I'M THE 7:33 BEHAVIORAL HEALTH REPRESENTATIVE CARLOS YOU WANT TO SAY A FEW WORDS. HELLO OH 7:40 I'M CARLOS IN SACRAMENTO IN PERSON ALL RIGHT SENATOR ARREGUIN'S 7:47 **REPRESENTATIVE HELLO** 7:59 SALLY BERGMAN GOOD MORNING HAPPY TO BE HERE THANK YOU 8:04 CLAIRE DAY HI GOOD MORNING FROM SACRAMENTO ALSO IN PERSON 8:09 THANK YOU FOR BEING THERE DR THOMPSON SHE'S NOT HERE TODAY SHE'S OUT RIGHT 8:15 **OKAY MYRA** 8:21 DOESN'T APPEAR MYRA'S WITH US JUST YET OKAY LET'S GO AHEAD GO TO THE NEXT 8:27 SLIDE 8:32 WE HAVE KEN 8:38 IT DOES NOT APPEAR THAT KEN IS WITH US EITHER OKAY AND I KNOW BARBRA'S HERE 8:43 HI AGAIN DR MOBLEY HI GOOD MORNING ON THIS MAY DAY 8:50 DR OAZI SORRY IF I MISPRONOUNCED YOUR NAME YOU HAVE IT CORRECT GOOD MORNING 8:56 FROM SOUTHERN CALIFORNIA GREAT CELINE MORNING EVERYONE 9:03 JULIE GOOD MORNING DR FARIAS 9:11 DON'T HAVE HER EITHER SOUNDS LIKE OKAY I BELIEVE THAT DR GRAVANO ARE 9:20 ARE YOU ARE YOU APPEARING ON BEHALF OF DR FARIAS OR AM I 9:27

MISSPEAKING I HAVE IN THE PAST I WAS NOT SPECIFICALLY ASKED TO TODAY AND I HADN'T 9:33 PLANNED BUT I AM HERE AS AN ALTERNATE IF THAT NEEDS BE THANK YOU I I'M CLEARLY NOT A VOTING 9.42 MEMBER BUT JUST THANKS FOR BEING HERE YEAH THANK YOU DR 9.48 GRAVANO ALL RIGHT I THINK THAT CONCLUDES OUR ROLL CALL WE WILL 9:54 NOW MOVE ON TO OUR TOPIC OF THE MORNING NAVIGATING LONG-TERM SERVICES 10:02 AND SUPPORTS AND CALIFORNIA'S NO WRONG DOOR POLICY LONG-TERM SERVICES AND 10:08 SUPPORTS PROVIDE ESSENTIAL DAILY ASSISTANCE FOR INDIVIDUALS WITH COGNITIVE DECLINE AND ASSIST FAMILIES 10:15 MANAGE CAREGIVING RESPONSIBILITIES FAMILIES OFTEN DESCRIBE THE SYSTEM AS 10:22 CONFUSING DISCONNECTED AND DIFFICULT TO ASSESS ALTHOUGH WE KNOW WE HAVE A LOT OF 10:29 SERVICES OUT THERE THAT PEOPLE CAN USE SO HOPEFULLY WITH TODAY'S PRESENTATION 10:36 WE CAN MAKE THIS A BIT MORE EASIER AND WITH THAT WE HAVE ANA FROM 10:45 THE CDA CARLOS OUR VICE CHAIR THAT WILL TALK ABOUT HIS CAREGIVER **EXPERIENCE** 10:52 MARK BECKLEY FROM CDA WILL TALK ABOUT THE NO WRONG DOOR UPDATES 10:58 AND PRESENTATION BRIAN CARTER CALS CONNECT PRESENTATION AND THEN ALISON 11:03 BRIDGING AGING DISABILITY AND NETWORKS SO GO AHEAD ANA GO AHEAD AND TAKE IT 11:09 AWAY 11:16 THANK YOU SO MUCH I JUST WANT TO CHECK IN CAN YOU GUYS HEAR ME OKAY 11:22

YES SOUNDS GOOD ANA EXCELLENT SO THANK YOU SO MUCH AND REALLY APPRECIATE THE 11:28 COMMITTEE'S INTEREST IN THIS PARTICULAR ISSUE AROUND NAVIGATION AND 11:33 NO WRONG DOOR AS YOU ALL KNOW IN THE WORK THAT YOU DO THIS IS AN ISSUE THAT 11:39 COMES UP TIME AND TIME AGAIN AROUND NAVIGATING SERVICES AND SUPPORTS FOR THE 11:44 INDIVIDUAL BUT ALSO CAREGIVERS AND FAMILY MEMBERS SO I WANTED TO KIND OF 11:50 START THE CONVERSATION WITH JUST GOING OVER A LITTLE BIT ON THE BACKGROUND ON THE MASTER PLAN ON AGING AND CONNECTING 11:56 IT SPECIFICALLY TO NAVIGATION AND NO WRONG DOOR SO 12:02 TO START WITH YOU KNOW YOU'RE ALL FAMILIAR I'M SURE WITH THE FIVE BOLD GOALS OF THE MASTER PLAN ON AGING AND 12:11 GOAL ONE REALLY BEING AROUND HOUSING AND PEOPLE INDIVIDUALS BEING ABLE TO LIVE 12:16 WHERE THEY CHOOSE AS WE AGE IN THE COMMUNITIES OF CHOICE THAT WE HAVE IN 12:22 THESE COMMUNITIES BEING AGE FRIENDLY DISABILITY FRIENDLY AND DEMENTIA FRIENDLY AS WELL AS CLIMATE AND DISASTER 12:30 READY GOAL TWO IS AROUND HEALTH REIMAGINED FOCUSING ON ACCESS TO THE SERVICES THAT WE NEED TO LIVE IN OUR 12:37 COMMUNITY OF CHOICE AND TO REALLY OPTIMIZE OUR HEALTH AND WELL-BEING AND QUALITY OF LIFE AND THEN WITH GOAL THREE 12:44 WE HAVE THAT INCLUSION AND EQUITY NOT ISOLATION WHICH IS REALLY AROUND OUR OPPORTUNITIES RIGHT TO BE ABLE TO WORK 12:51 VOLUNTEER AND REALLY ENGAGE WITHIN THE COMMUNITY AND TO REALLY REDUCE 12:58 ISOLATION LONELINESS ABUSE NEGLECT AND EXPLOITATION AND THEN GOAL FOUR BEING 13:03

AROUND CAREGIVING THAT WORKS REALLY LOOKING TO SEE HOW WE PREPARE OUR DIRECT CARE WORKFORCE RIGHT AND TO BE ABLE

13:11

TO SUPPORT INDIVIDUALS AS THEY AGE AND OF COURSE THIS INCLUDES OUR BOTH OUR

13:18

FAMILY CAREGIVERS RIGHT WHICH WE HAVE OVER ALMOST FOUR MILLION FAMILY CAREGIVERS THAT HELP THEIR PARENTS THEIR

13:24

SPOUSES THEIR NEIGHBORS THEIR FRIENDS WITH EVERYDAY TASKS TO HELP THEM LIVE IN THEIR HOME AND COMMUNITY AS WELL AS THE

13:31

PAID WORKFORCE AND THEN OF COURSE GOAL FIVE IS AROUND AFFORDING AGING ENSURING THAT INDIVIDUALS HAVE ECONOMIC SECURITY

13:39

AS THEY LIVE THEIR LIFE SO WE'LL GO TO THE NEXT SLIDE AND SO A LOT OF 13:48

THE WORK THAT WE'RE GOING TO TALK ABOUT TODAY AND KIND OF FRAMING AROUND NAVIGATION NO WRONG DOOR IS REALLY

13:54

WITHIN THIS CONTEXT OF THE SYSTEMS CHANGE FRAMEWORK THAT THE DEPARTMENT OF

14:00

AGING HAS DEVELOPED AROUND LONG-TERM SERVICES AND SUPPORTS AND WE REALLY HAVE THESE FOUR PILLARS AROUND SYSTEMS CHANGE

14:08

TO IMPROVE ACCESS AND AVAILABILITY RIGHT OF THE SERVICES AND SUPPORTS PEOPLE WITH

14:13

DISABILITIES OLDER ADULTS NEED AND SO THIS IS ALL REALLY CENTERED AROUND 14:19

PERSON CENTERED PRINCIPLES WE HAVE THIS EQUITY FOCUS THAT WE STAY ROOTED IN AND

14:24

REALLY ENSURING THAT WE'RE DATA DRIVEN IN ALL THAT WE DO AROUND LONG-TERM SERVICES AND SUPPORTS SYSTEMS CHANGE SO

14:31

THESE FOUR PILLARS WE'RE REALLY GOING TO FOCUS TODAY'S CONVERSATION A LOT ON NAVIGATION RIGHT HOW DO WE INCREASE

14:39

ACCESS AND AVAILABILITY OF SERVICES BUT WE KNOW AND WE'RE GOING TO HEAR TODAY

14:44

FROM CARLOS WE'RE GOING TO HEAR FROM MARK RIGHT THAT PEOPLE REALLY HAVE THAT DIFFICULTY WITH FIGURING OUT HOW TO 14:51 ACCESS SERVICES OFTEN YOU DON'T KNOW WHAT'S OUT THERE YOU DON'T EVEN KNOW 14:56 THAT YOU NEED IT UNTIL YOU FIND YOURSELF IN A SITUATION WHERE MAYBE YOU HAVE A PARENT WHO IS DEVELOPING DEMENTIA 15:03 ALZHEIMER'S ACQUIRES A DIFFERENT DISABILITY AND SUDDENLY YOU'RE THRUST INTO THIS WORLD THAT YOU'VE NEVER KNOWN 15:09 ABOUT AND IT CAN BE REALLY COMPLICATED TO NAVIGATE SO TODAY WE'LL REALLY FOCUS A LOT ON THAT BUT THE SECOND PILLAR IS 15:16 AROUND ACCESS TO THE SERVICES THAT PEOPLE NEED ENSURING THAT PEOPLE ARE 15:22 ABLE TO REMAIN IN THEIR HOMES AND AVOID INSTITUTIONALIZATION AND THAT WE KNOW 15:29 THAT WHILE IT'S GREAT TO BE ABLE TO NAVIGATE AND FIND THE RESOURCES THAT YOU 15:34 NEED WE ALSO NEED CAPACITY WITHIN SOME OF THOSE SERVICES TO BE ABLE TO SERVE 15:39 INDIVIDUALS AND WE OFTEN HEAR OF YOU KNOW CERTAIN PROGRAMS THAT AREN'T IN 15:44 CERTAIN PARTS OF THE STATE THERE MIGHT BE LONG WAIT LISTS AND SO THE SECOND KIND OF PILLAR AROUND THIS IS HOW 15:50 DO WE CREATE BETTER ACCESS TO THE SERVICES THIS COULD INCLUDE 15:56 HOUSING THIS CAN INCLUDE BEHAVIORAL HEALTH SERVICES FOR OLDER ADULTS TO ADDRESS LONELINESS AND ISOLATION AND ONE 16:03 OF THE THINGS WE'VE BEEN WORKING ON IS OUR HOME AND COMMUNITY SERVICES HOME AND COMMUNITY BASED SERVICES GAP ANALYSIS 16:10 THAT WE'RE FINALIZING RIGHT NOW WILL BE RELEASING IN JUNE AND REALLY THEN DEVELOPING A ROADMAP OF ADDRESSING THOSE 16:18

GAPS WHAT CAN WE DO TO ADDRESS SOME OF THE GAPS IN LONG-TERM SERVICES AND SUPPORTS IN CALIFORNIA THE THIRD PILLAR

16:23

WHICH WE'LL ACTUALLY SPEAK TO A LITTLE BIT TODAY IS GOING TO BE AROUND WORKFORCE ENSURING THAT WE HAVE A

16:29

WORKFORCE THAT WILL MEET THE NEEDS OF OUR AGING POPULATION AND OF COURSE IS A CRITICAL GOAL OF THE MASTER PLAN ON

16:36

AGING AND FINALLY IS FINANCING HOW DO PEOPLE PAY FOR AND AFFORD THEIR LONG-TERM SERVICES OF AND SUPPORTS

16:43

MEDICAL PAYS FOR MUCH OF OUR LONG-TERM SERVICES AND SUPPORTS AND WE KNOW THAT THERE ARE MANY INDIVIDUALS THAT ARE IN

16:49

THE FORGOTTEN MIDDLE OR MISSING MIDDLE THAT HAVE A HARD TIME PAYING FOR THAT AND SO WE ARE WORKING ON STRATEGIES

16:55

AROUND ADDRESSING SERVICES FOR THAT FORGOTTEN MIDDLE SO WE'LL MOVE ON TO THE

17:01

NEXT SLIDE SO THERE ARE A FEW SPECIFIC MASTER PLAN AND AGING INITIATIVES WE'RE GOING TO GO OVER QUICKLY BECAUSE YOU'RE

17:06

GOING TO HEAR MORE ABOUT THEM TODAY SO ONE IS AROUND NAVIGATION AND THIS IS AROUND ESTABLISHING A STATUTORY

17:13

FRAMEWORK FOR DEVELOPMENT OF CALIFORNIA'S FIRST EVER STATEWIDE AGING AND DISABILITY NO WRONG DOOR SYSTEM

17:20

YOU'RE GOING TO HEAR MORE ABOUT THIS FROM MARK IN A LITTLE BIT WE'LL GO TO THE NEXT INITIATIVE WHICH IS AROUND

17:28

STRENGTHENING THE INTRA-AGENCY DISABILITY AND AGING COMMUNITY OF PRACTICE THIS HAS BEEN A

17:35

COLLABORATION ACROSS STATE DEPARTMENTS BETWEEN THE DEPARTMENT OF AGING THE DEPARTMENT OF DEVELOPMENTAL SERVICES

17:42

YOU'RE GOING TO HEAR FROM ALISON TODAY SPECIFICALLY ON WHAT WE'RE DOING TO ADDRESS THE NEEDS OF OLDER ADULTS AND

17:50

PEOPLE WITH DISABILITIES ACROSS THEIR LIFESPAN WITH A SPECIFIC FOCUS ACTUALLY

ON HOW DO WE BRIDGE AGING AND THOSE WITH DEVELOPMENTAL DISABILITIES AND

18:00

INTELLECTUAL DISABILITIES SO YOU HEAR MORE ABOUT THAT COMING UP THE NEXT ONE WE'LL GO TO THE NEXT SLIDE

18:07

IS AROUND WORKFORCE SO YOU'RE ALSO GOING TO HEAR ABOUT WORK THAT WE'RE DOING TO REALLY SUPPORT THAT NAVIGATION PIECE FOR

18:13

INDIVIDUALS WHO NEED ACCESS TO SERVICES SO MARK WILL BE GOING OVER THE NO

18:18

WRONG DOOR PIECE BUT YOU'RE GOING TO HEAR ABOUT SOME OF THE WORK WE'RE DOING AROUND COMMUNITY HEALTH WORKERS INCLUDING OUR CALS CONNECT PROGRAM

18:25

YOU'LL HEAR FROM BRIAN ON WORK SPECIFIC TO ALZHEIMER'S AND DEMENTIA AND HELPING SUPPORT PEOPLE NAVIGATE THE SERVICES

18:32

AND GET CONNECTED TO THE RESOURCES THAT THEY NEED SO WE'LL GO TO THE NEXT SLIDE

18:38

AND WITH THAT I ACTUALLY WANT TO REALLY MAKE SURE THAT WE'RE ROOTING THIS IN PERSON CENTER THE INDIVIDUALS RIGHT

18:43

EVERYTHING WE'RE DOING HERE IS REALLY ABOUT ENSURING INDIVIDUALS OUR COMMUNITY MEMBERS OUR FAMILY MEMBERS ARE GETTING

18:51

ACCESS TO THE SERVICES THAT THEY NEED AND ROOTING IT IN THAT PERSONAL 18:56

EXPERIENCE SO CARLOS THANK YOU FOR TAKING THE TIME TO SHARE SOME OF YOUR

19:02

OWN PERSONAL STORY WITH NAVIGATING ACCESS TO SERVICES AS A CAREGIVER AND

19:07

WITH YOUR FAMILY MEMBERS SO WITH THAT I'LL TURN OVER TO CARLOS 19:20

WE HAVE AUDIO TRY IT AGAIN CARLOS OKAY CAN YOU HEAR ME CAN HEAR YOU THANK YOU SOUNDS

19:27

GOOD CAN YOU SEE ME AND CAN SEE YOU YOU LOOK GREAT THANK YOU ALL RIGHT 19:45

YOU'RE GOING TO HAVE A CDA BACKGROUND OKAY SO FOR MANY PEOPLE ON THE CALL THAT 19:52 DON'T KNOW ME MY NAME IS CARLOS OLIVAS I AM A FAMILY CAREGIVER AND I CARE FOR MY 19:58 DAD LIVING WITH ALZHEIMER'S DEMENTIA 20:03 NAVIGATING SERVICES HAS BEEN VERY DIFFICULT FOR ME 20:09 ESPECIALLY IN THE BEGINNING 2015 I RECEIVED A PHONE CALL 20:15 FROM MY DAD'S DENTIST EXPLAINING THAT THEY HAD CONCERNS ABOUT MY DAD'S HEALTH 20:22 THEIR OBSERVATIONS FORCED US TO SEEK OUT 20:30 CONNECTION WITH MY DAD'S PRIMARY CARE PHYSICIAN MY DAD HAD AN APPOINTMENT 20:36 MY BROTHER FLEW IN FROM NORTH CAROLINA TOOK HIM AND EXPLAINED THE 20:42 CONCERNS HE WAS DIAGNOSED WITH MILD COGNITIVE IMPAIRMENT AND PRESCRIBED SOME 20:48 MEDICATIONS AND THEN THAT WAS IT THERE WAS NO FOLLOW-UP OR NEXT 20:56 STEPS TO KIND OF NAVIGATE US ON WHAT TO 21:05 DO I ENDED UP MOVING BACK HOME START CARING FOR 21:10 DAD I DIDN'T IDENTIFY AS A CAREGIVER AT THAT TIME I 21:16 JUST CALL MYSELF A SUPERVISOR ON MY DAD 21:23 SO I TOOK INITIATIVE AND STARTED RESEARCHING WHAT TO 21:29 DO SOMEWHERE ALONG THE LINES MY DAD'S PRIMARY CARE PHYSICIAN RETIRED AND WE 21:35 WERE GIVEN A NEW DOCTOR AND I END UP 21:41 SENDING A MESSAGE BUILDING A RAPPORT WITH HIM AND ASKING HIM FOR **REFERRAL AT**

THAT TIME THE APPOINTMENT WAS ANYWHERE FROM SIX TO EIGHT MONTHS 21:53 OUT AND IT WAS GOING TO TAKE SOME TIME IN THE MEANTIME WHAT WAS WE SUPPOSED TO 22:00 DO I DIDN'T KNOW ABOUT THE ALZHEIMER'S ASSOCIATION I DIDN'T KNOW ABOUT ALL THE OTHER RESOURCES THAT ARE 22:07 AVAILABLE AT THAT TIME BUT I STARTED LOOKING STARTED FIGURING OUT WHAT TO DO 22:15 ONCE WE GOT INTO A APPOINTMENT WITH A NEURO 22.22 DEPARTMENT WE ENDED UP FINDING OUT THAT MY DAD WAS ASSESSED WITH 22:29 ALZHEIMER'S DEMENTIA AND AFTER THAT APPOINTMENT WE WERE GIVEN A FOLDER WITH COMMUNITY BASED 22:36 RESOURCES AND SAID "HERE CALL THESE PEOPLE." AND THAT WAS KIND OF IT THERE 22:41 WAS NO CLEAR PATHWAY TO UNDERSTAND WHAT'S 22:47 NEXT HOW TO SUPPORT A LOVED ONE THAT'S GOING THROUGH THESE 22:55 CHALLENGES IT'S HARD TO CONVEY THE IMPACTS THAT WE AS A 23:02 FAMILY WERE GOING THROUGH 23.09 WE WERE WE WERE FACED WITH YOU KNOW TRYING TO 23:16 PRESERVE MY DAD'S DIGNITY AND HIS INDEPENDENCE WITH HIMSELF ALL THE WHILE 23:24 HE'S FORGETTING HOW TO DO CERTAIN TASKS IT WAS A CHALLENGE FOR ME BECAUSE 23:33 OF THE CONFLICTS THAT WE WERE HAVING I WAS TRYING TO RESPECT MY ELDER 23:39 THE PARENT THAT RAISED ME TAUGHT ME EVERYTHING I KNEW BUT I HAD THIS ILLUSION OF WHAT I 23.47THOUGHT WAS BEST FOR MY DAD THERE'S NO MANUAL THERE'S NO CLEAR

GUIDELINES HOW TO CARE FOR YOUR LOVED ONE

23:59

AND I THINK WHAT THIS TOPIC THAT WE'RE TRYING TO EXPRESS IS HOW DO WE GET THE

24:05

INFORMATION TO FAMILY CAREGIVERS EARLY ON AND SUPPORT THEM THROUGH THIS

24:13

JOURNEY HOW DO WE HOW DO WE TAKE THE STEPS TO ENSURE SUCCESS IN DEFINING

24:23

DEMENTIA CARE HOW DO WE

24:28

NORMALIZE IT HOW DO WE RETHINK AND REIMAGINE

24:34

DEMENTIA CARE INCORPORATING A FAMILY CENTRIC

24:40

APPROACH TO CARING FOR NOT JUST THE PERSON BUT THE FAMILY

24:50

I THINK IT'S OPEN FOR DISCUSSION TO SEE HOW WE CAN SUPPORT

24:57

FAMILY CAREGIVERS THROUGH THIS JOURNEY

25:04

IT'S A COMPLEX ISSUE BUT I THINK BEING A PART OF THIS

25:10

COMMITTEE WE CAN START TAKING STEPS TO EDUCATE SPREAD AWARENESS THAT 25:16

FAMILY CAREGIVERS ARE A PART OF ALZHEIMER'S AND RELATED

25:21

DEMENTIAS BUT WE NEED TO SUPPORT WE NEED TO BUILD NETWORKS 25:28

AND GROW THIS COMMUNITY WE ARE ALL PART OF THE CARE

25:36

PARTNERS AND WE NEED TO KIND OF EMBRACE THAT TRIBE COMMUNITY

25:43

TOGETHER AND TAKE LIGHT IN IT EMBRACE IT

25:52

SO THANK YOU VERY MUCH FOR LISTENING AND I HOPE WE CAN MAKE CHANGE 25:58

AND SUPPORT CAREGIVERS IN CALIFORNIA AND ACROSS THE NATION AND GLOBE THANK

26:04

YOU SO MUCH CARLOS FOR SHARING YOUR STORY THIS IS JUST ONE STORY I HEAR

THIS EVERY DAY AND I WISH THAT WE CAN DO MORE AND MORE AND I'M GLAD THAT WE

26:17

HAVE THIS COMMITTEE THAT'S ADVOCATING TO REALLY SUPPORT OUR CAREGIVERS I THINK

26:23

WE'LL MOVE ON AND WE'LL PAUSE FOR QUESTIONS LATER ON SO WE'LL

26:30

HAVE MARK GO AHEAD AND TAKE IT AWAY MARK OKAY I THINK CALLI'S JUST GETTING

26:37

ME SET UP RIGHT NOW BUT WE WERE ON PINNED SO I CAN'T CHANGE THE NAME 26:42

IT'S OKAY YOU CAN SPEAK YEAH I CAN JUST SPEAK GREAT WELL THANK YOU AND GOOD MORNING EVERYONE GREAT TO SEE YOU AGAIN

26:49

I WAS AT THE LAST COMMITTEE MEETING TALKING ON THIS VERY SAME TOPIC THE NO WRONG DOOR SYSTEM WE HAVE MY SLIDES

26:58

YEAH ROSIE WELL IS SHE

27:03

YES OKAY OKAY GREAT SO SOME OF THIS

27:09

YOU WOULD HAVE HEARD FROM LAST PRESENTATION THIS PRESENTATION IS A SLIGHTLY UPDATED VERSION OF WHAT I

27:14

PRESENTED LAST TIME IT HAS MORE I'D SAY INFORMATION AND SUPPORT FOR 27:19

DEVELOPING NO WRONG DOOR SYSTEM AND THEN I'LL ALSO PROVIDE SOME UPDATES IN TERMS OF WHERE WE ARE IN IN DEVELOPING OUR

27:26

SYSTEM BRIEFLY I'LL BE TALKING ABOUT THREE TOPICS NAVIGATING THE LTSS 27:32

SERVICES AND SUPPORT SYSTEM NO WRONG DOOR AND HOW WE THINK THAT THE NO WRONG

27:37

DOOR SYSTEM WILL HELP EVERYONE YOU KNOW SPEAKING TO CARLOS'S STORY REALLY BECOME

27:42

AWARE OF DIFFERENT SERVICES AND SUPPORTS AND WHAT DIFFERENT ENTITIES HAVE TO OFFER AND THEN WHAT ARE THE KEY ELEMENTS

27:49

OF A NO WRONG DOOR SYSTEM NEXT SLIDE GREAT SO AS ANA HAD SAID YOU KNOW

WE ALWAYS WANT TO START FROM THE PERSON- CENTERED VIEW IT'S ONE THING TO TALK ABOUT THE THEORIES AND CONCEPTS AND 28:02 FRAMEWORKS OF WHAT NO WRONG DOOR SYSTEM IS WHAT IT'S INTENDED TO DO BUT I THINK WE HAVE TO REALLY START WITH WHAT 28:08 PROBLEM ARE WE TRYING TO SOLVE AND SO WE CREATED THESE HUMAN-CENTERED PROFILES STARTING WITH AN INDIVIDUAL 28:15 WITH A DISABILITY WE NAMED HIM BEN AND YOU KNOW AGAIN A LOT OF THESE 28:22 STORIES ALL OF YOU HAVE ALREADY HEARD BUT YOU KNOW YOU COULD HAVE SOMEBODY WHO YOU KNOW USES A WHEELCHAIR AND THEY 28:28 MIGHT NEED ASSISTANCE IN THEIR HOME WITH PERSONAL CARE ASSISTANCE MODIFICATIONS EQUIPMENT PEER SUPPORT AND I THINK 28:36 THE QUESTION THAT WE COMMONLY HEAR IS WHERE DO I GO WHERE DO I FIND THESE SERVICES NEXT SLIDE 28.45THE SECOND PROFILE IS AN OLDER ADULT WHO NEEDS ASSISTANCE AND IN THIS CASE WE NAMED HER MARIA AND THIS IS SOMEONE 28:53 WHO HAD LOST HER HUSBAND AND IS NOW LIVING ALONE AND IS STRUGGLING WITH SOME 28:59 COGNITIVE ISSUES SO THE KIND OF SERVICES AND SUPPORTS SHE MAY BE LOOKING FOR IS BASIC HCBS SERVICES IT COULD BE 29:06 HOMED DELIVERED MEALS IT COULD BE TRANSPORTATION FALL PREVENTION 29.11 SERVICES MEMORY SUPPORT AS WELL AS SOCIAL ENGAGEMENT NEXT 29:17 SLIDE THE THIRD PROFILE IS CAREGIVERS AS WE JUST HEARD FROM CARLOS SO YOU KNOW 29:23 AGAIN A LOT OF STRUGGLES AND STRESSES CARING FOR SOMEBODY WHO MAY 29:28 HAVE DEMENTIA AS WELL AS CARING FOR LIKE OTHER PEOPLE IN YOUR LIVES YOU MAY ALSO HAVE RESPONSIBILITY FOR IT COULD BE 29:34 CHILDREN IT COULD BE OTHER RELATIVES RESPITE CARE ALWAYS A KEY 29:40

ISSUE CAREGIVER SUPPORT ADULT DAY SERVICES AND THEN JUST PLANNING SERVICES 29:46 NEXT SLIDE THEN THE LAST CATEGORY IS REALLY 29:52 PROFESSIONALS SO THIS COULD BE CLINICIANS THIS COULD BE DIRECT CARE WORKERS PEOPLE WHO REALLY WORK WITH 29:57 THE POPULATIONS THAT WE SERVE AND SO HAVING A NO WRONG DOOR SYSTEM CAN HELP 30:03 THEM UNDERSTAND WHAT RESOURCES THEY COULD OFFER TO THEIR CLIENTS. RIGHT NOW IT COULD BE A MYSTERY AND A LOT OF 30:09 INFORMATION GETS SPREAD BY WORD OF MOUTH EITHER KNOWING SOMEBODY OR BEING AWARE OF A COMMUNITY ORGANIZATION BUT IT'S 30:16 REALLY HIT AND MISS SO HOW CAN WE ACTUALLY GET INFORMATION AND ACCESS TO INFORMATION FOR PEOPLE ABOUT ALL THE 30:23 SERVICES THAT WE HAVE TO OFFER NEXT SLIDE OKAY SO THIS SPEAKS TO WHAT ANA STARTED 30:31 WITH YOU KNOW ALL OF THESE ISSUES THAT THESE DIFFERENT YOU KNOW POPULATIONS 30:36 ENCOUNTER ARE REALLY AS A RESULT OF OUR FRACTURED SYSTEM OF SERVICES AND SUPPORTS IN CALIFORNIA IF YOU WANT A 30:44 SERVICE OR SUPPORT YOU MAY WIND UP CONTACTING FIVE DIFFERENT ORGANIZATIONS 30:50 IF YOU NEED HELP WITH TRANSPORTATION YOU COULD BE CONTACTING A LOCAL TRANSPORT AGENCY IF YOU NEED HOUSING SUPPORT IT 30:57 COULD BE A STATE AGENCY IT COULD BE A LOCAL AGENCY IF YOU NEED MEAL SUPPORT AGAIN A VARIETY OF DIFFERENT MEAL 31:02 PROGRAMS COULD BE CONGREGATE COULD BE HOME DELIVERED COULD BE FOOD BANKS BUT THERE'S REALLY NO CENTRAL PLACE WHERE 31:08 ALL THESE POPULATIONS CAN GO TO REALLY SEE WHAT THE UNIVERSAL SUPPORTS ARE AND HAVE ASSISTANCE NAVIGATING THOSE 31:16

SUPPORTS AND THAT'S WHAT REALLY THE NO WRONG DOOR SYSTEM IS IS INTENDED TO HELP WITH NEXT SLIDE 31:23 SO AGAIN DEFINING THE PROBLEM YOU KNOW AGAIN I TO ALL OF US IN THIS ROOM 31:29 AND ON SCREEN I DON'T THINK ANY OF THIS IS NEWS THIS IS A SURVEY THAT WE DID 31:36 CALLED THE COMMUNITY ASSESSMENT SURVEY FOR OLDER ADULTS IN 2023 IT WAS А 31:41 STATEWIDE SURVEY OF OLDER ADULTS THROUGHOUT CALIFORNIA AND WE MEASURED THEM ON A VARIETY OF DIFFERENT 31:46 CHALLENGES THAT THEY HAVE AND THIS REALLY ROSE AS ONE OF THE TOP CONCERNS THAT THEY HAVE REALLY NOT HAVING ENOUGH 31:52 INFORMATION ABOUT SERVICES AND SUPPORTS IN CALIFORNIA SO ONLY 30% OF THESE POPULATIONS THINK THAT IN CALIFORNIA YOU 31:59 GET GOOD TO EXCELLENT SUPPORT IN NAVIGATING LTSS SERVICES BUT THAT 32:04 MEANS TWO OUT OF THREE OLDER ADULTS IN CALIFORNIA FEEL LIKE THEY EITHER 32:10 DON'T HAVE ACCESS OR VERY LIMITED INFORMATION ABOUT ACCESS TO SERVICES NEXT SLIDE 32:17 AND SIMILARLY ARP DOES A LONG-TERM SERVICES AND SUPPORTS SCORECARD SO THEY 32:23 LOOK AT THE QUALITY OF NAVIGATION SYSTEMS BY STATE IN CALIFORNIA RANKS IN 32:30 THE WEAK CATEGORY WHICH GIVEN OUR SIZE AND DEMOGRAPHICS POPULATION IS JUST HUGELY CONCERNING RIGHT ALTHOUGH WE 32:38 HAVE AN AGING AND DISABILITY RESOURCE CONNECTION SYSTEM IN PLACE THIS IS A COLLABORATION BETWEEN LOCAL AREA 32:44 AGENCIES ON AGING AND INDEPENDENT LIVING SERVICES TO ACT AS KIND OF LIKE LOCAL NO WRONG DOOR SERVICE HUBS IT'S NOT 32:51 STATEWIDE AND I CAN TELL YOU EVERY ADRC DOES THEIR DOES THEIR BUSINESS A LITTLE BIT DIFFERENTLY AND WE DON'T HAVE A NO 32:57

WRONG DOOR SYSTEM IN PLACE SO IT MAKES SENSE WHY WE'D FALL IN THE WEAK CATEGORY NEXT SLIDE

33:03

OKAY SO WHAT OUR VISION IS REALLY TO PRODUCE A SINGLE ACCESSIBLE SYSTEM TO

33:11

ALL OF OUR POPULATIONS THAT ALSO ALLOW PEOPLE ASSISTANCE WITH NAVIGATING DIFFERENT RESOURCES SO REALLY

33:17

STRUCTURING THAT SERVICE MODEL NEXT SLIDE THESE ARE THE OH SORRY ONE 33:25

BEFORE SO THESE ARE ALL THE DIFFERENT ELEMENTS I WON'T GET INTO EACH ONE OF

33:30

THESE ELEMENTS THAT WOULD TAKE A LONG TIME BUT I WILL HIGHLIGHT JUST A FEW OF THE KEY ELEMENTS THAT WE'RE LOOKING AT

33:36

FOR THE NO WRONG DOOR SYSTEM NEXT

33:42

SLIDE SO REALLY WHERE WE START IS HAVING A GOVERNANCE STRUCTURE IN PLACE AND WE

33:47

WERE VERY FORTUNATE TWO YEARS AGO TO RECEIVE A GRANT FROM THE ADMINISTRATION FOR COMMUNITY LIVING TO HELP BUILD OUT 33:53

WHAT'S CALLED A NO WRONG DOOR SYSTEM STATE LEADERSHIP COUNCIL SO WE CURRENTLY HAVE FIVE DEPARTMENTS PARTICIPATING

33:59

IN THAT COUNCIL CDA AND DEPARTMENT OF REHABILITATION ARE THE LEADS ON THE COUNCIL AND THEN WE'VE GOT DEPARTMENT OF

34:05

DEVELOPMENTAL SERVICES SOCIAL SERVICES AND HEALTH CARE SERVICES AS 34:11

ADDITIONAL PARTNERS ON THE COUNCIL IN TERMS OF WHO WOULD ACTUALLY HELP AND

34:18

ASSIST WITH THESE SERVICES AT THE LOCAL LEVEL WE'RE REALLY IDENTIFYING OUR LOCAL AREA AGENCIES ON AGING AND INDEPENDENT

34:23

LIVING CENTERS THEY TEND TO BE THE GO-TO ORGANIZATIONS TO HELP OLDER 34:29

ADULTS AND PERSONS WITH DISABILITIES AT THE LOCAL LEVEL SO WE THINK IT MAKES SENSE FOR THEM TO ACT AS THESE RESOURCE 34:35 NAVIGATORS AND THEN OF COURSE FOR TO ACTUALLY YOU KNOW ASSIST PEOPLE YOU HAVE

34:42

TO HAVE PROVIDERS IN PLACE AND WE ARE VERY FORTUNATE IN CALIFORNIA WE HAVE A VERY ROBUST SYSTEM OF PROVIDERS YOU KNOW 34:48

WE TALK ABOUT ALZHEIMER'S ORGANIZATIONS AND YOU KNOW CAREGIVING RESOURCE CENTERS HOUSING DEPARTMENTS TRANSPORTATION

34:55

DEPARTMENTS IHSS MEAL PROVIDERS WE ALWAYS SAY YOU KNOW OUR AAA'S OUR ILC'S

35:02

AND OUR PROVIDERS ARE THE BEST KEPT SECRET IN CALIFORNIA BECAUSE MOST PEOPLE DON'T KNOW THAT THESE SERVICES ACTUALLY

35:07

EXIST OR THAT THESE PROVIDERS EXIST NEXT SLIDE

35:13

SO THIS IS THE STRUCTURE OF WHAT A NO WRONG DOOR SYSTEM WOULD LOOK LIKE AT THE VERY TOP OF THE STRUCTURE IT WOULD BE

35:21

OUR STATE PARTNERS SO I TALKED ABOUT OUR STATE LEADERSHIP COUNCIL AND AS WE EXPAND OUR NO WRONG DOOR SYSTEM WOULD

35:26

REALLY ENCOMPASS ADDITIONAL SERVICES SUCH AS HOUSING OR TRANSPORTATION THAT STATE LEADERSHIP COUNCIL WOULD EXPAND

35:32

OVER TIME WE WOULD LOOK TO ESTABLISH WHAT'S CALLED A PROVIDER DIRECTORY SO THIS IS REALLY A SINGLE CENTRAL WEBSITE

35:39

THAT PEOPLE WOULD USE TO SEE WHAT SERVICE OFFERINGS THAT WE HAVE IT WOULD HAVE A DESCRIPTION OF THE DIFFERENT

35:45

SERVICES AS WELL AS A SEARCHABLE DIRECTORY YOU COULD DO IT BY ZIP CODE COUNTY AND THEN SERVICE TYPE TO REALLY

35:51

DRILL DOWN TO SEE WHAT SERVICES ARE AVAILABLE IN YOUR AREA AND FOR THOSE 35:57

OF YOU WHO'VE SEEN MAYBE 211 WEBSITES YOU KIND OF GET THE IDEA OF WHAT THE PROVIDER DIRECTORY MIGHT LOOK LIKE

36:04

NEXT LEVEL DOWN AS I MENTIONED PREVIOUSLY YOU'D HAVE YOUR LOCAL AREA AGENCIES ON AGING AND INDEPENDENT LIVING

36:10

CENTERS THAT WOULD BE THOSE LOCAL HUBS TO HELP PEOPLE NAVIGATE SERVICES IN THEIR AREA AND THEN THERE'S THE VARIETY 36:16 OF DIFFERENT PROVIDERS THAT THEY WOULD WORK WITH THAT I MENTIONED NEXT SLIDE 36:23 SO IN TERMS OF A SERVICE MODEL AND THIS REALLY SPEAKS TO THE NAVIGATORS 36:29 IF SOMEBODY GOES TO SAY THE CENTRAL NO WRONG DOOR WEBSITE AND THEY'RE 36:34 EXPLORING DIFFERENT OPTIONS THEY MIGHT HAVE QUESTIONS I DON'T KNOW THIS PROVIDER I NEED MORE INFORMATION WOULD 36:39 THEY SERVE MY NEEDS THEY WOULD THEN BE DIRECTED TO A LOCAL AREA AGENCY ON AGING OR INDEPENDENT LIVING CENTER THE CURRENT 36:46 MODEL AND IT REALLY VARIES AMONG AAA'S AND ILC'S CURRENTLY YOU COULD ASK FOR 36:52 YOUR LOCAL CONGREGATE NUTRITION SITE THEY'D GIVE YOU THE NAME AND PHONE NUMBER OF THAT SITE MAYBE WEBSITE AND 36:57 THEN THAT WOULD BE THE END OF THE CALL WHAT WE HOPE TO DO THROUGH A NO WRONG DOOR SYSTEM IS REALLY 37:02 ENHANCE THAT THROUGH WHAT WE CALL AN ENHANCED INA SO THAT WOULD REALLY BE OPTIONS COUNSELING AND REFERRALS IF 37:09 SOMEBODY CALLS TO ASK ABOUT A CONGREGATE NUTRITION SITE YOU COULD SAY "DO YOU HAVE TRANSPORTATION TO THAT SITE?" AND 37:15 THEN YOU MIGHT INVITE THEM TO ENGAGE IN A CONVERSATION ABOUT DO YOU HAVE 37:21 YOU KNOW LEGAL ASSISTANCE NEEDS OR DO YOU DO YOU NEED YOU KNOW CHORE HELP 37:26 AT YOUR HOUSE SO IT WOULD REALLY BE OPENING UP THE UNIVERSE OF OTHER SERVICES THEY COULD RECEIVE AND THEN 37:32 FINALLY THE THIRD TIER WOULD BE LIKE CRISIS MANAGEMENT CRISIS COUNSELING IF SOMEBODY'S BEING EVICTED FROM THEIR 37:38

HOUSE IF THEY'RE BEING DISCHARGED FROM A HOSPITAL AND THEY'RE GOING BACK TO THEIR HOME AND THEY NEED REALLY A PACKAGE OF 37:44

CASE SERVICES THAT'S WHERE YOU COULD HAVE A CASE MANAGER AT A TRIPLE A OR ILC REALLY HELPED WITH THAT PACKAGE

37:50

NEXT SLIDE AND THIS WOULD BE THE BASIC

37:55

OPERATING MODEL A LITTLE BIT OF A MESSY STRUCTURE BUT YOU KNOW IF YOU LOOK AT THE LEFT HAND SIDE YOU HAVE THE

38:02

SYSTEM USERS WHICH WERE ALL THE PROFILES THAT I MENTIONED AT THE BEGINNING OF THE PRESENTATION THEIR INITIAL ENTRY

38:08

POINT LIKELY WOULD BE THE NO WRONG DOOR WEBSITE AND THEN THEY WOULD NAVIGATE THAT WEBSITE FIND THE SERVICES SOME

38:14

COULD SELF-HELP IF THEY FIND PROVIDERS THAT WORK FOR THEM THEY COULD A LOT OF THESE WEBSITES HAVE DESCRIPTIONS OF THE

38:20

PROVIDERS ADDRESSES PHONE NUMBERS THEY COULD JUST CONTACT THEM DIRECTLY FOR SERVICES BUT IF THEY NEED ADDITIONAL

38:26

HELP THEY COULD GO TO YOUR LOCAL NAVIGATORS AND THEN THOSE NAVIGATORS NOT ONLY WOULD PROVIDE THEM INFORMATION

38:32

ABOUT THE SERVICES BUT THEY'D ALSO PROVIDE WARM REFERRALS SO GETTING THE PROVIDER ON THE LINE TRANSFERRING THE

38:39

CALL REALLY HELPING THEM IN THAT RESPECT AND THEN OF COURSE THEY'D BE RECEIVING THE SERVICES DIRECTLY

38:47

NEXT SLIDE SO JUST AN UPDATE AND I KNOW A

38:53

LOT OF THIS I COVERED IN OUR PRIOR PRESENTATION LAST YEAR OUR COMMUNICATIONS DEPARTMENT PUT OUT JUST

38:59

THIS BRILLIANT AGING RESOURCE GUIDE A HARD COPY GUIDE WE ALSO HAVE IT IN ONLINE FORMAT THAT DESCRIBES ALL THE KEY

39:06

SERVICES AND SUPPORTS THAT HELP OLDER ADULTS NOT ONLY PROGRAMS THAT ARE OFFERED BY CDA BUT ALSO OTHER

39:12

DEPARTMENTS SUCH AS SOCIAL SERVICES SO THAT THEY REALLY YOU KNOW AT LEAST IN THAT WAY CAN NAVIGATE SERVICES THE 39:20 NEXT ITERATION AS I MENTIONED IS THIS CENTRAL DIRECTORY OR WHAT WE CALL RESOURCE HUB WE DID MEET WITH A VARIETY 39:26 OF VENDORS IN THE FALL TO TALK ABOUT THEIR SERVICE DIRECTORY PORTALS 39:32 AND WE WERE VERY IMPRESSED THERE'S A LOT OF PROVIDERS THAT COULD ARE WILLING TO WORK WITH US TO PROVIDE THIS VIA 39:39 CONTRACT SO THAT GIVES US A LOT OF HOPE THAT WE WOULD BE ABLE TO LAUNCH THIS SYSTEM AND THEN THE CONTACT 39:47 SOLUTION SO AGAIN THIS IS OUR LOCAL NAVIGATORS BEFORE WE LAUNCH A SYSTEM 39:53 LIKE THIS WE'D REALLY WANT TO WORK COLLABORATIVELY WITH THE AAA'S AND ILC'S TO MAKE SURE THAT THEY HAVE THE RESOURCES TO PROVIDE THIS ENHANCED LEVEL 40:00 OF ASSISTANCE AND ALSO THAT THEY BE PREPARED FOR THE ADDITIONAL CALLS 40:05 THAT THEY MAY RECEIVE ONCE WE HAVE A NO WRONG DOOR WEBSITE UP AND RUNNING ALL RIGHT NEXT SLIDE AND THEN 40.12 MARKETING BRANDING AND OUTREACH AGAIN IT'S YOU CAN BUILD A GREAT SYSTEM BUT 40:17 IF NOBODY KNOWS A SYSTEM EXISTS THEN WHAT'S THE POINT SO WE'RE 40:22 SPENDING A LOT OF TIME RIGHT NOW WORKING ON SOME BRANDING AROUND THE SYSTEM THE FIRST OUESTION IS WHAT DO YOU 40:29 CALL IT RIGHT BECAUSE YOU KNOW IN GOVERNMENT WE LOVE ACRONYMS YOU KNOW I THREW AROUND TERMS LIKE AAA'S AND 40:36 ILC'S IF I MENTION THOSE TO MY FRIENDS THEY HAVE NO IDEA WHAT I'M TALKING ABOUT SO IT'S LIKE WHAT'S A REALLY SIMPLE 40.43 EASY TO UNDERSTAND NAME IT COULD BE YOU KNOW LIKE EVEN THE TERM NO WRONG DOOR ISN'T GOING TO MAKE A LOT OF SENSE TO 40:48

MOST PEOPLE IT WOULD PROBABLY BE LIKE AGING AND DISABILITY RESOURCE CENTER OR

40:53

RESOURCE HUB SOMETHING THAT'S REALLY DESCRIPTIVE IN PLAIN LANGUAGE THAT PEOPLE CAN REALLY RELATE TO SO RIGHT NOW

40:59

THAT'S KIND OF THE FIRST THING IS GIVING IT A NAME AND THEN PROBABLY SOME SORT OF LOGO TAGLINE AND THEN ONCE WE GET TO

41:07

THAT POINT IT'S REALLY GOING TO BE ABOUT MARKETING HOW DO YOU 41:13

PUT MATERIALS TOGETHER THAT WILL BE ATTRACTIVE TO PEOPLE THAT WILL GET THEM INTERESTED AND THEN OUTREACH SO WE

41:20

WOULD PROBABLY DO A LOT OF INFORMATION THROUGH SOCIAL MEDIA MAYBE THROUGH ONLINE YOU KNOW RADIO SPOTS

41:28

ADS MAYBE TV ADS GET SOME WORD OF MOUTH GOING BUT ALSO WORKING CLOSELY WITH

41:33

PROVIDERS AND OTHER PROFESSIONALS RIGHT NOW WE HEAR A LOT OF PEOPLE HEAR ABOUT YOU KNOW AAA'S AND ILC SERVICES

41:39

THROUGH LIKE PROFESSIONALS LIKE CLINICIANS AND PLACES LIKE THAT SO YOU KNOW WHO ARE THOSE LOCAL PROVIDERS THAT

41:46

CAN REALLY GET THE WORD AROUND BUT YEAH WHAT WE'VE HEARD IN OTHER STATES DOING OUR RESEARCH IS THAT'S REALLY HOW

41:52

A NO WRONG DOOR SYSTEM IS BEST PUBLICIZED IT'S MAINLY THROUGH WORD OF MOUTH REALLY JUST GETTING THE WORD OUT

41:58

THERE SO YEAH NEXT SLIDE

42:04

YEAH AND THAT'S BASICALLY IT JUST WANT TO PROVIDE YOU A BRIEF UPDATE ON WHERE WE ARE WITH THE NO WRONG DOOR SYSTEM

42:09

RIGHT NOW A LOT OF WORK JUST BEING DONE ON WHAT AN ENHANCED INFORMATION ASSISTANCE SERVICE MODEL LOOKS LIKE

42:15

DOING SOME WORK ON BRANDING AND THEN LIKE I SAID WE DID SOME RESEARCH ON WHAT A WEBSITE WOULD BE AND WHO COULD PROVIDE 42:22 THAT WEBSITE IN TERMS OF IMPLEMENTATION A LITTLE UNCERTAIN RIGHT NOW WE STILL HAVE A LOT MORE RESEARCH TO DO AND OF 42:28 COURSE LAUNCHING A SYSTEM LIKE THIS WOULD REQUIRE MONEY SO YOU KNOW WE'D ALSO HAVE TO LOOK TO SECURE FUNDING FOR 42:34 THIS BUT YEAH JUST WANTED TO PROVIDE AN UPDATE ON OUR NO WRONG DOOR WORK AND 42:39 HAPPY TO TAKE ANY QUESTIONS AT THE END THANK YOU SO MUCH MARK FOR THE INTEREST OF TIME WE'RE GOING TO MOVE 42:47 FORWARD TO BRIAN TO SHARE CALZ CONNECT UPDATE 42:54 GOOD MORNING CAN YOU HEAR ME OKAY YOU SOUND GREAT BRIAN EXCELLENT THANK YOU 43:00 CARROLL I JUST WANT TO SAY THANK YOU SO MUCH FOR THIS OPPORTUNITY TO SHARE AN 43:05 OVERVIEW OF CDA'S CALZ CONNECT PROGRAM MY NAME IS BRIAN CARTER I'M A MANAGER 43:11 HERE WITH CDA'S DIVISION OF POLICY RESEARCH AND EQUITY BEFORE I GET STARTED 43:17 I WOULD LIKE TO ACKNOWLEDGE THAT TODAY MAY 1ST MARKS THE BEGINNING OF OLDER 43:22 AMERICANS MONTH AND MENTAL HEALTH AWARENESS MONTH SO TODAY'S ROBUST 43:28 DISCUSSION ABOUT ALZHEIMER'S DISEASE AND RELATED CONDITIONS SEEMS OUITE 43:34 FITTING ALL RIGHT SO THE SOURCE OF CALZ CONNECT FUNDING STEMS FROM AN ADMINISTRATION FOR 43:42 COMMUNITY LIVING COOPERATIVE AGREEMENT ALZHEIMER'S DISEASE PROGRAM INITIATIVE 43:48 GRANT FOR STATE ENTITIES THE OBJECTIVES OF THE CALZ CONNECT PROGRAM ONE OF THE 43:56

OBJECTIVES IS TO CREATE AND SUSTAIN A DEMENTIA CAPABLE HOME AND COMMUNITY-BASED SERVICES SYSTEM FOR 44:04 PEOPLE LIVING WITH ALZHEIMER'S DISEASE AND RELATED CONDITIONS AND THEIR CAREGIVERS USING AS MARK POINTED OUT A 44.12 NO WRONG DOOR APPROACH WE ALSO HAVE AN OBJECTIVE TO ENSURE ACCESS TO 44:18 COMPREHENSIVE SUSTAINABLE SET OF QUALITY SERVICES THAT ARE DEMENTIA CAPABLE AND 44:23 THAT PROVIDE INNOVATIVE SERVICES TO PEOPLE LIVING WITH DEMENTIA AND THEIR 44:29 CAREGIVERS NEXT SLIDE PLEASE NOW IN DEVELOPING THE PROPOSAL THE CDA 44:36 TEAM LOOKED AT EVIDENCE-BASED MODELS AND ULTIMATELY SELECTED THE CARE ECOSYSTEM PROGRAM WHICH WAS DEVELOPED BY THE 44:43 UNIVERSITY OF CALIFORNIA SAN FRANCISCO SOME OF THE REASONS THE CARE ECOSYSTEM 44:48 MODEL WAS CHOSEN IS BECAUSE ONE THE SUPPORT IS PROVIDED BY TELEPHONE MAKING 44:55 IT MORE ACCESSIBLE IN RURAL AND REMOTE AREAS AND HELPS REDUCE BARRIERS TO 45:01 ACCESS FOR MARGINALIZED GROUPS BARRIERS SUCH AS TRANSPORTATION LANGUAGE ACCESS 45:08 OR EVEN A LACK OF INTERNET CONNECTIVITY IT'S ALSO A COMPARATIVELY LOW-COST 45:14 INTERVENTION SINCE IT USES ALLIED HEALTH PROFESSIONALS AS OPPOSED TO LICENSED PERSONNEL AND 45:23 AS WE LOOK AT PROJECTED DEMAND AND THE GROWING POPULATION OF PEOPLE LIVING WITH 45:28 ALZHEIMER'S AND DEMENTIA IN CALIFORNIA ITS PRACTICAL APPLICATION MAKES IT MORE 45:34

SCALABLE AND REPLICABLE ACROSS THE STATE NOW IN ADDITION TO CARE ECOSYSTEM WE'VE 45:41 ALSO INCORPORATED HOME MEDS WHICH IS AN EVIDENCE-BASED TOOL FOR IDENTIFYING 45:49 POTENTIAL PATIENT MEDICATION RELATED HAZARDS A PLAN TO SAFELY MANAGE 45:58 PRESCRIPTION AND OVER-THE-COUNTER MEDICATIONS IS CRITICAL TO AVOID MEDICATION RELATED PROBLEMS THE HOME 46:06 MEDS INVOLVES A PHARMACIST CONSULTATION AND RECOMMENDATIONS WHERE THE SYSTEM 46:11 FLAGS POTENTIAL ISSUES HOME MEDS IS BEING OFFERED TO BOTH PERSONS WITH 46:16 DEMENTIA AND THEIR CAREGIVERS BECAUSE CAREGIVERS OFTEN HAVE MEDICATION ISSUES 46:21 OF THEIR OWN AND HOME MEDS IS ALSO IMPORTANT FOR CDA SINCE OUR **PROGRAM IS** 46:26 NOT BASED IN A HEALTH CARE SYSTEM ALL RIGHT NEXT SLIDE SO I'D LIKE 46:34 TO NOW TELL YOU ABOUT THE MULTI-DISCIPLINARY TEAM THAT IS INVOLVED 46:39 IN THE CALZ CONNECT PROGRAM BECAUSE THE PROGRAM DESIGN INCORPORATES THE CORE 46:45 COMPONENTS OF THE CARE ECOSYSTEM EVIDENCE-BASED PROTOCOLS TO SUPPORT A 46:50 PERSON LIVING WITH DEMENTIA AND THE NEEDS OF THE CAREGIVER THE PROTOCOLS ADDRESS SAFETY BEHAVIORS 46:58 CAREGIVER SUPPORT AND ADVANCED PLANNING AND THE CARE ECOSYSTEM MODEL IS BOTH 47:05 PERSON CENTERED AND CUSTOMIZED CALZ CONNECT INVOLVES A 47.11 MULTI-DISCIPLINARY TEAM WHICH INCLUDES THE DYAD WHICH MEANS THE PERSON LIVING 47:18 WITH DEMENTIA AND A CAREGIVER THE CAREGIVER CAN BE A FAMILY MEMBER A

FRIEND OR PAID STAFF WHO SUPPORTS THE PERSON LIVING WITH DEMENTIA AND IS 47:28 WILLING TO PARTICIPATE IN THE PROGRAM IT ALSO INVOLVES A COMMUNITY HEALTH 47.35 WORKER OR INCORPORATES A CARE TEAM NAVIGATOR WHO BUILDS RAPPORT WITH THE 47:40 DYAD LEARNS MORE ABOUT THEIR SITUATION INCLUDING THEIR STORIES THEIR VALUES 47:47 THEIR PREFERENCES RESOURCES AND THEIR LIVING SITUATION THE 47.53CARE TEAM NAVIGATOR HELPS THEM PERSONALIZE THEIR CARE TO ACTIVELY SUPPORT THE DYAD AND EMPOWERS THE 48:00 CAREGIVER TO BE AN ADVOCATE FOR THE PERSON LIVING WITH DEMENTIA THEY PROVIDE 48:06 SUPPORT LINKAGES TO COMMUNITY-BASED RESOURCES ON ADVANCED CARE 48.12 PLANNING AND CARE COORDINATION THE CALZ CONNECT PROGRAM UTILIZES COMMUNITY 48:19 HEALTH WORKERS TO FILL THE ROLE OF CARE TEAM NAVIGATOR THEN THERE THE CLINICAL TEAM 48:26 WHICH THE PROGRAM ALSO INCORPORATES THE SUPPORT OF A CLINICAL TEAM WHO ARE 48:32 INDIVIDUALS WITH ALZHEIMER'S AND DEMENTIA EXPERTISE THE CALZ CONNECT 48:38 MULTIDISCIPLINARY TEAM INCLUDES A MASTERS OF SOCIAL WORK FROM ALZHEIMER'S LOS ANGELES AND A REGISTERED NURSE 48.46 CONSULTANT FROM THE PARTNERS IN CARE FOUNDATION THE MULTIDISCIPLINARY TEAM 48:52 MEETS FREQUENTLY WITH THE COMMUNITY HEALTH WORKERS TO OFFER GUIDANCE AND 48:57 DISCUSS CASES AND THEY ARE ALSO AVAILABLE FOR CONSULTATION WHEN NEEDED. 49:04

PLEASE ADVANCE NOW I'D LIKE TO TALK ABOUT THE 49:10 PROJECT PARTNERS WHO ARE INVOLVED IN OUR PROJECT AND ADMINISTERING THE PROGRAM AT 49:15 THE LOCAL LEVEL IN THEIR RESPECTIVE COMMUNITIES WE HAVE TWO AREA AGENCIES ON 49:21 AGING LOCATED IN IMPERIAL AND VENTURA AND THE MARIN CENTER FOR INDEPENDENT 49:28 LIVING NOW EACH OF THESE AGENCIES SERVES OLDER ADULTS AND PEOPLE WITH DISABILITIES 49:34 THROUGH A DESIGNATED OR DEVELOPING AGING AND DISABILITY RESOURCE CONNECTION 49:40 PROGRAM AGAIN REFERRING BACK TO MARK'S PRESENTATION WE ARE ALSO IN THE PROCESS 49:46 OF ONBOARDING A FOURTH COMMUNITY HEALTH WORKER AT ALZHEIMER'S LOS ANGELES NOW 49:52 CDA SELECTED THESE SITES FOR THE STRENGTH OF THEIR EXISTING PROGRAMS AND 49:57 FOR THEIR GEOGRAPHIC DIVERSITY REPRESENTING NORTHERN CENTRAL COAST AND 50:03 SOUTHERN CALIFORNIA NOW IN CHOOSING THESE PARTNERS WE LOOKED AT FACTORS SUCH 50:08 AS SIZE AND DIVERSITY OF THE OLDER ADULT POPULATION THE PREVALENCE OF ALZHEIMER'S 50.15AND THE PERCENTAGE OF OLDER ADULTS WHO WERE MEDICAL ELIGIBLE AND JUST TO 50:21 PROVIDE AN EXAMPLE IMPERIAL COUNTY HAS THE NINTH HIGHEST ALZHEIMER'S PREVALENCE 50:28 OF ANY COUNTY IN THE NATION ACCORDING TO A 2023 ARTICLE PUBLISHED IN THE 50:35 ALZHEIMER'S AND DEMENTIA JOURNAL NOW BY UTILIZING THE AGING AND

50:40 DISABILITY RESOURCE CONNECTION PROGRAMS THIS APPROACH WILL PROVIDE STREAMLINED 50:46 ACCESS TO DEMENTIA CARE INFORMATION AND SUPPORTS WITHIN A COMMUNITY HUB THAT 50:54 OFFERS RESOURCE NAVIGATION ASSISTANCE AND CARE PLANNING WE ALSO HAVE AN MSW OR 51:01 MASTERS OF SOCIAL WORK DOCTOR OF EDUCATION FROM THE GIGAS GROUP ACTING AS 51:07 A THIRD PARTY EVALUATOR FOR THE PROGRAM NEXT SLIDE 51:14 PLEASE SO WHAT ARE THE OUTCOMES WELL THE SUMMATIVE EVALUATION DATA COLLECTED TO 51:22 DATE SPECIFICALLY RELATED TO CAREGIVER BURDEN AND QUALITY OF LIFE SCORES HAS 51:28 BEEN PROMISING THE DATA HAS REVEALED THAT CAREGIVER BURDEN SCORES WERE 51:34 TRENDING IN THE RIGHT DIRECTION EVALUATION OF THE PRE AND POST SCORES. 51:40 SHOWED THAT THE SENSE OF BURDEN DECREASED AS PARTICIPANTS EXITED THE 51:46 PROGRAM COMPARED TO WHEN THEY STARTED ADDITIONALLY OUALITY OF LIFE 51:52 SCORES WERE ALSO TRENDING IN THE RIGHT DIRECTION CAREGIVERS WERE REPORTING THAT THE 51:58 OUALITY OF LIFE OF THE PERSONS WITH DEMENTIA HAD INCREASED FROM WHEN THEY 52:03 STARTED THE PROGRAM TO WHEN THEY COMPLETED THE PROGRAM NOW THESE SCORES 52:08 CONFIRM THAT SUPPORT BEING PROVIDED BY THE SEEK CARE COMMUNITY HEALTH WORKERS 52:15 IS HELPING TO REDUCE CAREGIVER BURDEN AND STRESS AND INCREASE THE

QUALITY OF

LIFE FOR THE PERSONS LIVING WITH ALZHEIMER'S AND OR DEMENTIA

52:26

AND WE ARE ALSO CONFIDENT IN THE DEVELOPMENT OF DEMENTIA CAPACITY NOT 52:32

ONLY IN CALIFORNIA'S PROJECT SITES BUT EVENTUALLY THROUGHOUT

CALIFORNIA'S NO

52:37

WRONG DOOR NETWORK AND WITH THAT I'LL TURN IT BACK OVER

52:44

THANK YOU SO MUCH BRIAN FOR GIVING THAT QUICK UPDATE I KNOW A LOT OF MY 52:50

PATIENTS AND THEIR FAMILY MEMBERS HAVE BEEN BENEFITING IN MARIN COUNTY FROM THIS PROGRAM SO I CAN SHARE THAT IT'S

52:56

BEEN POSITIVE OUR NEXT PRESENTER IS ALISON FROM BRIDGING AGING AND 53:02

DISABILITY NETWORKS THANK YOU SO MUCH

53:07

HI THANK YOU WAIT FOR MY

53:14

SLIDE GOOD MORNING EVERYONE THANK YOU FOR HAVING ME HERE TODAY I AM ALISON GIANNINI I AM WITH THE DEPARTMENT OF

53:21

DEVELOPMENTAL SERVICES WHICH I'LL ALSO REFER TO AS DDS I AM VERY EXCITED TO DISCUSS THE BRIDGING AGING AND

53:27

DISABILITIES NETWORK GRANT WHICH IS BEING CO-LED BY DDS AND THE CALIFORNIA DEPARTMENT OF AGING OR CDA

53:32

NEXT SLIDE PLEASE A LITTLE BIT ABOUT THE BRIDGING AGING AND DISABILITY 53:38

NETWORK GRANT YOU MAY HEAR IT REFERRED TO AS BADN OR BADEN THE ADMINISTRATION

53:44

FOR COMMUNITY LIVING OR ACL AWARDED THIS GRANT TO THE NATIONAL ASSOCIATION OF COUNCILS ON DEVELOPMENTAL DISABILITIES

53:50

OR NACDD TO BUILD A COMMUNITY OF PRACTICE WITH THE OBJECTIVE TO BETTER CONNECT

53:56

PROGRAMS AND SERVICES FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES OR IDD AND AGING PROGRAMS AT 54:04 THE STATE LEVEL THE NACDD WAS TASKED TO BUILD A NATIONAL COMMUNITY OF PRACTICE 54:09 OF 15 STATES AND THEY MADE IT TO 17 STATES THE WORK GROUP FOR EACH STATE 54:15 WHICH FORMS THAT LOCAL COMMUNITY OF PRACTICE IS REFERRED TO AS OUR STATE ALLIANCE TEAM CDS AND CDA CO-LEADING THIS GRANT 54:23 TOGETHER IT IS A FIVE-YEAR GRANT WE ENTERED IN THE SECOND YEAR OF THE GRANT 54:28 EACH PARTICIPATING STATE OR TERRITORY IS WORKING TO IMPROVE SUPPORT FOR INDIVIDUALS WITH INTELLECTUAL AND/OR 54:35 DEVELOPMENTAL DISABILITIES AND THEIR FAMILIES AS THEY PLAN FOR THE FUTURE ACROSS THE LIFESPAN THE STATE ALLIANCE 54:41 TEAM IS MADE UP OF REPRESENTATIVES FROM STATE DEPARTMENTS AGENCIES AND COMMUNITY-BASED ORGANIZATIONS EACH 54:48 LOCAL COMMITTEE OF PRACTICE WAS RESPONSIBLE FOR CREATING A WORK PLAN **RESPONSIVE TO THE GRANTS** 54:53 **OBJECTIVE NEXT SLIDE PLEASE OOPS** 54:58 I THINK WE NEED TO GO BACK ONE THERE YEP THAT'S PERFECT THANK YOU 55:05 THEREFORE THE CALIFORNIA STATE ALLIANCE TEAM WHICH IS OUR LOCAL COMMUNITY OF PRACTICE CREATED A ROBUST WORK PLAN 55:11 RESPONSIVE TO THE GRANTS OBJECTIVE WHICH IS IMPROVING AGING SERVICES FOR INDIVIDUALS WITH IDD AS WELL AS THEIR 55:18 AGING FAMILIES OVERALL THE STATE ALLIANCE TEAM THROUGH THE WORK PLAN IS SET TO ACCOMPLISH THE FOLLOWING 55:24 ESTABLISHED A STATEWIDE COMMUNITY OF PRACTICE WHICH WE HAVE DONE WITH THE MISSION TO BRIDGE IDD 55:29 AND AGING NETWORKS TO SUPPORT AGING INDIVIDUALS WITH IDD AND THEIR CAREGIVERS ALL OF OUR GOALS ARE AIMED AT NOT ONLY 55:37 PEOPLE WITH IDD WHO MAY BE AGING BUT ALSO THEIR CAREGIVERS AS I STATED. MAY BE

AGING BECAUSE WE ALSO WANT TO EMPHASIZE THE NEEDS FOR SUPPORTS AND SERVICES FOR THE CAREGIVERS WHO MAY BE AGING THE 55:48

INDIVIDUAL ACCESSING OUR SYSTEM MAY NOT BE ENCOUNTERING AGE RELATED EXPERIENCES BUT PERHAPS THEIR CAREGIVER IS SO HOW 55:55

CAN WE LEVERAGE THESE RESOURCES TO BE RESPONSIVE TO THE NEEDS OF THE CAREGIVER AS WELL WE ARE ALSO WORKING TO INCREASE THE

56:02

ACCESSIBILITY OF CULTURALLY AND LINGUISTICALLY RESPONSIVE AGE RELATED SERVICES RESOURCES AND SUPPORTS FOR

56:10

AGING INDIVIDUALS WITH IDD AND THEIR CAREGIVERS SO IN OTHER WORDS IDENTIFYING THE EXISTING RESOURCES AND SUPPORTS

56:16

IDENTIFYING GAPS AND SUPPORTING WITH THE NAVIGATION TO SERVICES A COMPONENT BUILT IN THROUGHOUT OUR WORK PLAN IS THE 56:23

CONCEPT OF LEVERAGING EXISTING RESOURCES THEREFORE WHAT ARE THE RESOURCES THAT ARE OUT THERE HOW CAN WE INCREASE EASE 56:29

OF NAVIGATION TO THEM INCREASING NAVIGATION BY CULTURALLY AND LINGUISTICALLY RESPONSIVE INFORMATION

56:34

SHARING FOR FAMILIES AND ENTITIES THAT SERVE THEM CREATING INFORMATIONAL MATERIALS THAT ARE CATEGORIZED ORGANIZED 56:41

GEOGRAPHICALLY AND PRESENTED IN A VARIETY OF LANGUAGES AND FORMATS ADDITIONALLY WE ARE WORKING TO

56:47

INCREASE AVAILABILITY OF CULTURALLY AND LINGUISTICALLY RESPONSIVE FUTURE PLANNING SERVICES AND SUPPORTS FOR AGING

56:53

INDIVIDUALS WITH IDD AND THEIR CAREGIVERS THIS ALSO TIES IN TO THE NAVIGATION OF RESOURCES THROUGH CREATING AN INVENTORY 57:00

OF CULTURALLY AND LINGUISTICALLY RESPONSIVE TOOLS BEST PRACTICES AND RESOURCES FOR THAT FUTURE PLANNING NEXT

57:06

SLIDE PLEASE SO A LITTLE BIT WHY THIS PARTNERSHIP AND THIS GRANT ARE SO IMPORTANT AS WE KNOW

57:12

AS OUR LIFE EXPECTANCY INCREASES OUR SUPPORT NEEDS MAY CHANGE THERE ARE CURRENTLY MORE THAN 450,000 CALIFORNIANS

57:19

WITH IDD SERVED BY OUR REGIONAL CENTER SYSTEM IN THE CATEGORY OF INDIVIDUALS AGED 40 TO 59 THERE'S CURRENTLY A LITTLE 57:27

OVER 43,000 AND INDIVIDUALS 60 YEARS AND OLDER THEY'RE A LITTLE OVER 20,000 OF

57:32

THAT 60 YEARS AND OLDER BRACKET A LITTLE OVER 2500 OF THOSE INDIVIDUALS 57:38

ALSO HAVE A DIAGNOSIS OF DOWN SYNDROME PER THE FACT SHEET PROVIDED BY THE NATIONAL TASK GROUP ON INTELLECTUAL

57:44

DISABILITIES AND DEMENTIA PRACTICE ADULTS WITH IDD CAN DEVELOP DEMENTIA AS THEY GET OLDER THE TYPES OF DEMENTIA

57:51

THAT AFFECT PEOPLE WITH IDD ARE SIMILAR TO THOSE THAT AFFECT PEOPLE WITHOUT SUCH A DISABILITY AND STUDIES IN THE UNITED

57:56

STATES HAVE FOUND THAT THE PREVALENCE OF DEMENTIA IN PERSONS WITH IDD TO BE ABOUT THE SAME AS IN THE GENERAL POPULATION

58:02

HOWEVER ALZHEIMER'S DEMENTIA IS THE MOST PROMINENT TYPE OF DEMENTIA AMONG ADULTS WITH DOWN SYNDROME THERE'S ALSO A HIGHER 58:09

RATE AMONG YOUNGER ADULTS WITH DOWN SYNDROME SO ABOUT 20% OF ADULTS WITH DOWN SYNDROME AGED 40 YEARS AND OLDER

58:16

HAVE ALZHEIMER ONSET OF ALZHEIMER'S DISEASE GENERALLY OCCURS IN ADULTS WITH IDD IN

58:21

THEIR LATE 60S HOUR FOR ADULTS WITH DOWN SYNDROME AS I WAS DISCUSSING ONSET CAN BE MUCH EARLIER GENERALLY IN THEIR EARLY

58:28

50S AND MOST STUDIES SHOW THAT THE AVERAGE AGE OF ONSET IS AROUND 52 FOR THE OTHER TYPES OF DEMENTIA THERE'S MORE

58:35

VARIABLE AGES OF ONSET AND THE NATIONAL DOWN SYNDROME SOCIETY RECOGNIZES THE STUDY BY FORTEA ET AL

58:43

2021 AND HAS STATED THE RISK OF DEVELOPING ALZHEIMER'S DISEASE INCREASES WITH EACH DECADE OF LIFE AFTER THE AGE 58:49

OF 40 AND THE OVERALL LIFETIME RISK OF DEVELOPING ALZHEIMER'S DISEASE FOR AN INDIVIDUAL WITH DOWN SYNDROME IS MORE 58:55 THAN 90% NEXT SLIDE PLEASE 59:03 AND SO ON THIS SLIDE SHIFTING GEARS A LITTLE BIT WE'RE LOOKING AT THE POPULATION 40 YEARS AND OLDER BY LIVING 59:09 ARRANGEMENT I INCLUDED DATA FOR PEOPLE WITH IDD AS YOUNG AS 40 AND I DID SO 59:15 BECAUSE EVEN THOUGH SOMEONE IN THEIR 40S MAY NOT BE NAVIGATING AGE RELATED EXPERIENCES THEY QUITE POSSIBLY HAVE A 59:21 CAREGIVER WHO IS AND LOOKING AT THIS DATA WE SEE THE LARGEST NUMBER OF FOLKS ARE LIVING AT HOME WITH A PARENT FAMILY 59:28 OR GUARDIAN SO AGAIN REALLY FOCUSING ON NOT JUST THE INDIVIDUAL WITH IDD WHO IS AGING BUT ALSO THEIR 59:35 CAREGIVER NEXT SLIDE 59:40 PLEASE AND THEN ON THE FLIP SIDE OF THAT WHEN 59:46 WE SORRY I JUST GOT A WEIRD NOTIFICATION I DON'T KNOW IF ANYONE SAW THAT OKAY ON THE FLIP SIDE OF THAT WHEN WE 59:52 GRAPH THE DATA LOOKING AT INDIVIDUALS 60 YEARS AND OLDER THE PERCENTAGE OF INDIVIDUALS LIVING IN THE HOME OF A 59:57 PARENT FAMILY OR GUARDIAN DROPS TO 20% AND THE PERCENTAGE OF INDIVIDUALS IN A COMMUNITY CARE FACILITY INCREASES TO 33% 1:00:05 SO THEY FLIP SO WE SEE THAT IN THAT AGE RANGE RIGHT WHEN WE TRANSITION AS WE 1:00:10 GET OLDER OUR LIVING ARRANGEMENT CHANGES AND THERE IS A WHOLE HOST OF NEW 1:00:15 SERVICES AND NEEDS THAT MAY BE NECESSARY 1:00:22 NEXT SLIDE PLEASE AND LASTLY AS PART OF OUR DATA ALLIANCE TEAM WE HAVE ADDED AN AGING 1:00:29

INCLUSION RESOURCES WEB PAGE ON THE DDS WEBSITE THIS WENT LIVE IN NOVEMBER OF 1:00:34 2024 WE CREATED THIS WEB PAGE TO ESTABLISH A PRESENCE AND REPRESENTATION OF AGING INCLUSION IN THE DDS WEBSITE AS 1:00:41 WELL AS TO BE A REPOSITORY FOR THE WORK BEING DONE BY THE STATE ALLIANCE TEAM ON THE BRIDGING AGING AND DISABILITY GRANT 1:00:49 AND THANK YOU RANJANA FOR POPPING THAT IN THE CHAT AND NEXT SLIDE 1:00:58 PLEASE THANK YOU SO MUCH MY EMAIL ADDRESS IS HERE AND I'M HAPPY TO CONNECT 1:01:05 FURTHER THANK YOU SO MUCH EVERYONE FOR THE EXCELLENT PRESENTATIONS NOW IT'S 1:01:12 OUR COMMITTEE'S TIME TO HAVE QUESTIONS AND DISCUSSION ABOUT THESE 1:01:18 IMPORTANT TOPICS THAT WE JUST SHARED I KNOW BARBRA YOU RAISED YOUR HAND 1:01:23 EARLIER DO YOU WANT TO GO FIRST YEAH SURE SO I'LL START WITH THE FIRST 1:01:30 OUESTION THAT OCCURRED TO ME CARLOS DURING YOUR PRESENTATION WHICH I 1:01:36 SO APPRECIATE IT I JUST AS A CURIOSITY QUESTION AS A CAREGIVER DID ANYONE ALONG 1:01:41 THE WAY EVER ASK YOU WHAT YOUR NEEDS WERE WHAT YOU NEEDED TO BE SUPPORTED IN 1:01:47 DOING THE CAREGIVING NO NO ONE NO ONE ASKED ME WHAT MY NEEDS 1:01:56 WERE UNTIL I CALLED THE ALZHEIMER'S ASSOCIATION'S 1-800 NUMBER 1:02:03 AND THEY ASK ME HOW I'M DOING BUT THAT 1:02:09 WAS YEARS INTO MY JOURNEY YEAH I'M SADLY NOT SURPRISED BY THAT AT 1:02:17 ALL I HOPE THAT WE ARE BUILDING SYSTEMS AT THIS POINT THAT ARE GOING TO 1:02:22 DO A BETTER JOB OF THAT SO I KNOW THAT PEOPLE WHO ARE SERVED THROUGH THE

1:02:29

STATE MEDICAID MEDICAL PROGRAM CAL AIM THAT THROUGH A LOT OF ADVOCACY WE

1:02:36

BUILT IN THEIR REQUIREMENTS FOR CAREGIVERS NEEDS TO BE ASSESSED AS WELL 1:02:42

AS THE NEEDS OF THE PERSON WHO IS LIVING WITH THE DEMENTIA SO I JUST 1:02:49

THANK YOU FOR SHARING YOUR EXPERIENCE AND JUST HIGHLIGHTING THAT THERE'S JUST MORE WORK THAT NEEDS TO BE DONE THERE SO

1:02:55

THAT THIS BECOMES SECOND NATURE TO EVERYONE ACROSS OUR HEALTHCARE DELIVERY SYSTEM AS WELL AS THE SOCIAL SUPPORT

1:03:03

SERVICE NETWORK THAT FAMILIES NEED TO ACCESS IN ORDER TO REALLY ADDRESS 1:03:10

THAT FULL RANGE OF NEEDS AND AGAIN BECAUSE OUR DISEASE IS ONE THAT CHANGES ALL THE TIME AND THOSE NEEDS THEN EVOLVE

1:03:16

AS WELL SO IF WE'RE GOING TO HELP OUR CAREGIVERS NAVIGATE THAT WE JUST PAY

1:03:23

ATTENTION TO THEM TOO AND I KNOW EVERYBODY ON THIS COMMITTEE IN THIS ROOM REALLY KNOWS THAT SO WELL BUT I JUST

1:03:30

FELT LIKE WE NEED TO UNDERSCORE THAT MY NEXT QUESTION IS TO MARK WELL 1:03:37

TWO ONE IS SO THE HUB THAT'S BEING BUILT HOW IS ALL THAT INFORMATION WHAT'S THE

1:03:43

PLAN FOR MAINTAINING IT BECAUSE I JUST KNOW THAT IT'S WHEN WE DO OUR OWN RESOURCE GUIDE FOR ALZHEIMER'S LOS

1:03:49

ANGELES IT'S CHALLENGING TO MAKE SURE THAT WE ARE PRESENTING JUST THE MOST UPDATED INFORMATION THERE'S A PIECE OF

1:03:55

LEGISLATION THIS SESSION TRYING TO GET HEALTHCARE PROVIDERS TO HAVE UPDATED PROVIDER DIRECTORIES THAT THEY DON'T DO

1:04:02

A GREAT JOB OF THAT EITHER SO THAT'S JUST A WHENEVER YOU'RE BUILDING ANY SORT OF RESOURCE GUIDE IT YOU KNOW I THINK

1:04:10

ENSURING THAT IT'S THE RIGHT INFORMATION UPDATE INFORMATION SO PEOPLE FEEL CONFIDENT AND LIKE IT'S WORTH THEIR TIME

1:04:15

TO LOOK AT IT AND USE IT AND IT'S JUST SUCH A CHALLENGE YEAH AND AGAIN WE'D BE CONTRACTING 1:04:22 OUT FOR THIS WITH A PROVIDER A LOT OF THE PROVIDERS THAT WE SPOKE WITH THEY DO QUARTERLY AUDITS WE'D HAVE TO LEARN 1:04:30 MORE ABOUT WHAT THE WHAT FORM THOSE AUDITS TAKE I KNOW A LOT OF THEM ARE STARTING TO TRY TO USE AI TO PULL 1:04:37 UPDATED INFORMATION OFF THE WEB TO AUTOMATICALLY UPDATE RECORDS I'M SURE THEY'D HAVE TO GO IN AND JUST VALIDATE 1:04:42 THAT INFORMATION THEY ALSO PROVIDE THE ABILITY FOR CUSTOMERS TO SEND THEM 1:04:48 QUERIES SAYING YOU KNOW THIS ADDRESS NO LONGER EXISTS THIS PHONE NUMBER NOBODY PICKED UP AND THEN THEY WOULD CONTACT 1:04:54 THE PROVIDER AND TRY TO UPDATE THE LISTING BUT YEAH FROM WHAT WE HEARD THIS IS A CHALLENGE FOR A LOT OF 1:04:59 PROVIDERS YEAH AND I JUST HAD ONE MORE COMMENT RELATED TO THAT I'M HOPING AS 1:05:04 YOU'RE BUILDING OUT THIS HUB AND THIS RESOURCE THAT YOU ARE THINKING ABOUT JUST AGAIN HOW ARE PEOPLE GOING TO LEARN 1:05:09 THAT THIS EXISTS AND ACCESS IT THAT THAT YOU'RE SEAMLESS WITH 211 AND 988 YFS 1:05:16 ABSOLUTELY THANK YOU GREAT THANK YOU BARBRA DR QAZI YEAH THANK YOU 1:05:22 YOU KNOW I JUST WANT TO ECHO BARBRA'S POINT HERE I JUST SAW A PATIENT YESTERDAY WHO CARES FOR HER 90-YEAR-OLD 1:05:30 MOM WITH ALZHEIMER'S SEVERE DEMENTIA AND SHE CRIED SAYING THAT YOU KNOW SHE 1:05:36 HADN'T DATED IN DECADES AND NOW SHE HAS TO TAKE HER MOM TO ALL THE PARTIES AND TO HER DATE WHICH I TOLD HER YOU 1:05:43 KNOW THIS MIGHT BE A REALLY GOOD TEST RUN YOU KNOW THIS WAY SO BUT THE AMOUNT OF BURDEN SHE HAD IS CLEAR

1:05:50

AND ONE OF THE CONCERNS I HAVE YOU KNOW I ALSO WE HAVE SIMILAR 1:05:55 DISCUSSIONS AT THE COMMISSION ON AGING AND TO MARK'S POINT WHEN WE DO THIS CREATE THIS NETWORK THERE IS 1:06:02 A CONCERN ABOUT THE ABILITY FOR THE END AGENCIES THE AGENCIES AT THE END SERVICE 1:06:08 PROVIDERS TO BE ABLE TO HANDLE THE BURDEN AND AT THE CRC LEVEL IN SAN BERNARDINO FOR EXAMPLE THE INLAND 1:06:14 EMPIRE THEY HAVE A WAITING LIST THEY JUST DO NOT HAVE THE CAPACITY TO HANDLE AND SUPPORT THE PATIENT THAT I SAW 1:06:20 YESTERDAY FOR EXAMPLE AND I THINK THERE HAS TO BE SOME THOUGHT GIVEN TO A PARALLEL PROGRAM TO ENHANCING 1:06:27 THEIR CAPACITY TO BE ABLE TO HANDLE I MEAN I REMEMBER WHEN THE HEALTHCARE NETWORK WAS REORGANIZED OVER THE LAST 1:06:33 DECADE OR SO HERE IT BECAME IT THE SYSTEM OVERALL YOU KNOW BECAME OVERWHELMED WITH 1:06:41 THE AMOUNT OF DEMAND THAT CAME WITH THAT AND IT'S STILL DEALING WITH THE EFFECTS OF THAT SO I CAN SEE SOMETHING SIMILAR 1:06:46 HAPPENING TO SERVICE PROVIDERS AT THE END SO JUST PERHAPS FUTURE DISCUSSION 1:06:51 OR AS YOU TALK TO AAA'S OR ILC'S LET'S SEE WHAT WE CAN DO TO HELP WITH 1:07:00 THANK YOU DOCTOR CLAIRE YOU HAD A OUESTION OR A COMMENT YEAH THANK YOU IT WAS 1:07:07 JUST SORT OF TO ADD ON TO WHAT BARBRA WAS TALKING ABOUT AND SOMETHING THAT I KNOW YOU'RE AWARE OF BUT ONE OF THE 1:07:13 ISSUES THAT WE'VE SEEN WITH SIMILAR RESOURCE DATABASES IS CLASSIFICATIONS OF 1:07:20 HOW CALIFORNIA LICENSES BUILDINGS PLAYS AN IMPACT ON WHAT GETS 1:07:25

PULLED INTO SOME OF THOSE SEARCHES AND WE'VE HAD SOME INSTANCES WHERE **INAPPROPRIATE LIKE A SOBER LIVING** 1:07:33 FACILITY FOR EXAMPLE COULD BE PULLED INTO THOSE SEARCHES AND IT CAN BE VERY FRUSTRATING FOR CAREGIVERS WHO ARE 1:07:40 JUST TRYING TO FIND THE RIGHT LEVEL OF CARE SO THINKING OF HOW CALIFORNIA'S 1:07:46 LICENSURE FITS INTO THAT IS A REAL KEY COMPONENT FOR YOU TO KEEP AN EYE ON YEAH 1:07:51 YEAH I'M SURE YOU'RE WELL AWARE BUT JUST AN EXPERIENCE WE HAD YEAH YEAH WE'VE ENCOUNTERED THAT SAME ISSUE WITH OTHER 1:07:57 SYSTEMS WHERE SOMEBODY THINKS THAT THEY'RE GOING TO A CERTAIN TYPE OF FACILITY BUT IT'S NOT LICENSED AT ALL 1:08:04 THANK YOU IT'S A BIG CHALLENGE 1:08:12 ALL RIGHT ANYONE ELSE WITH A QUESTION FROM OUR COMMITTEE I DO HAVE ONE THING 1:08:18 FOR MARK TOO BUT ANYONE ELSE BEFORE I ASK MY 1:08:27 QUESTION ALL RIGHT WELL THANK YOU FOR SHARING THE STRUCTURE ON HOW THE 1:08:32 PROGRAMS HAVE BEEN SHARED IN LOCAL COUNTIES I'M JUST 1.08.39SO I WORK IN A HEALTH SYSTEM I'M JUST TRYING TO SEE IF THERE'S OPPORTUNITY TO GET THE HEALTH SYSTEM 1:08:46 MORE ACTIVELY INVOLVED WITH ALL OF THESE PROGRESS RATHER THAN WAITING FOR AAA 1:08:52 TO YOU KNOW ASK WHAT'S THERE I DON'T I THINK RIGHT NOW WHAT I'M EXPERIENCING 1:08:59 MIGHT BE AN INDIVIDUAL BASIS IF A SOCIAL WORKER HAPPENED TO HAVE NEW INFORMATION FROM A TRIPLE AAA THEN THEY 1:09:06 MAY OR MAY NOT SHARE BUT IS THERE A I GUESS A PLAN TO MAKE THIS MORE 1:09:14

INTENTIONAL SO THAT THE HEALTH PLANS OR THE HEALTH SYSTEM WILL KNOW ALL OF THIS 1:09:20 INFORMATION SO EVEN AS A PROVIDER AS A CLINICIAN NOT BEING A SOCIAL WORKER WE STILL HAVE SOME INFORMATION THAT WE CAN 1:09:26 SHARE WITH PATIENT AND OR FAMILY MEMBERS AS IT DOES CARRY A LOT OF WEIGHT 1:09:32 WHEN WE KNOW THAT KIND OF INFORMATION FIRSTHAND YEAH ABSOLUTELY YEAH AS WE AS WE BUILD 1:09:39 OUT THE SYSTEM YOU KNOW WE WOULD CONTINUE TO DO THESE TYPES OF PRESENTATIONS TO A VARIETY OF DIFFERENT 1:09:45 PROVIDER FORUMS TO MAKE SURE THAT PEOPLE UNDERSTAND THAT ONE THE SYSTEM EXISTS HOW TO OPERATE AND USE THE SYSTEM 1:09:52 WHAT'S IN THERE AND WHAT'S NOT IN THERE AND WE'VE HAD SOME REALLY GOOD CONVERSATIONS WITH DHCS JUST AROUND HOW 1:09:59 TO GET INFORMATION OUT TO LIKE MEDICAL PROVIDERS AND HOW TO YOU KNOW SHARE 1:10:04 INFORMATION ABOUT LIKE MEDICAL AND WHAT'S OFFERED THROUGH MEDICAL WITHOUT GOING TOO FAR IN THAT DIRECTION I THINK 1:10:11 THAT'S ONE THING THAT WE'RE REALLY COGNIZANT OF IS BUILDING ENOUGH BOUNDARIES AROUND IN TERMS OF WHAT WE 1.10.17WOULD INCLUDE AS A LISTING IN A PROVIDER DIRECTORY YOU KNOW SERVICES THAT MOST PEOPLE WOULD HAVE ACCESS TO AND BE 1:10:24 ELIGIBLE FOR VERSUS YOU KNOW SERVICES THAT MAY REQUIRE SOME SORT OF ELIGIBILITY REVIEW 1:10:33 PRIOR TO RECEIVING SO YEAH ABSOLUTELY TRYING TO PUT THOSE PARAMETERS IN PLACE 1:10:38 AND I REALLY APPRECIATE THE COMMENT ABOUT LOCAL PROVIDER CAPACITY I THINK THAT IS SOMETHING WE'VE BEEN HEARING 1:10:44 FROM OUR AAA'S AND ILC'S AS WELL YES THIS IS GREAT IT WOULD BE GREAT TO HAVE A CENTRAL SYSTEM HOWEVER IF THEY'RE

1:10:50

FLOODED WITH PHONE CALLS DO THEY HAVE THE CAPACITY TO TAKE THOSE CALLS AND IF WE GET HIGHER DEMANDS FOR LOCAL SERVICES

1:10:57

DO OUR LOCAL PROVIDERS HAVE THE CAPACITY FOR THOSE SERVICES SO WHAT WE MIGHT

1:11:02

CONSIDER DOING IS ACTUALLY PILOTING THESE OUT IN SELECT COUNTIES FIRST JUST TO SEE YOU KNOW ONES THAT HAVE MAYBE

1:11:08

MORE ROBUST STRUCTURES AND SYSTEMS IN PLACE TO MAKE SURE THAT WE UNDERSTAND WHAT THE UPTICK IN DEMAND

1:11:14

WOULD BE ONCE WE LAUNCH OUTREACH AND MARKETING FOR THESE SERVICES 1:11:21

OKAY I THINK IT WAS WE'RE RIGHT ON TIME CARROLL

1:11:28

BARBRA HAD HER HAND UP OH I DIDN'T SEE THAT I GO AHEAD BARBRA JUST ONE 1:11:34

MORE TIME I JUST WANTED TO HIGHLIGHT SOMETHING ELSE FROM CARLOS'S STORY THAT HE SHARED AND THAT WAS THAT

1:11:40

EXPERIENCE OF GETTING A DIAGNOSIS AND THEN NOTHING ELSE JUST WALKING OUT OF THAT DOCTOR'S OFFICE HAVING YOUR WORLD

1:11:47

ROCKED AND NOT KNOWING WHAT YOUR NEXT STEP SHOULD BE I THINK IT HIGHLIGHTS

1:11:53

THAT AND I DO HOPE THAT THAT EXPERIENCE IS LESS FREQUENT NOW THAN IT WAS PERHAPS

1:11:58

BACK IN I THINK YOU SAID CARLOS 2015 BUT IT JUST HIGHLIGHTS THAT IT IS 1:12:05

STILL AND FOREVER I THINK GOING TO BE THAT DOCTOR'S OFFICE WHERE EVERYBODY IS

1:12:13

AT SOME POINT ON THIS JOURNEY AND WHERE THAT INFORMATION ABOUT THE NO WRONG DOOR

1:12:19

SYSTEM AND THE HUBS AND ALL THESE THINGS GET CREATED THAT INFORMATION 1:12:24

NEEDS TO BE GIVEN TO THESE FAMILIES WHETHER IT'S A CASE MANAGER 1:12:29

THAT'S IN THAT DOCTOR'S OFFICE HOWEVER THAT'S STRUCTURED THAT IS SUCH A KEY PLACE AND I KNOW DOCTORS ARE SO PRESSED 1:12:35 FOR TIME IT'S HARD BUT THAT'S SUCH A KEY TOUCH POINT FOR SHARING INFORMATION 1:12:42 AND EMPOWERING INDIVIDUALS LIVING WITH DEMENTIA AND THEIR CAREGIVERS TO WALK OUT OF THAT OFFICE ACTUALLY KNOWING 1:12:50 MAYBE NOT WHAT THE NEXT 10 STEPS ARE BUT AT LEAST WHAT ONE STEP IS YOU KNOW WALKING OUT WITH SOMETHING OTHER THAN 1:12:56 NOTHING SURE THANK YOU I THINK I SAW JASON 1:13:05 FIRST AND THEN SALLY I JUST YOU KNOW TO BARBRA'S POINT IN 1:13:11 ONE OF THE EARLIER PRESENTATIONS I WAS JUST QUICKLY LOOKING AT SOME OF THE RESOURCES THAT WERE 1:13:17 SHARED THOSE ARE PHENOMENAL IF THERE WERE JUST A SIMPLE FLYER A LITTLE CARD 1:13:25 THAT COULD BE DISTRIBUTED TO PHYSICIANS WHO SERVICE OLDER ADULTS THAT THEY COULD 1:13:31 JUST PICK UP IT'S A WONDERFUL STARTING PLACE FOR THEM 1:13:38 THANK YOU THAT DEFINITELY WILL BE HELPFUL FOR US AND THE I THINK THE 1:13:45 REQUEST IS ALSO TO MAKE SURE THEY'RE UPDATED THAT'S ONE ISSUE THAT I COULD SEE FROM THAT BUT THAT 1:13:53 WOULD DEFINITELY BE HELPFUL AND NO I KNOW SOMETIMES FOLKS ARE SAYING THE 1:13:58 PHYSICIANS HAVE A LOT OF THINGS GOING ON ALREADY BUT WE WORK AS A GROUP WE COULD 1:14:04 FIND WAYS TO MAKE IT WORK WE COULD HAVE OUR MEDICAL ASSISTANT MAYBE SHARE SOME 1:14:09 INFORMATION JUST CREATE SOME PROCESSES SO THAT PEOPLE ACTUALLY THE CAREGIVER IS 1:14:15

PART OF THE CARE TEAM RIGHT WE NEED TO BE ABLE TO PROVIDE THEM RESOURCES TO BE ABLE TO THEN HELP THE PATIENT PER SE 1:14:23 JASON I KNOW YOU HAVE YOU RAISE YOUR HANDS I MAY BE GETTING SOME OF THE DETAILS WRONG BUT A COUPLE YEARS AGO CMS 1:14:30 INTRODUCED A CODE FOR COGNITIVE CARE PLANNING WITH THE INTENTION OF MAKING THIS PROCESS KIND OF A BILLABLE THING 1:14:38 TO ENCOURAGE PROVIDERS TO DO SOME OF THIS WORK I DO THINK THAT IT'D BE REALLY INTERESTING TO TALK AND REVIEW HOW THAT 1:14:45 INTERFACES WITH THE KIND OF THE CAREGIVING SUPPORTS BECAUSE RIGHT NOW 1:14:50 IT IS CARE RECEIVER FOCUSED OF COURSE BUT I THINK THAT THAT THAT'S A REALLY GOOD OPPORTUNITY HOPEFULLY TO CREATE 1:14:57 A STRUCTURAL CHANGE TO HELP OFFICES DO THAT KIND OF WORK AND HAVE A WAY 1:15:04 OF GETTING REIMBURSEMENT FOR IT AND MAKING SURE IT HAPPENS AT THAT LEVEL AS WELL I DON'T KNOW ALL THE INS 1:15:10 AND OUTS OF COGNITIVE CARE PLANNING WE USUALLY LET OUR PCPS BUILD THAT CODE INSTEAD OF THE SPECIALTY CENTERS 1:15:16 BUT THE POINT IS TO TRY AND GET SOME OF THESE THINGS ALL TETHERED TOGETHER THE BIO PSYCHO SOCIAL ASPECTS OF CARE 1:15:24 INCLUDING CAREGIVING GREAT THANK YOU JASON 1:15:31 ANYONE ELSE THINK IT'S TIME FOR PUBLIC COMMENT 1:15:36 CARROLL GREAT ALL GOOD DISCUSSION GREAT THANK YOU SO MUCH ROSIE IF YOU 1:15:43 WANT TO BRING UP THE 1:15:56 GOOD AFTERNOON EVERYONE THIS IS THE PUBLIC COMMENT PERIOD FOR OUR PUBLIC 1:16:02 ATTENDEES ANYBODY'S IN THE ROOM AND WISHES TO LEAVE A COMMENT RAISE YOUR 1:16:08 HAND AND ONE OF THE STAFF WILL CALL ON YOU ALL OUR ATTENDEES ONLINE

1:16:14

PLEASE PRESS YOUR RAISED HAND ICON ON YOUR ZOOM FUNCTIONS MINE ARE DOWN AT THE 1:16:21 BOTTOM I DON'T KNOW WHERE YOURS ARE AND WE WILL UNMUTE YOUR LINE AND IF 1:16:27 YOU'RE ON THE PHONE STAR 9 AND THAT WILL INDICATE TO US AND OF COURSE AT ANY 1:16:33 TIME IF YOU WISH TO WRITE YOUR COMMENT I ALWAYS LIKE A MINUTE TO THINK 1:16:41 FEEL FREE TO EMAIL US AT ENGAGE E N G A G E AT 1:16:48 AGING DOT C A GOT GOV AND THAT IS MONITORED FIVE DAYS A 1:16:55 WEEK WE'RE HAPPY TO RESPOND SEND IT ON TO OUR TEAM MEMBERS THAT MAY HAVE 1:17:04 A RESPONSE OR SEND ON TO THE COMMITTEE IN THIS INSTANCE 1:17:14 HAS BEEN A LIVELY DISCUSSION TODAY WE HAVE LEARNED QUITE A BIT 1:17:22 WE CAN GIVE IT JUST A LITTLE WHILE LONGER WE WILL HAVE ANOTHER PUBLIC 1:17:28 COMMENT PERIOD IN THE AFTERNOON IT IS SLATED FOR 1:15 1:17:54 AND WE I DO WANT TO REMIND YOU WE DO HAVE THE O&A FUNCTION LIVE SO IF 1:17:59 YOU HAVE A QUESTION THAT YOU WOULD WANT TO PUT IN THE Q&A FEEL FREE TO DO THAT 1:18:04 AT ANY TIME AND IT WILL EITHER BE ANSWERED LIVE 1:18:11 RESPONDED TO IN WRITING OR WE WILL LET YOU KNOW THAT WE'LL GET BACK TO YOU 1:18:20 DR CANIO I IT I AM NOT SEEING ANY HANDS SO I'M 1:18:29 GOING TO TURN IT BACK TO YOU UNLESS YOU WOULD LIKE IT TO GO A BIT LONGER 1:18:35 ANYONE ELSE HAS ANY MORE FEEDBACK I KNOW BARBRA I SAW YOUR COMMENTS 1:18:41

EARLIER SINCE WE DON'T HAVE A PUBLIC COMMENT WE DO HAVE A BIT OF MORE TIME TO KEEP DISCUSSING ANYTHING ELSE 1:18:49 WE'D LIKE TO DISCUSS FOR THIS TOPIC SO THE GUIDE MODEL SHOULD ALSO MOVE THIS IN THE RIGHT DIRECTION AND I KNOW 1:18:56 DR QAZI ALSO COMMENTED THAT JUST SIGNED UP TO UTILIZE THE GUIDE PROGRAM EARLIER 1:19:01 THIS WEEK AND IT WILL BE OUR FIRST DIRECT EXPERIENCE WITH IT FOR A NUMBER OF OUR PATIENTS I AGREE I THINK THE 1:19:09 GUIDE MODEL WILL HELP US OUT I WISH ALL HEALTH SYSTEMS ARE ABLE TO 1:19:16 LEVERAGE THIS BUT I KNOW IT'S A PILOT SO HOPEFULLY WE'LL LEARN MORE FROM 1:19:21 THIS PILOT AND SEE HOW IT WILL BE SPREAD THROUGHOUT DR CANIO THERE 1:19:28 IS A Q&A LET ME READ IT OUT LOUD FOR YOU THIS IS FROM JESSICA STUDARUS S T 1:19:36 U D A R U S I DIDN'T HEAR ANY COMMENTS ABOUT THE NEW DEMENTIA GUIDE PROGRAM 1:19:43 AVAILABLE VIA ORIGINAL MEDICARE HOW ARE YOUR PLANS DOVETAILING WITH THIS 1:19:49 EXISTING INITIATIVE YOU WANT TO ADDRESS THAT BARBRA 1:19:57 SO I'M NOT SURE I UNDERSTAND SO IF I GET THIS WRONG IT IS BECAUSE I'M MISUNDERSTANDING THE QUESTION MY APOLOGIES IF THIS IS 1:20:04 A REFERENCE TO THE GUIDE MODEL THEN AS DR QAZI SAID IT IS A YOU 1:20:12 HAVE TO APPLY TO BE PART OF IT AND IT'S AN EIGHT-YEAR PILOT PROJECT SO I 1:20:19 THINK YOU KNOW THE GOAL WITH ANY PILOT PROJECT IS THAT YOU LEARN A LOT AND THEN IF THINGS ARE WORKING IT GETS 1:20:26 EXPANDED ACROSS A BROADER PROGRAM LIKE THE MEDICARE PROGRAM OR 1:20:33 IF YOU'RE A DUALLY ELIGIBLE YOU'RE ELIGIBLE FOR MEDICARE AND MEDICAID YOU KNOW THAT THAT POPULATION AS WELL SO AGAIN IF 1:20:40

THE OUESTION IS RELATED SPECIFICALLY TO THE GUIDE MODEL WHICH IS PRETTY NEW RELATIVELY SPEAKING I THINK 1.20.49AGAIN IT IS IN ITS INFANCY AND SO I THINK THERE'S A LOT 1:20:55 DEPENDING ON CHOICES THAT ARE MADE AT THE FEDERAL LEVEL WHICH I KNOW WE'RE GOING TO TALK ABOUT LATER IN TODAY'S 1:21:00 MEETING BUT HOPEFULLY THAT STAYS ON TRACK AND THERE'S A LOT THAT WE'RE 1:21:06 GOING TO LEARN AND I THINK IT'S GOING TO PROVIDE US WITH A LOT OF **OPPORTUNITIES TO STRENGTHEN OUR** 1:21:12 HEALTHCARE DELIVERY SYSTEM AND WHAT'S AVAILABLE UNDER THE MEDICARE PROGRAM 1:21:17 TO SUPPORT PEOPLE LIVING WITH DEMENTIA 1:21:22 I HOPE THAT ANSWERED YOUR QUESTION JESSICA I KNOW IT LOOK LIKE CELINE IS ALSO 1:21:29 HER ORGANIZATION IS PARTICIPATING IN THE GUIDE MODEL AS WELL SO AS YOU HEARD 1:21:34 THERE ARE A LOT OF DIFFERENT PROGRAMS AND SERVICES THAT ARE 1:21:40 PARTICIPATING AND WE'RE LEARNING AS WE SPEAK AND HOPEFULLY WE'LL LEARN MORE 1:21:46 FROM THEM AND THEY'LL SHARE ALL OF THESE LEARNINGS CARLOS I KNOW YOU'RE IN THE ROOM 1:21:52 ANYTHING I MISS OR ANYTHING YOU'D LIKE TO ADD FROM YOUR FOLKS THERE 1:21:59 YEAH THANK YOU FOR INCLUDING ME ON THAT ONE I THINK IT WAS A GOOD 1:22:04 DISCUSSION HOW WE'RE MOVING FORWARD TO SUPPORT CAREGIVERS LIKE MYSELF I AM JUST 1:22:11 ONE CAREGIVER BUT I KNOW FROM BEING IN SUPPORT GROUPS THAT THERE IS A STRUGGLE 1:22:20 AND THERE'S A NEED FOR SUPPORT AND FINDING A RESOURCE TO NAVIGATE 1:22:26

THROUGH THIS IS GREATLY NEEDED AND WE NEED SUPPORT FROM NOT ONLY 1:22:35 YOU KNOW OUR DOCTORS AND OTHER 1:22:40PROFESSIONALS COMMUNITY BASED RESOURCES IS REQUIRED TO MOVE FORWARD HAVE AND 1:22:46 GIVE US SOME CONFIDENCE DO YOU WANT TO TALK ABOUT HOW 1:22:53 YOUR PEERS COME TO YOU FOR LIKE IF THEY HAVE QUESTIONS CONSULT YOU ON 1:22:58 NEXT STEPS AND GUIDANCE YEAH I THINK IT'S IMPORTANT THAT 1:23:04 I'VE HAD SOME FAMILY NOT FAMILY MEMBERS FRIENDS THAT HAVE REACHED OUT TO ME BECAUSE I'VE 1:23:13 I'M OUT THERE ON SOCIAL MEDIA KIND OF EXPLAINING WHAT THINGS HAVE WORKED FOR ME AND THE KNOWLEDGE BASE THAT I 1:23:21 HAVE ACQUIRED THAT PROVIDES THEM SOME GUIDANCE OF HOW TO TAKE THE NEXT STEPS 1:23:29 WHAT QUESTIONS TO ASK A PRIMARY CARE PHYSICIAN TO SUPPORT 1:23:36 THEIR FAMILY MEMBER OR WHAT COMMUNITY BASED RESOURCES ARE 1:23:43 OUT THERE THAT CAN PROVIDE THEM SOME INSIGHTS TO THEIR JOURNEY 1:23:52 IT'S BEEN HELPFUL FOR ME TO GIVE BACK BECAUSE OF ALL THE INFORMATION I'VE 1:23:59 RECEIVED THROUGH MY RESEARCH AND SEEKING SUPPORT FROM MY 1:24:05 JOURNEY SO IT'S EMPOWERING TO GIVE 1:24:12 PEOPLE SOME INSIGHT AND 1:24:18 SHINE LIGHT ON THE COMMUNITY THAT'S OUT THERE THAT'S NOT REALLY 1:24:25 OPEN AND INTO THE MAINSTREAM I THINK IT'S YOU KNOW I THINK WE NEED MORE 1:24:32 OF THAT AND HAVING THE ACCESSIBILITY OF IT 1:24:38 TO BE LIKE MARK SAID HOW ARE WE GOING TO MARKET THAT HOW ARE WE GOING TO HAVE THE OUTREACH I'VE LEARNED A

1:24:46

LOT TODAY SO FAR BUT HOW DO WE GET THAT OUT THERE TO SOMEONE THAT'S JUST HAD 1:24:55 THEIR WORLD ROCKED HOW DO WE FOLLOW UP AND SHOW THEM 1:25:03 THAT THERE IS SOME COMPASSION AND EMPATHY AND GIVE 1:25:10 THEM A SENSE OF A PEACE OF MIND AND ENCOURAGE THEM TO STILL HAVE QUALITY OF 1:25:16 LIFE AND TO REDUCE THOSE BURDENS THAT CAREGIVERS DO HAVE AND IT CAN 1:25:24 ADD UP FAIRLY FAST AND IT COULD CHANGE IN A 1:25:30 MOMENT BUT IF WE STRUCTURE IT AND GIVE PEOPLE SOME HOPE THAT THEY CAN FIND 1:25:39 SUPPORT IT'S GREATLY NEEDED 1:25:46 THANK YOU CARLOS OF FOR SHARING THAT AND BEING THE VOICE OF ALL OF US HERE I 1:25:53 THINK ALL OF US HAVE SOME ROLE AS WE LEARN NEW THINGS IN THIS FORUM 1:25:59 WHATEVER ROLE WE HAVE ON OUR DAILY LIVES I THINK WE CAN THEN ALSO SHARE SO I HOPE 1:26:05 EVERYONE THAT'S LISTENING WOULD SHARE WHAT WE'VE LEARNED TODAY BARBRA I DON'T KNOW IF YOU ALWAYS HAVE SOMETHING 1:26:12 GREAT TO SAY I DON'T KNOW IF YOU WANTED TO ADD ANYTHING ELSE BEFORE WE CLOSE THIS SESSION I DON'T THINK SO I 1:26:19 APPRECIATE THE DISCUSSION AND THE PRESENTATION VERY INFORMATIVE THANK YOU 1:26:25 ALL RIGHT WELL PERFECT TIMING THEN CARROLL PERFECT THANK YOU I THINK WE CAN BRING 1:26:31 **UP THE BREAK SLIDE** 1:26:38 RANJANA IF YOU CAN IS IT A HALF AN HOUR IT'S A 30 MINUTE BREAK AND WE ARE 1:26:45

15 MINUTES AHEAD OF SCHEDULE SO WE ARE BACK AT 12 NOON RIGHT DOES THAT 1:26:51 SOUND GOOD DR CANIO I THINK SO AS LONG AS SUSAN WILL BE BACK ON 1:26:59 TIME OR WE CAN MOVE THINGS AROUND TOO I'LL LEAVE IT UP TO OUR CDA FOLKS. 1:27:08 I THINK WE CAN GO WITH NOON UNLESS OTHER FACTORS PRESENT THEMSELVES HOW'S THAT 1:27:13 SOUND SOUNDS GOOD ALL RIGHT SEE YOU ALL AT NOON TIME THANK YOU FOR YOUR DISCUSSION AND PARTICIPATION THANK YOU 1:29:13 OKAY IT IS 12:01 AND WE'LL BE TURNING IT OVER TO 1:29:19 DR CANIO AT TO TAKE US FORWARD GOOD AFTERNOON EVERYONE LET'S GO 1:29:28 AHEAD AND GO TO OUR NEXT SLIDE WE WILL HAVE A COMMITTEE UPDATE FOR THIS 1:29:34 SECTION WE HAVE THE SLIDE UP SO WE'VE HAD SOME CHANGES IN OUR 1:29:43 BY LAWS AND SO DURING THIS SEGMENT THE COMMITTEE WILL NEED TO VOTE ON APPROVAL OF THE BY LAWS WITH THE RECENT ADDITION 1:29:50 IF WE COULD HAVE THE SLIDE PLEASE IT TALKS ABOUT THE MEMBERSHIP **COMPOSITION HAVING A MINIMUM 17** 1:29:59 MEMBERS MAXIMUM OF 21 MEMBERS I'LL KIND OF WAIT 1:30:06 HERE YES AND THEN THE POLICY PLANNING AND RECOMMENDATIONS THERE ARE SOME 1:30:11 CLARIFICATIONS AND UPDATES TO PROCESS AND SO THIS IS WHAT WE'VE HAD 1:30:17 HOPEFULLY YOU'VE HAD A CHANCE TO READ THIS BY LAW UPDATES FROM THE EMAIL 1:30:23 THAT WAS SENT OUT SO JUST MORE INFORMATION ON WHAT THIS INCLUDE 1:30:30 REQUIRES BROAD STAKEHOLDER CONSULTATION INCLUDING INDIVIDUALS WITH LIVE EXPERIENCE COMMUNITY BASED AND 1:30:35 INSTITUTIONAL PROVIDERS RESEARCHERS ACADEMICS AND DIRECT CARE WORKFORCE ADVOCATES AND RELEVANT STATE AGENCIES 1:30:42

AND PROMOTING CULTURAL AND LINGUISTIC CONSIDERATION FOR DIVERSE COMMUNITIES 1:30:47 AFFECTED BY ALZHEIMER'S AND RELATED CONDITIONS I THINK CARLOS DO YOU WANT TO 1:30:54 TAKE IT AWAY YEAH THANK YOU 1:31:04 SO YOU WANT TO VOTE ON THE ADOPTION OF THE BY LAWS RIGHT OR DOES THE 1:31:10 COMMITTEE HAVE WHAT THE COMMITTEE MEMBERS LIKE TO DISCUSS OR HAVE ANY QUESTIONS 1:31:17 BEFORE WE MOVE FORWARD TO NUMBER ANY OUESTIONS OR COMMENTS ABOUT THE 1:31:23 **BYLAWS** 1:31:31 SEEMS VERY STRAIGHTFORWARD I DON'T SEE 1:31:38 ANYONE OKAY YEAH I GUESS WE CAN MOVE FORWARD TO THE VOTING GO AHEAD CARLOS 1:31:45 OKAY SO I'D LIKE TO FORMALLY MOTION TO APPROVE THE CLARIFIED ROLES AND 1:31:53 **RESPONSIBILITIES WITHIN THE UPDATED BYLAWS AS PRESENTED** 1:31:59 I MOVE TO APPROVE SECOND HAVE A SECOND 1:32:08 THE MOTION HAS BEEN MOVED AND SECONDED AT THIS TIME I'LL OPEN THE FLOOR FOR 1:32:14 ANY DISCUSSIONS OR OUESTIONS FROM MEMBERS 1:32:31 I THINK WE CAN PROCEED WITH A VOTE I'LL CALL ON EACH 1:32:38 MEMBER BY NAME PLEASE RESPOND WITH AN A IF YOU'RE APPROVED OR NAY IF 1:32:50 DISAPPROVED DR CANIO I 1:32:58 CARLOS I 1:33:06 YEAH SENATOR ARREGUIN DOESN'T VOTE OKAY SALLY BERGMAN I 1:33:14

CLAIRE DAY I DR DOLORES THOMPSON SHE'S NOT HERE NO SHE'S NOT HERE 1:33:23 IS MYRA ON NEITHER MYRA NOR KEN ARE OKAY WE'LL MOVE ON TO BARBRA I 1:33:31 DR MOBLEY DR MOBLEY IS NOT ON THE LINE OKAY DR QAZI I 1:33:40 CELINE I 1:33:46 JULIE 1:33:57 WELL SHE IS MUTED AND HER CAMERA IS OFF 1:34:04 SO I DON'T KNOW SO WE MOVE ON TO AND DR IS IT DR FARIAS NOT HERE CORRECT 1:34:17 WE MOVE ON RIGHT YOU HAVE SO IT HAS BEEN THE 1:34:23 MOTION CARRIES SO THE MOTION CARRIES AND OUR PROPOSED BYLAWS ARE HEREBY 1:34:31 ADOPTED GREAT THANK YOU SO MUCH CARLOS NOW WE 1.34.38HAVE OUR FEARLESS LEADER SUSAN DEMAROIS DIRECTOR OF CDA TO GIVE US AN UPDATE 1:34:47 HI GOOD AFTERNOON EVERYONE I DON'T KNOW IF FEARLESS IS 1:34:53 THE RIGHT WORD THESE DAYS THERE'S A LOT OF FEAR SWIRLING AROUND IN OUR NETWORK BUT I I'LL TAKE THAT I'LL TAKE IT AND 1:35:00 THAT'S WHY YOU'RE A FEARLESS LEADER IT'S GOOD TO SEE EVERYBODY AND 1:35:09 GREAT TO BE HERE WITH YOU THIS AFTERNOON I WANTED TO PROVIDE A FEW UPDATES TO EVERYBODY I'M GOING TO START WITH THE 1:35:14 POSITIVE AND THERE ARE POSITIVES TODAY IS THE FIRST DAY OF OLDER 1:35:20 CALIFORNIANS MONTH AND THE DEPARTMENT IS LEADING A CAMPAIGN IT'S A 1:35:27 CONTINUATION OF OUR START THE CONVERSATION CAMPAIGN WHERE WE MAKE OUR AGING RESOURCE GUIDE AVAILABLE AND 1:35:34 ENCOURAGE PEOPLE WE ENCOURAGE YOUNGER PEOPLE TO TALK WITH OLDER 1:35:39

PEOPLE ABOUT WHAT THEIR NEEDS AND PREFERENCES ARE AND WE ENCOURAGE OLDER PEOPLE TO TALK WITH YOUNGER PEOPLE AND 1:35:45 THEIR PEERS ABOUT WHAT MATTERS MOST TO THEM SO WE'LL BE CARRYING THAT 1:35:51 MESSAGE THROUGHOUT THE MONTH THE OFFICIAL THEME FOR OLDER AMERICANS MONTH IS FLIP THE SCRIPT WE JUST HAD A 1:35:59 REALLY GREAT SESSION ON RE-IMAGINE 1:36:05 RE RETHINKING AGING IT'S AVAILABLE WE RECORDED IT BUT IT'S ABOUT THE 1:36:12 MESSAGING ABOUT HOW TO SPEAK ABOUT AGING TODAY AND THAT'S THE THEME AT THE 1:36:17 FEDERAL LEVEL IS FLIP THE SCRIPT ON AGING AND REALLY THINK ABOUT HOW WE TALK 1:36:23 AND DEPICT AND PORTRAY A THERE THANK YOU RANJANA THANK YOU IT WAS A REALLY GOOD 1:36:29 SESSION I ENCOURAGE YOU IN YOUR FREE TIME TO TAKE A LOOK AT THAT OTHER 1:36:34 POSITIVES OUR OTHER FEARLESS LEADER CATHERINE BLAKEMORE WAS PART OF THIS 1:36:40 EFFORT BUT THE CALIFORNIA DEPARTMENT OF DEVELOPMENTAL SERVICES **RELEASED A MASTER** 1:36:45 PLAN FOR DEVELOPMENTAL SERVICES JUST ABOUT TWO WEEKS OR SO AGO I'M 1:36:51 GOING TO DROP THAT LINK IN THERE I'M SORRY I MISSED THE MORNING SESSION BUT I THINK YOU'LL FIND SOME REALLY GOOD 1:36:56 INFORMATION THERE IT WAS STAKEHOLDER LED COMMUNITY DRIVEN AND WE'RE REALLY EXCITED TO WORK BE WORKING WITH 1:37:03 THE DEPARTMENT OF DEVELOPMENTAL SERVICES ON ACTIVATION OF THEIR PLAN 1:37:10AND THEN I'LL MOVE TO THE FEDERAL LEVEL ALL OF YOU HAVE VARIOUS LEVELS. 1:37:16 OF UNDERSTANDING AND INFORMATION ABOUT WHAT'S GOING ON AT THE FEDERAL LEVEL AND 1:37:21

I'VE JUST RETURNED THIS MORNING IN FACT FROM AUSTIN TEXAS WHERE I WAS AT А 1:37:26 MEETING A NATIONAL MEETING WITH ADVANCING STATES THAT'S A TRADE 1:37:32 ASSOCIATE TRADE ASSOCIATION OF SORTS OF DIRECTORS OF STATE UNITS ON AGING 1:37:38 MEDICAID EXECUTIVES WHO WORK IN THE HOME AND COMMUNITY BASED SERVICES AND 1:37:44 LONG-TERM SERVICES AND SUPPORTS AREAS AND STATE DEPARTMENTS OF 1:37:50 DEVELOPMENTAL DISABILITIES SO WE WERE HONORED TO BE JOINED BY THE CURRENT 1:37:57 ACTING SECRETARY AND ADMINISTRATOR FOR THE ADMINISTRATION FOR COMMUNITY LIVING MARY LAZARE AS WELL AS MANY LEADERS 1:38:06 FROM THE CENTERS FOR MEDICAID AND MEDICARE AND MEDICAID SERVICES CMS SO I FEEL BETTER INFORMED THAN I 1:38:15 DID LAST WEEK HAVING SPOKEN AND HEARD DIRECTLY FROM LEADERS AT THE 1:38:20 ADMINISTRATION FOR COMMUNITY LIVING AND CMS SO THE THINGS THAT WE DO KNOW RIGHT NOW AMIDST ALL THIS UNCERTAINTY 1:38:28 WE DO KNOW THAT AREA AGENCIES ON AGING WILL BE PAID THEY'RE UNDER A 1:38:35 CONTINUING RESOLUTION RIGHT NOW THROUGH THE END OF SEPTEMBER THE END OF THE FEDERAL FISCAL YEAR I KNOW SOME OF YOU 1.38.42ON THIS CALL ARE SUBCONTRACTORS AND VENDORS WITH AAA'S IN OUR NETWORK AND 1:38:48 THERE'S BEEN A LOT OF WORRY ABOUT PAYMENTS BUT WE'VE BEEN ASSURED THAT 1:38:53 THOSE PAYMENTS ARE FORTHCOMING SOMETIME BY MID MAY SO 1:39:00 WE HEARD THAT DIRECTLY WE ALSO KNOW THAT THE OLDER AMERICANS 1:39:06 ACT DO YOU HEAR MY DOG BARKING GOOD I DO 1:39:14

THE OLDER AMERICANS ACT FINAL RULE IS PROCEEDING AND IT WAS ACKNOWLEDGED THAT 1:39:21 IT'S AN IMPORTANT CORRECTION FOR THE OLDER AMERICANS ACT AND THAT WILL 1:39:26 CONTINUE THERE MIGHT BE SOME ADJUSTMENTS AND SOME TWEAKS TO IT WE EXPECT PROBABLY IN THE AREA OF DIVERSITY 1:39:34 EQUITY AND INCLUSION THAT PARTS MIGHT BE RESCINDED BUT BY AND LARGE THE POLICY 1:39:42 DIRECTION OF THE OAA FINAL RULE WILL CONTINUE WE ALSO KNOW THAT GRANTS. 1:39:47 THEY'RE CONTINUING TO REVIEW GRANTS CALIFORNIA JUST SUBMITTED FOR ONE 1:39:53 AROUND NO WRONG DOOR AND USING COMMUNITY HEALTH WORKERS MORE ACTIVELY 1:39:58 USING COMMUNITY HEALTH WORKERS WE HAVE NO ASSURANCE THAT WE WILL BE SELECTED BUT WE WILL BE REVIEWED AND CONSIDERED 1:40:05 ALONG WITH OTHERS AND THEY EXPECT THOSE AWARDS TO BE MADE IN JUNE WE ALSO RECEIVED A VERY SMALL GRANT AWARD FROM 1:40:12 ACL TO ASSIST OUR LA COUNTY AND LA CITY'S AAA 1:40:18 IN THEIR LA FIRE RESPONSE AND THAT CAME TO US IN JUST THE LAST COUPLE OF 1:40:23 WEEKS SO ACTIVITY IS HAPPENING AS ACL IS BEING DISMANTLED 1.40.29THE YOU KNOW FIRST AND FOREMOST THEIR STAFF HAS BEEN REDUCED IN HALF SO THEY 1:40:35 HAD JUST OVER 200 EMPLOYEES THEY'RE DOWN TO ABOUT 100 NOW THEY'VE ELIMINATED 1:40:43 ALL OF THEIR REGIONAL OFFICES INCLUDING FAY GORDON OUR REGIONAL ADMINISTRATOR WHO 1:40:48 WAS OUTSTANDING THOSE REMAINING 100 STAFF MEMBERS WILL BE DIVIDED AMONG THREE FEDERAL 1:40:54 AGENCIES AND THAT WILL BE OCCURRING THIS SPRING AND INTO THE SUMMER SO 1:41:00

THAT'S HAPPENING THE SILVER LINING THERE IS OUR AGING AND DISABILITY AND 1:41:06 FAMILY CAREGIVING ADVOCATES HAVE REALLY BANDED TOGETHER AND HAVE ORGANIZED A 1:41:12 NUMBER OF LETTERS AND MEETINGS WITH CONGRESSIONAL OFFICES AND I COULD NOT BE 1:41:17 MORE PROUD OF OUR NETWORK FOR RESPONDING TO THESE CHALLENGES 1:41:23 SO WE'VE GOT THAT YOU KNOW IN TERMS OF A TRIPLE THREAT THERE THERE'S THE FEDERAL I CALL IT GOVERNANCE HOW THINGS 1:41:30 ARE ORGANIZED AND STAFFED SECONDARILY THE SECOND THREAT WOULD BE CONGRESS 1:41:37 HAS RETURNED FROM THEIR SPRING RECESS AND THEY'RE NOW MARKING UP THEY'LL START MARKING UP NEXT WEEK THE 1:41:44 PRESIDENT'S 2025 2026 BUDGET SO WE'RE WATCHING 1:41:50 THAT CLOSELY THAT IS WHERE WE ANTICIPATE MEDICAID CUTS OR CHANGES IN MEDICAID 1:41:57 POLICY AND WE'RE ALSO WATCHING VERY CLOSELY TO SEE WHAT HAPPENS WITH THE OLDER AMERICANS ACT AND AT WHAT LEVEL IT 1:42:04 WILL BE FUNDED THERE HAVE BEEN SOME LEAKED DOCUMENTS THAT SUGGEST THAT SOME OF THE OAA PROGRAMS WILL BE CUT OR SLATED 1:42:13 FOR ELIMINATION THESE ARE LEAKED DOCUMENTS THEY'RE NOT FINAL OR OFFICIAL 1:42:19 SO WHILE THEY SIGNAL A DIRECTION WE DON'T KNOW IF ANY OF THAT WILL STICK AT 1:42:24 THIS POINT UNTIL WE SEE WHAT CONGRESS WHAT THE PRESIDENT AND CONGRESS PUT IN 1:42:31 PRINT AND THEN THE LAST PIECE IS 1:42:36 IN ABOUT TWO WEEKS WE'LL RELEASE THE STATE'S MAY BUDGET REVISION THIS IS FOR 1:42:43

THOSE WHO DON'T FOLLOW THE BUDGET CLOSELY IN EARLY JANUARY THE **GOVERNOR ALWAYS ISSUES A PROPOSED BUDGET FOR THE** 1:42:50 THE STATE FISCAL YEAR THAT BEGINS JULY 1ST THE LEGISLATURE CONSIDERS THE 1:42:57 PROPOSAL MAKES THEIR ADDITIONS AND DELETIONS AND THEN IN MAY WE TRUE UP THE 1:43:02 NUMBERS WHEN WE SEE THE STATE'S FISCAL SITUATION TAX RECEIPTS AND 1:43:08 CASELOADS AND WE DO KNOW THAT TAX RECEIPTS ARE DOWN AND CASE LOAD GROWTH 1:43:15 IS UP AND WE HAVE A LOT OF FEDERAL UNCERTAINTY SO WE ARE EXPECTING A 1:43:20 PRETTY PROBABLY NOT A BUSINESS AS USUAL MAY REVISE AS WE SAW IN JANUARY 1:43:28 AND IT IS POSSIBLE THAT WE WILL SEE REDUCTIONS IN THAT MID MONTH SO WE 1:43:36 WILL SHARE OUT WITH THE NETWORK ANYTHING THAT WE LEARN AND OUR SECRETARY SECRETARY JOHNSON OF HEALTH AND HUMAN 1:43:43 SERVICES AGENCY ALWAYS CONVENES A STAKEHOLDER CALL THE DAY THAT THE MAY REVISE IS ISSUED AND ALL OF YOU WILL BE 1:43:50 INCLUDED IN THAT TO LISTEN IN IF THERE ARE ANY CHANGES THAT IMPACT THE 1:43:55 ISSUES WE ALL CARE SO MUCH ABOUT AND WITH THAT ONE OTHER PIECE IN THE 1:44:02 MIDST OF ALL OF THIS WE ARE UPDATING OUR STATE PLAN ON AGING AND WE WILL BE HAVING WE'LL BE 1:44:10 RELEASING A DRAFT DOCUMENT IN JUNE AND WE WILL HAVE A PUBLIC HEARING IN LOS ANGELES AND A VIRTUAL HEARING FOR 1:44:17 EVERYONE STATEWIDE SO YOU'LL SEE MORE ABOUT THAT WE DO THAT EVERY FOUR YEARS AND WE'LL BE SUBMITTING THAT FOR 1:44:24 APPROVAL IN JULY OF THIS YEAR SO THOSE WERE 1:44:30 THE POINTS THAT I WANTED TO SHARE FROM THE DEPARTMENT OF AGING AND I'M HAPPY TO TAKE ANY QUESTIONS OR COMMENTS I DO 1:44:38

JUST WANT TO THANK EVERYBODY I KNOW THESE HAVE BEEN SOME REALLY REALLY CHALLENGING MONTHS AND IT'S HARD 1:44:45 INDIVIDUALLY IT'S HARD PROFESSIONALLY IT'S HARD COLLECTIVELY AND WE'RE WORKING 1:44:51 WITH A LOT OF UNCERTAINTY AND AMBIGUITY 1:44:56 WHILE NEEDS WE KNOW THAT THE NEEDS AS WERE ARTICULATED THIS MORNING WITH 1:45:03 THE NO WRONG DOOR AS WE SAW FROM THE ALZHEIMER'S ASSOCIATION'S FACTS AND 1:45:08 FIGURES DOCUMENT RELEASED YESTERDAY WE KNOW THAT THE NEEDS FOR OUR POPULATION OLDER ADULTS PEOPLE WITH 1:45:15 DISABILITIES FAMILY CAREGIVERS PEOPLE LIVING WITH ALZHEIMER'S AND DEMENTIA ARE ONLY 1:45:21 INCREASING SO ANY 1:45:27 QUESTIONS COMMENTS FOR ME 1:45:35 WHAT ARE THE THREE DEPARTMENTS WHERE ACL IS GETTING DISTRIBUTED TO DO YOU KNOW THAT SUSAN 1:45:41 HI CELINE I DO SO THE PROGRAMMATIC WORK MOST OF THE PROGRAMMATIC WORK IS 1:45:48 EXPECTED TO GO TO CMS THE KIND OF THE ADMIN TYPE WORK 1:45:56 IS EXPECTED TO GO TO THE ADMINISTRATION OF CHILDREN AND FAMILIES ACF 1:46:03 AND SOME OF THE WORK I'M NOT SURE WHICH PART KIND OF THE PLANNING PIECE IS 1:46:10 SLATED TO GO TO ASPE THE ADMINISTRATION FOR STRATEGIC PLANNING AND 1:46:16 EVALUATION ALL THREE ARE UNDER THE HHS UMBRELLA 1:46:25 SO IMAGINE JUST OVER 100 PEOPLE DIVIDED AMONG 1:46:32 THREE FEDERAL AGENCIES IT'S NOT CLEAR YET WHERE THE ADMINISTRATOR

1:46:40

WOULD RESIDE WHERE THE LEADERSHIP WOULD SIT

1:46:46

BUT I'LL TELL YOU THAT THE ACTING SECRETARY MARY LAZARE SAID THE MISSION 1:46:52

AND THE WORK CONTINUES SHE HAS A LONG HISTORY SHE SERVED PREVIOUSLY WITH ACL

1:46:58

SHE'S BEEN IN THE AGING FIELD FOR OVER 30 YEARS AND SHE DID FOCUS A LOT ON 1:47:06

YOU KNOW SORT OF SOME OF THE THEMES THAT WE'RE SEEING AROUND MAKE AMERICA

1:47:12

HEALTHY AGAIN AND SOME OF THE FEEDING FOOD PROGRAMS SENIOR NUTRITION BEING A

1:47:19

HIGH PRIORITY SO SHE DID SPEAK TO YOU KNOW SOME OF THE PRIORITIES FOR THIS 1:47:26

ADMINISTRATION

1:47:39

AND WE HAVE AN OPEN DOOR SO IF YOU DO HAVE QUESTIONS NOT ON THE CALL OR YOU HEAR

1:47:45

RUMORS AND YOU WANT TO CHASE THEM DOWN OR SOMETHING YOU THINK WE NEED TO KNOW ABOUT PLEASE PASS IT ALONG WE'RE IN IT TOGETHER

1:48:00

THANK YOU SUSAN WE APPRECIATE YOU WE'RE GONNA MOVE I APPRECIATE YOU 1:48:09

WE'RE GOING TO MOVE ON WE'RE GOING TO MOVE ON WITH TINA FUNG ALZHEIMER'S DISEASE SECTION WITH THE

1:48:16

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH FOR SOME UPDATES 1:48:24

ALL RIGHT GOOD AFTERNOON EVERYONE MY NAME IS TINA FUNG THE MANAGER FOR THE ALZHEIMER'S DISEASE PROGRAM WITHIN THE

1:48:31

CHRONIC DISEASE CONTROL BRANCH AT THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH AND I'LL BE PROVIDING SOME UPDATES ON

1:48:37

OUR MOST RECENT WORK WITHIN THE PROGRAM NEXT SLIDE PLEASE 1:48:49

SO FOR OUR PREVENTION

1:48:55

PILLAR WE HAVE THE CALIFORNIA HEALTHY BRAIN INITIATIVE WHICH FUNDS 13 LOCAL 1:49:00 HEALTH JURISDICTIONS TO IMPLEMENT PUBLIC HEALTH STRATEGIES THAT PROMOTE BRAIN HEALTH ADDRESSES 1:49:07 DEMENTIA AND SUPPORT PEOPLE LIVING WITH DEMENTIA AND THEIR CAREGIVERS AND THE 1:49:12 INITIATIVE WILL SUNSET ON JUNE 30TH 2025 RIGHT NOW AT OUR PROGRAM LEVEL 1:49:20 WE'RE IN THE MIDST OF DISSEMINATING AN 1:49:27 EVALUATION REPORT HIGHLIGHTING THE PILOT COHORT THAT WORKED ON THIS 1:49:34 INITIATIVE FROM 2020 TO 2022 AND THAT'LL BE POSTED ON OUR CDPH WEB PAGE 1:49:40 IN THE NEXT COUPLE OF MONTHS NEXT SLIDE PLEASE 1:49:49 IN TERMS OF THE FEDERAL GRANTS 1:49:55 FOR OUR CDC BLOCK GRANT WE ARE CONTINUING TO IMPLEMENT OUR COMMUNITY 1:50:01 NEEDS ASSESSMENT FOR YEAR ONE THE FOCUS OF THIS BLOCK GRANT IS 1:50:08 TO ESTABLISH RELATIONSHIPS WITH TRIBAL AND RURAL COMMUNITIES AND 1:50:14 PROMOTE THE HEALTHY BRAIN INITIATIVE AMONG THESE COMMUNITIES 1:50:20 FOR OUR BOLD GRANT SO BOLD STANDS FOR BUILDING OUR LARGEST DEMENTIA 1:50:25 INFRASTRUCTURE WE ARE IN THE PROCESS OF SUBMITTING OUR YEAR3 CONTINUATION 1:50:30 PLAN TO THE CDC AND LIKE SUSAN SAID WE'VE HEARD FROM THE CDC THERE WERE 1:50:37 SOME STAFFING CHANGES THERE WERE SOME REDUCTIONS IN STAFFING BUT WE ARE 1:50:44 GRATEFUL TO BE ABLE TO CONTINUE WITH OUR CONTINUATION PLAN FOR THIS GRANT 1:50:51 FOR THE 2526 FEDERAL FISCAL NEXT SLIDE PLEASE 1:51:01

OKAY SO FOR OUR CLINICAL AND CAREGIVING 1:51:08 PILLAR ADP ALSO FUNDS 10 CALIFORNIA ALZHEIMER'S DISEASE CENTERS 1:51:14 THAT PROVIDES DEMENTIA SCREENING AND DIAGNOSIS AS WELL AS TRAINING FOR HEALTH 1:51:19 PROFESSIONALS AND THE CADC'S ARE CURRENTLY WORKING ON REVISING THEIR ASSESSMENT OF COGNITIVE COMPLAINTS 1:51:26 TOOLKIT FOR ALZHEIMER'S DISEASE THERE'S A LINK THERE SO IF YOU HAVE A CHANCE YOU CAN TAKE A LOOK AT THE 1:51:34 TOOLKIT SO THAT'S THEIR MAIN PRIORITY FOR THIS YEAR AND TO BE AND 1:51:41 FOR THIS TOOLKIT TO BE ADOPTED AND IMPLEMENTED AT LOCAL CLINICS NEXT SLIDE PLEASE 1:51:52 AND AGAIN ADP IS PARTNERING WITH TWO UNIVERSITIES ON DEVELOPMENT OF CAREGIVER 1:51:57 TRAININGS THE TEAM AT UCI UC IRVINE IS CURRENTLY IN PRODUCTION AND BETA TESTING 1:52:04 THEIR SELF-PACED E-LEARNING STYLE MODULES THEY'RE ADAPTING THEIR MATERIALS IN SPANISH AND CONDUCTING 1:52:12 ONLINE SURVEYS FOR INPUT AND AT UCSF THEY ARE FINALIZING THEIR MICROLEARNING 1:52:19 VIDEOS USING LIVE EDUCATIONAL SESSION RECORDINGS THAT HIGHLIGHT KEY DEMENTIA 1:52:25 CAREGIVER SKILLS THEY ARE ALSO IN THE PROCESS OF HAVING REGIONAL SENIOR 1:52:30 COMMUNITY AND CULTURAL ORGANIZATIONS REVIEW THEIR CAREGIVER TRAINING 1:52:36 CONTENT NEXT SLIDE PLEASE AND FOR RESEARCH AND 1:52:43EVALUATION AND AT THIS TIME OUR PROGRAM CONTINUES TO PROVIDE TECHNICAL ASSISTANCE TO THE SEVEN RESEARCH 1:52:50 **GRANTEES THEY WERE AWARDED IN** 1:52:56

2023 AND THEY STARTED THEIR RESEARCH ON JULY 1ST 1:53:03 2024 THEIR WORK THEIR RESEARCH WORK CONTINUES UNTIL 2028 1:53:14 NEXT SLIDE FOR THE 2526 STATE FISCAL YEAR ADP 1:53:23 INTENDS TO CONTINUE RAISING PUBLIC AWARENESS OF BRAIN HEALTH AND DEMENTIA BY PROMOTING NEWLY DEVELOPED RESOURCES 1:53:31 WE WILL ALSO CONTINUE OUR PARTNERSHIPS WITH OTHER CDPH PROGRAMS THAT WERE RELATED TO AGING AND OTHER 1:53:38 STATE AGENCIES SUCH AS CDA AND WE HOPE TO BUILD NEW PARTNERSHIPS WITH TRIBAL AND RURAL COMMUNITIES THROUGH OUR WORK 1:53:46 IN THE BLOCK GRANT FOR FUNDED PARTNERS ADP WILL CONTINUE TO PROVIDE 1:53:51 TECHNICAL ASSISTANCE TO OUR 10 CADC'S AS WELL AS OUR RESEARCH GRANTEES AND 1:53:57 LASTLY WE WILL BE BEGINNING EVALUATION OF THE HEALTHY BRAIN 1:54:03 INITIATIVE WITHIN CALIFORNIA FOR ALL 13 COUNTIES WHO WERE FUNDED FOR THIS 1:54:08 INITIATIVE NEXT SLIDE 1:54:15 AND FINALLY THE CALIFORNIA NEURODEGENERATIVE DISEASE REGISTRY FROM 1:54:22 OUR SISTER BRANCH THE CHRONIC DISEASE SURVEILLANCE AND RESEARCH **BRANCH HAS** 1:54:27 ANNOUNCED THE ROLL OUT OF THEIR ALZHEIMER'S DISEASE REGISTRY THE CNDR IS CALIFORNIA'S 1:54:35 STATEWIDE POPULATION-BASED NEURODEGENERATIVE DISEASE SURVEILLANCE SYSTEM WITHIN CDPH IN 2021 CALIFORNIA 1:54:44 ENACTED THE HEALTH AND SAFETY CODE WHICH REQUIRES CNDR TO COLLECT 1:54:50 NEURODEGENERATIVE DISEASE INFORMATION OTHER THAN PARKINSON'S DISEASE WHICH 1:54:55 CDPH BEGAN COLLECTING IN 2020 I MEAN 2018 EXCUSE ME IN 2023 CNDR STARTED 1:55:04

COLLECTING DATA ON MULTIPLE SCLEROSIS CDPH USES THE DATA 1:55:10 COLLECTED BY CNDR TO DETERMINE INCIDENCE AND PREVALENCE OF THESE NEURODEGENERATIVE 1:55:17 DISEASES RECENTLY HEALTHCARE PROVIDERS ARE REQUIRED TO REPORT ALZHEIMER'S 1:55:23 DISEASE DIAGNOSIS TO CNDR STARTING ON JULY 1ST OF THIS YEAR 1:55:30 SO HEALTH PROFESSIONALS CAN FIND MORE INFORMATION ON CNDR'S WEB PAGE WHERE 1:55:37 A GUIDE TO REPORTING IS AVAILABLE AND THEIR CONTACT 1:55:42 INFORMATION IS THERE IF ANYBODY HAS QUESTIONS ABOUT THE REQUIREMENTS FOR 1:55:48 REPORTING LASTLY AND IF ANYONE HAS 1:55:55 QUESTIONS FOR OUR PROGRAM YOU CAN ALWAYS EMAIL US AT 1:56:02 ALZHEIMERS D AT CDPH DOT C A DOT GOV 1:56:10 THANK YOU TINA ANY OUESTIONS OR COMMENTS FOR TINA 1:56:15 I'VE GOT ONE IS THAT BARBRA YEAH IT'S BARBRA OKAY SO TINA THE 1:56:23 CNDR WHICH I HEAR YOU SAYING THAT INFORMATION GETS USED AT LEAST IN PART TO DETERMINE PREVALENT TRAIT SO MY 1:56:30 CONCERN IS THAT UNLIKE THE OTHER DISEASES OR NOT TO THE DEGREE WITH 1:56:37 THE OTHER DISEASES ALZHEIMER'S DISEASE IS UNDERDIAGNOSED SO I'M REALLY CONCERNED THAT IF 1:56:44 YOU'RE PULLING FORWARD DIAGNOSIS INFORMATION INTO IT AND USING THAT AS A 1:56:50 BASIS FOR DETERMINING PREVALENCE THAT THOSE NUMBERS ARE NOT GOING TO BE ACCURATE LIKE THEY MIGHT BE FOR MS OR 1:56:57 THE OTHER NEURODEGENERATIVE DISEASES THAT THAT ALSO REPORT INTO THIS SYSTEM CAN YOU JUST SPEAK TO THAT A BIT 1:57:07

I'M NOT FAMILIAR WITH CNDR THEY ARE A 1:57:13 PROGRAM FROM OUR SISTER BRANCH BUT YOU DO HAVE A GOOD POINT 1:57:20AND DO YOU HAVE ANY SUGGESTIONS 1:57:26 YEAH IT'S A GREAT WE ACTUALLY DIDN'T SUPPORT THE THIS REGISTRY FOR 1:57:33 ALTERNATIVE USE FOR THIS REASON BUT HERE WE ARE AND IT'S BEING IMPLEMENTED 1:57:39 SO I GUESS MAYBE THAT'S A CONVERSATION 1:57:45 ABOUT MAYBE I DON'T KNOW WHAT THAT FORMULA MIGHT LOOK LIKE FOR ACCOUNTING 1:57:51 FOR THAT UNDERDIAGNOSIS THAT WE KNOW EXISTS SO THE DATA WILL BE INTERESTING IT JUST WON'T BE A COMPLETE PICTURE AND 1:57:57 AGAIN IN A WAY THAT'S PERHAPS NOT THE CASE WITH THE OTHER DISEASES SO I THINK I JUST WOULDN'T WANT TO SEE NUMBERS COME 1:58:05 OUT ONLY BASED ON THE INFORMATION OUT OF THAT REGISTRY SO AGAIN I DON'T KNOW IF 1:58:10 THAT'S AN INTERNAL CONVERSATION BETWEEN YOU AND THE PARTNER AGENCY OR IF THERE'S I MEAN YOU KNOW WE'D BE HAPPY TO BE PART 1:58:16 OF THAT CONVERSATION BUT I JUST I HOPE SOMEBODY IS THINKING THAT THROUGH 1:58:22 DO YOU MIND ELABORATING ON HOW THIS THE 1:58:27 ALZHEIMER'S REGISTRY IS DIFFERENT FROM THE OTHER IN THE SENSE OF WHETHER THE 1:58:32 OTHER DISEASES GO UNDERDIAGNOSED TO THE DEGREE THAT ALZHEIMER'S DISEASE DOES I 1:58:38 AM NOT AN EXPERT ON MS FOR SURE OR THE OTHER DISEASES SO PERHAPS THIS IS AN ISSUE THERE AS WELL SO PERHAPS THERE'S 1:58:44 ALREADY A WAY TO ACCOUNT FOR THAT AGAIN IF THIS DATA IS BEING USED TO 1:58:49

SET A BASELINE AND DETERMINE PREVALENCE RATES BUT THAT'S WHAT IT COMES. DOWN TO SO IF DIAGNOSES OF ALZHEIMER'S DISEASE 1:58:56 ARE GOING TO BE REPORTED IN BY DOCTORS THAT'S NOT THE PROBLEM THE PROBLEM IS 1:59:02 ALL THE DEMENTIA THAT GOES UNDIAGNOSED BUT IS THEREFORE THEN NOT REPORTED INTO THE SYSTEM IT'S JUST NOT A COMPLETE 1:59:09 PICTURE WHEN IT COMES TO ALZHEIMER'S DISEASE AND OTHER FORMS OF DEMENTIA 1:59:18 JUST WANT TO BE CAREFUL HOW THAT DATA IS USED AGAIN IF IT'S IF YOU'RE PUTTING OUT A PREVALENCE RATE BASED ONLY ON THAT I'D 1:59:24 BE VERY CONCERNED YEAH BARBRA I'LL JUST ADD TO THAT WE 1:59:31 IT'S A FEW YEARS OLD NOW BUT I CAN CERTAINLY TINA PROVIDE YOU WITH THE SPECIAL REPORT THAT THE FACTS AND 1:59:37 FIGURES HAD ON DIAGNOSIS BUT IT'S BELIEVED THAT ABOUT 50% OF PEOPLE LIVING WITH ALZHEIMER'S HAVE NEVER BEEN 1:59:43 FORMALLY DIAGNOSED BY THEIR HEALTHCARE PROFESSIONAL SO IT IS IT FAMILIES JUST 1:59:49 THEY IGNORE THE WARNING SIGNS FOR ALL THE REASONS THAT WE KNOW ABOUT IT'S CHALLENGING TO DIAGNOSE IT TAKES 1:59:56 MONTHS AND MONTHS AND MONTHS SO IT'S JUST SOMETHING FOR YOU TO BE REALLY 2:00:02 AWARE OF WHEN YOU SEE DATA COMING OUT OF IT 2:00:09 ALL RIGHT I APPRECIATE YOUR FEEDBACK AND WE'LL DEFINITELY BRING THIS UP WITH 2:00:14 OUR SISTER BRANCH AND LETTING THEM KNOW HOW THEY'RE ANALYZING THE DATA 2:00:23 SHOULD BE CONSIDERED CAREFULLY 2:00:31 THANK YOU BARBRA FOR ASKING THAT QUESTION ANYONE ELSE WITH A QUESTION OR

2:00:40

COMMENT I DON'T SEE LET ME SUSAN I

2:00:45

WANT TO THANK TINA BUT ALSO I'M GOING TO SHARE I WAS FOR THOSE WHO ARE 2:00:51

INTERESTED DR ERICA PAN'S STATE OF PUBLIC HEALTH REPORT AND TESTIMONY TO 2:00:57

THE LEGISLATURE HAD SOME REFERENCES TO ALZHEIMER'S AND DEMENTIA I'LL SHARE THAT LINK FOR ANYONE WHO WANTS TO READ UP ON

2:01:04

THAT THANK YOU SUSAN

2:01:12

THANK YOU SUSAN ALL RIGHT ANYONE ELSE

2:01:22

THANK YOU AGAIN TINA FOR ALWAYS SHARING GREAT UPDATES FOR US I KNOW THERE'S

2:01:28

SOME CHALLENGING TIMES BUT GLAD TO HEAR THAT SOME OF THE PROGRAMS ARE CONTINUING

2:01:34

AND HOPEFULLY WE'LL ALL HAVE CREATIVE SOLUTIONS TO EXPAND MORE THINGS IN

2:01:40

THIS CHALLENGING TIME SO THANK YOU I THINK WE'RE MOVING ON TO OUR LEGISLATIVE UPDATE BARBRA AND ANDREW I DON'T

2:01:49

KNOW IF ANDREW IS HERE BUT I THINK BARBRA WILL START I WILL START I DO THINK ANDREW IS HERE I'M HERE YEAH

2:01:57

HAPPY TO LET BARBRA GO FIRST SO I'M ACTUALLY GOING TO START IN A LITTLE BIT OF AN UNUSUAL PLACE WE CAN GO

2:02:03

TO THE NEXT SLIDE BECAUSE I DON'T USUALLY TALK ABOUT FEDERAL ACTIVITY I JUST FOCUS ONLY ON STATE LEGISLATIVE

2:02:09

WORK BUT HERE'S THE THING WHATEVER HAPPENS AT THE FEDERAL LEVEL FLOWS IN

2:02:14

OUR DIRECTION IT IMPACTS THE STATE AND THE BUDGET CHALLENGES WE FACE IT 2:02:20

IMPACTS THE HEALTH CARE SYSTEM THAT OUR FAMILIES ACCESS AND IT IMPACTS PEOPLE LIVING WITH ALZHEIMER'S DEMENTIA AND 2:02:26 THEIR CAREGIVERS DIRECTLY SO IT'S HARD TO HAVE A CONVERSATION ABOUT WHAT'S GOING ON AT THE STATE LEVEL WITHOUT 2:02:32 ACKNOWLEDGING WHAT'S HAPPENING AT THE FEDERAL LEVEL SO I WANTED TO START BY 2:02:37 JUST YOU KNOW AS YOU'RE WATCHING THE NEWS AND HEARING ABOUT POTENTIAL CUTS 2:02:43 HERE OR THERE AND YOU'RE YOU MAY BE WONDERING YOU KNOW DOES ANY OF THIS DIRECTLY IMPACT THIS PARTICULAR ISSUE 2:02:49 AREA SO I WANTED TO JUST GIVE YOU A SENSE OF SO YOU CAN BE ON THE LOOKOUT 2:02:55 FOR WHERE SOME OF THE VERY DIRECT ALZHEIMER'S PROGRAMS LIVE WITHIN THE 2:03:01 FEDERAL GOVERNMENT AND OF COURSE THERE ARE OTHER YOU KNOW WE'RE TOUCHED BY ALMOST EVERY ASPECT OF THE FEDERAL 2:03:07 GOVERNMENT BUT HERE ARE SOME CENTRAL ISSUES AND SUSAN ALREADY SPOKE TO THE ADMINISTRATION ON COMMUNITY LIVING AND 2:03:13 THE FIRST HALF OF OUR MEETING THIS MORNING THERE WERE MULTIPLE EXAMPLES OF GRANTS THAT CAME TO THE STATE TO DO 2:03:19 IMPORTANT WORK THAT CAME FROM THE ALZHEIMER'S DISEASE PROGRAMS INITIATIVE THEY ALSO HOUSE THE NATIONAL 2:03:25 ALZHEIMER'S AND DEMENTIA RESOURCE CENTER AND THE NATIONAL HEALTH CENTER THE FOOD AND DRUG ADMINISTRATION IS ON HERE 2:03:31 BECAUSE ANYTHING THAT IS COMING OUT OF THE RESEARCH WORLD AND MOVING OUT INTO 2:03:36 BEING ACCESSIBLE BY OUR HEALTH CARE PROFESSIONALS AND OUR PEOPLE LIVING WITH DISEASE IT'S GOT TO BE APPROVED BY 2:03:42 THE FDA FIRST THAT IS A DELIBERATIVE PROCESS BY DESIGN IT IS NOT SPEEDY SO 2:03:49 REDUCTIONS THERE THAT COULD POSSIBLY SLOW DOWN THAT PROCESS COULD THEN ALSO 2:03:56

RESULT IN ADVANCES IN DRUGS AND TREATMENTS NOT BEING AVAILABLE TO PEOPLE

2:04:02

AS QUICKLY AS THEY MIGHT OTHERWISE BE SO THAT'S A CONCERN THAT WE'RE WATCHING CENTER FOR MEDICARE MEDICAID SERVICES

2:04:08

WE'VE ALREADY TALKED ABOUT THE GUIDE MODEL WE'VE TALKED A LITTLE BIT ABOUT THE STATE MEDICAID WAIVERS WE HAVE A

2:04:14

REALLY BIG ONE HERE THE CAL AIM PROGRAM SO ALL OF THAT RUNS THROUGH MEDICARE AND MEDICAID SERVICES THEY'RE THE ONES WHO

2:04:20

ARE APPROVING WAIVER PROGRAMS AND THE RULES AROUND SOMETHING LIKE THE GUIDE PROGRAM SO THIS IS ANOTHER AGENCY THAT

2:04:26

WE WANT TO BE ROBUSTLY STAFFED AND FUNDED CENTER FOR DISEASE CONTROL 2:04:32

IT'S SO FANTASTIC HOW THE PUBLIC HEALTH WORLD HAS REALLY EMBRACED THIS ISSUE OF ALZHEIMER'S AND DEMENTIA SEES THEIR

2:04:39

PLACE IN ADDRESSING IT THE BOLD INITIATIVE IS A FANTASTIC EXAMPLE OF THAT IMPORTANT WORK IS HAPPENING AT

2:04:46

THE COMMUNITY LEVEL IN MY COMMUNITY IN LOS ANGELES THAT'S FUNDED BY THE BOLD INITIATIVE DOING THINGS LIKE

2:04:53

INCREASING EARLY DETECTION WHICH SPEAKS DIRECTLY TO THE ISSUE THAT WE WERE JUST TALKING ABOUT WITH THE DATA AND THEN

2:04:59

FINALLY WHAT'S PROBABLY VERY TOP OF MIND FOR ALL OF US WHO ARE IN THIS CONVERSATION TODAY IS NATIONAL

2:05:05

INSTITUTES OF HEALTH RIGHT SO THIS IS FUNDING ALL OF THAT INCREDIBLE RESEARCH AND WE DON'T WANT TO SEE ANY OF THAT SLOWED DOWN THEY'RE ALSO OPERATING THE

2:05:12

ALZHEIMER'S DOT GOV WEBSITE SO AGAIN IF SOMEBODY'S COMING OUT OF A DOCTOR'S OFFICE WITH A DEMENTIA THEY'RE GOING TO

2:05:18

THE COMPUTER AND GOOGLING THINGS THIS IS A RESOURCE THAT WE DO STILL WANT TO BE AVAILABLE TO

2:05:25

INDIVIDUALS SO I'M GOING TO TALK A LITTLE BIT NEXT SLIDE ABOUT WHAT WE ARE SEEING PROPOSED SO AS SUSAN

2:05:34

ALLUDED TO THE ADMINISTRATION ON COMMUNITY LIVING IS CURRENTLY BEING DISMANTLED AND THESE ARE THE THREE 2:05:41DIRECTIONS WHICH SUSAN ALSO TALKED AS WELL WHICH WHERE PROGRAMS ARE GOING NEXT 2:05:49 SLIDE FOOD AND DRUG ADMINISTRATION YOU CAN SEE 3500 POSITIONS CUT ALMOST 20% OF THEIR WORKFORCE SO AGAIN YOU 2:05:57 KNOW ALL THOSE FOLKS THERE DOING YOU KNOW MORE WITH LESS THAT'S A CONCERN 2:06:03 THAT WE WILL BE WATCHING NEXT SLIDE 2:06:09 SAME OVER AT NATIONAL INSTITUTES OF HEALTH AND THE CDC SO REDUCTIONS AT NIH OF ABOUT 1,200 CDC STAFF REDUCTIONS 2:06:18 WHICH INCLUDE AT MY UNDERSTANDING IS AND I SHOULD CAVEAT EVERYTHING I'M SAYING IT LIKE AN HOUR FROM NOW 2:06:25 SOMETHING MIGHT COME OUT THAT IS A WHOLE NEW ANNOUNCEMENT THAT COMPLETELY CHANGES HALF OF WHAT I'VE BEEN TALKING ABOUT 2:06:30 TODAY I MEAN THAT'S IT'S A REALLY DYNAMIC SPACE RIGHT NOW AND SO THAT'S JUST SOMETHING THAT WE ALL NEED TO KEEP 2:06:35 IN MIND BUT MY UNDERSTANDING IS THAT ALL OF THE BOLD STAFF AT CDC HAVE BEEN PLACED ON ADMINISTRATIVE LEAVE SO WHAT 2:06:42 DOES THAT DO TO ADMINISTERING THE GRANTS THAT ARE IN PROCESS RIGHT NOW 2:06:48 WE DON'T REALLY KNOW WE'RE GOING TO BE WATCHING TO SEE WHAT HAPPENS THERE NEXT 2:06:54 SLIDE OKAY SO THAT'S THE ADMINISTRATIVE SIDE OF THIS NOW WHAT'S HAPPENING WHEN 2:06:59 IT COMES TO THE DOLLAR THIS IS REALLY A RIGHT NOW ACTIVITY SO MY 2:07:04 UNDERSTANDING IS AND SUSAN ALSO ALLUDED TO THE LEAKED DOCUMENT THAT HAD COME OUT AT LEAST A FEW WEEKS AGO MY 2:07:11

UNDERSTANDING IS THAT IN IT COULD BE TODAY IT COULD BE TOMORROW WHERE THERE'S ACTUALLY AN OFFICIAL RELEASE OF I GUESS WE'RE CALLING IT THE SKINNY BUDGET WHICH

2:07:18

IS SORT OF AN OVERVIEW OF WHAT THE GUIDANCE IS FOR THE COMMITTEES THE 2:07:26

CONGRESSIONAL COMMITTEES AS THEY'RE DETERMINING WHAT WHERE THE REAL CUTS LIKE HERE IS WHERE THE RUBBER IS MEETING THE ROAD SO THE GUIDANCE GIVEN

2:07:33

TO I'M JUST GOING TO TAKE FOR EXAMPLE THE COMMITTEE THAT OVERSEES THE MEDICAID PROGRAM BECAUSE THERE'S BEEN A LOT OF

2:07:39

COVERAGE OF POTENTIAL CUTS TO MEDICAID THEY WOULD BE DEVASTATING FOR THE STATE OF CALIFORNIA AND FOR OUR FAMILIES IF

2:07:45

THEY ACTUALLY PLAY OUT THIS WAY SO THEY WERE GIVEN THE GUIDANCE THAT THEY NEED TO FIND \$880 BILLION THAT IS OVER 10

2:07:52

YEARS AND OUT OF THE NUTRITION PROGRAM \$230 BILLION

2:07:58

NOW WHAT HAS TO HAPPEN IS THE COMMITTEE HAS TO START MEETING AND ACTUALLY LINING

2:08:03

THAT OUT EXACTLY WHERE IS THAT MONEY GOING TO COME FROM HOW ARE THEY GOING TO ACTUALLY GET TO THOSE NUMBERS SO I

2:08:11

WANT TO JUST TAKE A SECOND TO TALK ABOUT WHAT MEDICAID LOOKS LIKE LOOKS LIKE IN THE STATE OF CALIFORNIA IF YOU CAN GO TO

2:08:16

THE NEXT SLIDE ALL RIGHT SO AGAIN WE CALL IT

2:08:22

MEDICAL AND THE MEDICAL PROGRAM IS FUNDED BY THE STATE AND THE FEDERAL 2:08:28

GOVERNMENT SO BOTH ARE PUTTING IN FUNDS THAT ARE PROVIDING HEALTHCARE COVERAGE TO 15 MILLION CALIFORNIANS

2:08:36

BIRTH TO DEATH THEY THIS IS WHAT PROVIDES ACCESS TO SKILLED NURSING FACILITIES AND THE FULL RANGE OF HEALTH

2:08:43

CARE SO THOSE FEDERAL FUNDS MAKE UP JUST OVER 60% SO ANY CHANGE IN HOW THE

2:08:51

FEDERAL GOVERNMENT FUNDS THE MEDICAL PROGRAM IS GOING TO BE VERY DIFFICULT FOR THE STATE TO ACTUALLY BACK FILL AND 2:08:59 THERE WOULD BE OBVIOUSLY RIPPLE EFFECTS FOR ALL THE OTHER PROGRAMS THAT WE CARE ABOUT IF THAT IS INDEED THE SITUATION 2:09:05 THAT WE FIND OURSELVES IN AGAIN WE DO NOT KNOW AT THIS POINT WHAT THIS IS GOING TO LOOK LIKE THIS IS THE NEXT FEW 2:09:11 WEEKS I BELIEVE CONGRESS IS HOPING BEFORE OR AROUND THE MEMORIAL DAY 2:09:17 WEEKEND TO ACTUALLY HAVE A BUDGET BILL THAT THEY WOULD BE VOTING ON THAT'S VERY VERY SPEEDY BUT PERHAPS IT IS 2:09:23 INDEED WHAT WILL HAPPEN SO YOU KNOW BE WATCHING TO SEE WHAT COMES OUT OF THESE COMMITTEE CONVERSATIONS BUT 2:09:30 THERE'S ANOTHER COMPONENT OF THIS THAT I THINK DOESN'T GET AS MUCH COVERAGE BUT IT'S REALLY REALLY IMPORTANT AND THAT'S 2:09:35 THE NEXT SLIDE IF YOU'RE FAMILIAR WITH THE 2:09:42 AFFORDABLE CARE ACT A LOT OF FOLKS WERE ABLE TO GET ACCESS TO HEALTH CARE 2:09:47 COVERAGE THROUGH THE AFFORDABLE CARE ACT AND SOMETHING CALLED AN EXCHANGE HERE IN CALIFORNIA OUR HEALTHCARE EXCHANGE IS 2:09:54 CALLED COVERED CALIFORNIA AND THIS IS HOW ABOUT 1.8 MILLION CALIFORNIANS GET 2:10:00 ACCESS TO HEALTH CARE AND THIS IS IN PART AT LEAST THE GROUP OF PEOPLE THAT WE OFTEN TALK ABOUT LIKE THE MISSING 2:10:06 MIDDLE THE OVERLOOKED MIDDLE SO THESE ARE PEOPLE WHO MAKE TOO MUCH MONEY TO QUALIFY FOR STRAIGHT UP MEDICAID MEDICAL 2:10:13 AND NOT ENOUGH MONEY TO REALLY EASILY COVER THEIR HEALTH INSURANCE COSTS 2:10:19 AND OTHER HEALTH CARE EXPENSES SO THE COVERAGE THAT THEY GET THROUGH COVERED CALIFORNIA HAS BEEN GAME CHANGING 2:10:25

FOR SO MANY FAMILIES FINALLY GIVING THEM SOLID ACCESS TO HEALTH CARE BUT A REALLY 2:10:33 IMPORTANT PIECE OF HOW THAT HAPPENS IS MOST OF THOSE INDIVIDUALS GET SOME KIND OF SUBSIDY TO AFFORD THAT HEALTHCARE 2:10:40 COVERAGE THAT SUBSIDY COMES FROM THE FEDERAL GOVERNMENT SO IF YOU HEAR CUTS 2:10:46 THAT ARE BEING PROPOSED RELATED TO HEALTHCARE EXCHANGES AND THE FEDERAL GOVERNMENT IT'S THE 2:10:52 THESE 1.8 MILLION CALIFORNIANS WHO MIGHT BE AT RISK OF NO LONGER BEING ABLE TO AFFORD TO BUY THEIR HEALTHCARE COVERAGE 2:11:00 THROUGH THE EXCHANGE NEXT SLIDE I AM NOT GOING TO GO INTO ALL OF 2:11:05 THESE BUT THESE JUST AGAIN TO PUT INTO YOUR MIND AS YOU'RE WATCHING NEWS COVERAGE AND THEN WHEN THESE SLIDES GET 2:11:11 SENT OUT I REALLY ENCOURAGE YOU TO CLICK ON THAT LINK AT THE BOTTOM WHICH IS THE JUSTICE AND AGING FACT SHEET 2:11:18 THESE ARE ALL THE DIFFERENT WAYS THAT THEY MIGHT GO ABOUT CUTTING MEDICAID 2:11:23 AND THE ONE I WANT TO FOCUS ON AND I'M ACTUALLY GOING TO DROP SOMETHING INTO THE CHAT IF I CAN TALK AND DROP INTO THE 2:11:28 CHAT AT THE SAME TIME IS ABOUT THE WORK REQUIREMENTS BECAUSE I DO BELIEVE THAT THAT IS GOING TO BE HIGHLY 2:11:35 LIKELY FOR WORK REQUIREMENTS TO BE PUT IN PLACE AND IF ANYONE TALKS ABOUT 2:11:41 WORK REQUIREMENTS AS NOT BEING A CUT TO MEDICAID THEY ARE AND THAT THAT IS A REALLY 2:11:49 UGLY LOOKING LINK THAT I JUST PUT IN THERE BUT IT'S FROM THE COMMONWEALTH FUND AND IT JUST CAME OUT TODAY AND IT 2:11:56 GOES THROUGH THE IMPACT OF WORK REQUIREMENTS I THINK THAT'S MY LAST 2:12:01

FEDERAL SLIDE WE'RE GOING TO SLIDE OVER NOW TO STATE LEGISLATORS AND WE CAN GO NEXT SLIDE

2:12:08

YEAH OKAY GREAT OKAY ON TO HAPPIER TOPICS SO I'M GOING TO TALK ABOUT A FEW

2:12:15

PIECES OF LEGISLATION AND A COUPLE OF BUDGET ASKS AND THEN I'M GOING TO HAND IT OVER TO ANDREW AND HE'S GOING TO DO

2:12:20

A FEW MORE SO THE FIRST ONE IS ACTUALLY A PIECE OF LEGISLATION ALZHEIMER'S LOS

2:12:27

ANGELES ALZHEIMER'S SAN DIEGO AND ALZHEIMER'S ORANGE COUNTY ARE THE SPONSORS OF AND THIS ONE GREW OUT OF

2:12:33

WHAT WE WERE HEARING FROM SOME OF OUR SUPPORT GROUP MEMBERS WHO WERE SAYING THAT THEY WERE NOT ABLE TO STAY WITH

2:12:39

THEIR LOVED ONE FOR THE FULL LENGTH OF THEIR STAY IN THE HOSPITAL BEYOND 2:12:44

STANDARD VISITING HOURS OR THEY HAD ISSUES WHERE THEY AS A FAMILY MEMBER JUST NEEDED A BREAK AND THEY HAD A

2:12:50

NEIGHBOR OR A FRIEND WHO COULD COME AND STAY WITH THE LOVED ONE AND BECAUSE THEY WEREN'T A FAMILY MEMBER THEY WERE NOT

2:12:57

ALLOWED TO STAY BEYOND STANDARD VISITING HOURS SO THE BILL HAS BEEN AMENDED QUITE HAPPILY TO ACTUALLY EXPAND

2:13:04

THE POPULATIONS THAT WILL BE COVERED BEYOND JUST PEOPLE LIVING WITH A COGNITIVE IMPAIRMENT TO ALSO INCLUDE

2:13:09

PEOPLE WITH PHYSICAL INTELLECTUAL AND/OR DEVELOPMENTAL DISABILITIES TO JUST ENSURE THAT THOSE

2:13:16

FAMILY FRIENDS ARE ABLE TO STAY WITH THESE INDIVIDUALS WHILE THEY'RE IN THE HOSPITAL AND REALLY HELP FACILITATE

2:13:22

THEIR CARE WORKING WITH THE HEALTH CARE STAFF TO ENSURE THAT NEEDS ARE EFFECTIVELY COMMUNICATED AND MET SO THIS

2:13:29

BILL DID PASS OUT OF THE POLICY COMMITTEE AND IT'S IN ASSEMBLY

APPROPRIATIONS WE DON'T EXPECT THERE TO

2:13:35

BE COST TO THE STATE FOR ITS IMPLEMENTATION SO WE DO HOPE THAT WE WILL MOVE OUT OF THAT COMMITTEE 2:13:40 SUCCESSFULLY AND THEN PASS OFF THE ASSEMBLY FLOOR WHEN IT WHEN OUR TURN COMES NEXT 2:13:49 SLIDE NEXT TWO PIECES OF LEGISLATION I THINK OF REAL IMPORTANCE TO 2:13:55 CAREGIVERS THE FIRST ONE BOTH OF THESE ACTUALLY WERE FILED LAST SESSION AS WELL AND FOR DIFFERENT REASONS 2:14:01 WERE NOT SUCCESSFULLY PASSED SO BOTH OF THEM ARE TRYING AGAIN THE FIRST 2:14:08 ONE IS RELATED TO EXPANDING THE PAID FAMILY LEAVE PROGRAM SO THAT IT WOULD NOT JUST BE LIMITED TO A CERTAIN SET OF 2:14:14 FAMILIAL RELATIONSHIPS WHAT THIS ALSO WOULD DO IS LINE UP CALIFORNIA'S PAID FAMILY LEAVE PROGRAM WITH THE FEDERAL 2:14:22 JOB PROTECTIONS THAT ALREADY EXIST FOR FAMILY CAREGIVERS WHICH DO INCLUDE 2:14:27 PEOPLE LIKE A DESIGNATED PERSON A NEIGHBOR A FRIEND WHO'S PROVIDING CARE SO I THINK THIS IS ONE THAT REALLY 2:14:35 WOULD BE COULD AGAIN MAKE IT POSSIBLE FOR OUR FAMILY CAREGIVERS TO BALANCE ALL 2:14:41 OF THOSE COMPETING DEMANDS AND BE ABLE TO STAY HOME WITH THEIR LOVED ONE FOR AT LEAST CERTAIN PERIODS OF TIME TO 2:14:47 PROVIDE CARE THIS BILL IS MOVING AND SO WE ARE HOPEFUL THAT THIS TIME 2:14:52 IT WILL MAKE IT ACROSS THE FINISH LINE THE NEXT BILL ISN'T MOVING RIGHT 2:14:58 NOW AND SO I'M NOT SURE ABOUT ITS POSSIBILITY FOR PASSAGE THIS TIME THIS 2:15:03 IS SO THE BLUE ENVELOPE PROGRAM ALREADY EXISTS IN SOME COMMUNITIES IN CALIFORNIA 2:15:08 IN RIVERSIDE COUNTY AND SAN DIEGO COUNTY IN PARTICULAR AND THIS WOULD DIRECT 2:15:14

THE DEPARTMENT OF MOTOR VEHICLES TO MAKE THIS PROGRAM AVAILABLE TO ALL OF THE COUNTIES IN CALIFORNIA AT ITS MOST BASIC 2:15:21 LEVEL YOU CAN DO A LOT MORE WITH THE PROGRAM THAN JUST THIS IT IS A LITERAL BLUE ENVELOPE THAT FOR EXAMPLE 2:15:27 COULD BE KEPT IN THE GLOVE COMPARTMENT OF A CAR IF YOU AND LET ME JUST SAY THIS IS NOT JUST LIMITED TO PEOPLE 2:15:33 LIVING WITH A DEMENTIA THIS IS ALSO OF GREAT IMPORTANCE TO PEOPLE WITHIN THE AUTISM COMMUNITY SO IF 2:15:39 YOU WERE TO HAVE SOME KIND OF A LAW ENFORCEMENT ENCOUNTER YOU COULD SHARE THE INFORMATION IN THIS BLUE ENVELOPE 2:15:45 AND HELP THAT LAW ENFORCEMENT INDIVIDUAL UNDERSTAND THE DYNAMICS OF THIS CONVERSATION THAT THEY'RE HAVING 2:15:52 AND JUST ENSURE OR TRY TO ENSURE THAT IT DOESN'T ESCALATE IN DIRECTIONS. 2:15:57 THAT ARE POTENTIALLY DANGEROUS OR NOT PRODUCTIVE BUT AGAIN THIS ONE ISN'T 2:16:04 MOVING SO I DON'T KNOW THAT WE'RE GOING TO SEE PASSAGE THIS SESSION 2:16:09 NEXT SO A COUPLE OF BILLS THERE ARE A LOT OF BILLS FILED THIS SESSION IN RESPONSE TO THE WILDFIRE EMERGENCIES 2:16:16 THAT WE SAW IN JANUARY WE ABSOLUTELY SAW AS THOSE 2:16:22 DISASTERS UNFOLDED THAT THE NEEDS OF OLDER ADULTS WERE NOT EFFECTIVELY 2:16:30 OUICKLY MET IN THAT CHAOS AND IT IS A CHAOTIC SITUATION AND SO I'M HAPPY TO 2:16:36 SAY BOTH OF THESE BILLS ARE MOVING THE FIRST WOULD RELATE TO JUST ENSURING THAT THE AREA AGENCIES ON AGING DO HAVE 2:16:43 SOME KIND OF AN EMERGENCY SHELTER PRE-PLANNED WHERE OLDER ADULTS CAN GO SO 2:16:48 THAT WE CAN ENSURE THAT THEY CONTINUE TO GET THE SERVICES THEY NEED AND THEN THE SECOND WOULD BE DIRECTING CAL HHS TO 2:16:55

DEVELOP A WORK GROUP TO MAKE RECOMMENDATIONS ABOUT EVACUATION OR SHELTERING NEEDS FOR OLDER ADULTS AND

2:17:01

PERSONS WITH DISABILITIES IN LONG-TERM CARE FACILITIES SO AGAIN BOTH BILLS ARE MOVING HOPE TO SEE THEIR PASSAGE

2:17:11

NEXT OKAY NEITHER OH BACK ONE NEITHER OF THESE BILLS ARE MOVING 2:17:17

RIGHT NOW BUT THIS ISSUE OF FINANCIAL ABUSE IS A REALLY REALLY IMPORTANT ONE FOR THE FAMILIES THAT WE SERVE I

2:17:24

BELIEVE MY UNDERSTANDING IS WITH BOTH OF THESE PIECES OF LEGISLATION THERE'S GOING TO BE SOME CONVERSATION WITHIN THE BANKING COMMITTEE ABOUT HOW TO KIND

2:17:32

OF COMPREHENSIVELY ADDRESS THIS ISSUE I DO THINK BOTH OF THESE PIECES OF LEGISLATION ARE WOULD BE INCREDIBLY

2:17:39

HELPFUL TO OUR FAMILIES SO I DON'T KNOW IF THIS IS SOMETHING WE MIGHT CONSIDER IN A IN THE COMMITTEE'S LETTER TO THE

2:17:45

SECRETARY JUST TO ENCOURAGE THE LEGISLATURE AND THE COMMITTEE THESE 2:17:51

BILLS ARE GOING THROUGH TO REALLY TO BE ABLE TO MOVE THESE ISSUES FORWARD AND TO BE ABLE TO DO SOMETHING THAT WE DO TO

2:17:57

HELP OUR FAMILIES PROTECT THEIR LOVED ONES FROM FINANCIAL ABUSE AND THEN JUST

2:18:02

TWO MORE BUDGET ITEMS FOR ME AND THEN I'LL HAND IT OVER TO ANDREW SO WE CAN GO TO THE NEXT SLIDE AND ALSO TO SUSAN'S

2:18:11

POINT THAT WE ARE WAITING FOR THE GOVERNOR'S MAY REVISE THAT WE ARE ALL 2:18:18

NOT EXPECTING GOOD NEWS SO THAT IS GOING TO POTENTIALLY COMPLICATE SOME OF THESE BUDGET ASKS HOWEVER THIS

2:18:24

PARTICULAR ONE WOULD BE SEEKING FUNDS FROM THESE KEY FUNDS THAT I'VE NOTED HERE SO IT'S NOT GENERAL FUND MONEY AND

2:18:32

SO THAT DOES PERHAPS GIVE THIS BUDGET REQUEST A BIT MORE OF A CHANCE TO ACTUALLY BE

2:18:39

ENACTED AGAIN OUR FAMILIES OR INDIVIDUALS LIVING WITH A COGNITIVE IMPAIRMENT OR DEMENTIA DO MAKE UP A VERY 2:18:46 LARGE PERCENTAGE OF PEOPLE WHO ARE LIVING IN OUR SKILLED NURSING FACILITIES THEY ARE OBVIOUSLY VERY VULNERABLE AND 2:18:51 WHEN THEY'RE IN THOSE FACILITIES AND THE OMBUDSMAN PROGRAM IS ABSOLUTELY ESSENTIAL TO ENSURING THEIR SAFETY IT IS 2:18:58 A PHENOMENAL RESOURCE FOR OUR FAMILY CAREGIVERS SO I REALLY REALLY THINK THAT THIS IS A BUDGET ASK THAT YOU KNOW WE 2:19:05 SHOULD ABSOLUTELY DO WHAT EVERYTHING THAT WE CAN TO MAKE SURE THAT IT IS ACTUALLY IMPLEMENTED AND THEN THE LAST 2:19:12 ONE THIS ALSO SPEAKS TO OUR CONVERSATION FROM EARLIER THIS MORNING AND THESE ARE THE AGING AND DISABILITY 2:19:18 RESOURCE CONNECTIONS PROGRAM THE NO WRONG DOOR THIS WOULD BE ONE-TIME FUNDING AND IN A STATE AS BIG AS 2:19:25 CALIFORNIA IT ABSOLUTELY NEEDS MORE FUNDING IN ORDER TO MOVE FORWARD WHAT WE 2:19:31 KNOW IS JUST AN ABSOLUTELY CRITICAL COMPONENT TO ENSURING THAT OUR FAMILIES CAN ACTUALLY FIND AND ACCESS THE 2:19:38 SERVICES AND SUPPORTS THAT THEY NEED AND WITH THAT I HAND IT TO ANDREW 2:19:48 THANK YOU BARBRA 2:19:54 I'M ANDREW MENDOZA THE DIRECTOR OF STATE AFFAIRS IT IS NICE TO MEET YOU ALL I'VE 2:19:59 BEEN IN THIS POSITION SINCE LATE FEBRUARY SO THIS IS MY FIRST TIME BEING ABLE TO PRESENT IN FRONT OF THE ADVISORY 2:20:06 COMMITTEE AND I REALLY APPRECIATE THE INVITATION IF WE COULD MOVE TO THE NEXT SLIDE 2:20:13 SO THE ALZHEIMER'S ASSOCIATION IS SPONSORING SENATE BILL 412 BY SENATOR 2:20:18 LIMON AND THIS IS CREATING A TRAINING REQUIREMENT FOR AFFILIATED HOME CARE

2:20:24

AIDS ON DEMENTIA SPECIFIC CARE IT ADDS IN A PROVISION TO THIS EFFECT WITHIN THE 2:20:30 EXISTING REQUIREMENT FOR HOME CARE ORGANIZATIONS 5-HOUR TRAINING BLOCK WE THOUGHT THIS 2:20:36 WAS NECESSARY TO ENSURE A BASELINE LEVEL OF TRAINING ON ALZHEIMER'S DISEASE AND DEMENTIA TO ENSURE THAT HOME CARE AIDS 2:20:44 ARE ABLE TO PROVIDE QUALITY CARE TO THEIR CLIENTS THAT ARE LIVING WITH 2:20:50 DEMENTIA AND THIS WILL HELP PREVENT CAREGIVERS FROM EXPERIENCING FATIGUE BY 2:20:56 INSTILLING TRUST THAT THEY CAN TAKE A BREAK FOR THEIR OWN PERSONAL CARE AND WILL NOT HAVE TO WORRY AS MUCH ABOUT A 2:21:03 HIRED HAND BEING ILL EQUIPPED TO CARE FOR THEIR LOVED ONE IF WE CAN MOVE TO THE NEXT 2:21:10 SLIDE SO WE'RE ALSO SPONSORING THIS BUDGET REQUEST TINA DID MENTION THE WORK 2:21:17 THAT THE CALIFORNIA ALZHEIMER'S DISEASE CENTERS OR CADC'S ARE DOING AND THEY ARE 2:21:25 IN NEED OF MORE FUNDING SO THESE DIAGNOSTIC HUBS WERE FOUNDED IN THE 2:21:31 1980S TO PROVIDE A GEOGRAPHICALLY DIVERSE SET OF CENTERS FOCUSED ON RESEARCHING ALZHEIMER'S DISEASE AND THEY 2:21:38 PLAY A CRITICAL ROLE DEVELOPING A STANDARD OF CARE FOR TREATMENT AND CONDUCTING RESEARCH ON DEMENTIA THEY 2:21:45 HAVE STAFFS COMPRISED OF NEUROLOGISTS PSYCHOLOGISTS CLINICAL COORDINATORS AND SOCIAL WORKERS AND TO OPERATE A CENTER 2:21:52 THEY SPEND THEIR ALLOTMENT FROM THE STATE AND THEN FIND SUPPLEMENTAL FUNDING FROM ELSEWHERE TO FINISH PAYING OFF THESE 2:21:59 SALARIES SO THE CENTER ATTACHED TO USC THAT'S SERVICING A PORTION OF LA COUNTY 2:22:06

RANCHO LOS AMIGOS IS LIKELY TO CLOSE THIS FISCAL YEAR AND THEN ANOTHER THAT'S 2:22:13 IN FRESNO MAY CLOSE THE YEAR AFTER THAT THESE CLOSURES WOULD DISPLACE 2:22:19 PATIENTS INCREASING THE DISTANCE AND TIME ASSOCIATED WITH APPOINTMENTS TO SEE THESE SPECIALISTS WE WOULD LIKE FOR 2:22:26 THEIR BUDGET TO BE AUGMENTED SO THAT WE CAN GET CLOSER TO THE ACTUAL **OPERATING COST WHICH IS** 2:22:33 \$500,000 ANNUALLY WE CURRENTLY SPEND 2.8 MILLION ON THESE CENTERS SO 2:22:41 WE'RE ASKING FOR A 2.2 MILLION BUDGET AUGMENTATION WHICH WOULD BRING THE 2:22:46 STATE'S ANNUAL INVESTMENT TO 5 MILLION IF WE CAN MOVE TO THE NEXT 2:22:53 SLIDE AND THEN SO THESE ITEMS THAT I WILL BE TALKING ABOUT THERE HERE AFTER 2:23:00 ARE ALL THE THINGS THAT WE'RE SUPPORTING BUT NOT SPONSORING SO THOSE FIRST TWO 2:23:07 WERE OUR MAIN FOCUSES AND THEN SO THIS IS A BUDGET REQUEST THAT IS BEING CHAMPIONED BY THE 2:23:15 CALIFORNIA ASSOCIATION OF ADULT DAY SERVICES AND THEY ARE ASKING FOR A RATE 2:23:22 INCREASE FOR COMMUNITY-BASED ADULT SERVICES SO CAADS PREVIOUSLY SECURED A 2:23:28 RATE INCREASE BUT THEY WERE NOT INCLUDED IN THE PROVISIONS OF PROP 35 SO 2:23:34 THIS PROGRESS WAS WIPED AWAY WHEN THAT MEASURE PASSED AND THE **ASSOCIATION IS** 2:23:39 TRYING TO RESTORE THE INCREASE THAT THEY PREVIOUSLY RECEIVED TO KEEP THESE CENTERS OPERATING THEY PROVIDE 2:23:45 INDIVIDUALS WITH THE OPPORTUNITY TO RECEIVE QUALITY CARE IN ADDITION TO **RESPITE FOR CAREGIVERS A REPRESENTATIVE FROM** 2:23:52

CAADS PROVIDED AT A RECENT JOINT HEARING OF ASSEMBLY BUDGET SUBCOMMITTEE 2:23:57 ONE NUMBER ONE AND NUMBER TWO ON HEALTH AND HUMAN SERVICES THAT CENTERS HAVE 2:24:03 ALREADY BEGUN TO CLOSE AND THAT MORE ARE ON THE BRINK OF CEASING **OPERATIONS** 2:24:08 THERE'S ADDITIONAL PRESSURE BECAUSE MANAGED CARE PLANS WERE PROVIDED WITH AN INACCURATE PROVIDER RATE EARLIER THIS 2:24:14 YEAR NOW THAT THE ERROR HAS BEEN DETECTED THEY'RE WANTING TO CLAW BACK THAT MONEY FROM THE CENTERS WHICH COULD 2:24:21 EXPEDITE EVEN MORE CLOSURES THE CURRENT MEDICAL RATE FOR CBAS IS 2:24:28 \$83.90 PER PARTICIPANT PER DAY WHICH IS ALMOST \$50 BELOW THE 2:24:35 ESTIMATED 131 PER PARTICIPANT PER DAY TO OPERATE A CBAS CENTER SO THIS WILL HELP 2:24:42 GET THEM A BIT CLOSER TO ACTUAL OPERATION COSTS BUT THEY HAVE 2:24:50A SERIES OF PLANS TO GET THEM TO FULL OPERATIONAL COST OVER MANY YEARS SO 2:24:58 THIS IS ONE STEP IN THE PROCESS TO GET THEM CLOSER TO THAT GOAL IF WE COULD 2:25:04 GO TO THE NEXT SLIDE 2:25:09 SO THIS BILL OH CAN WE GO BACK ONE THANK YOU SO SENATE BILL 470 BY 2:25:17 SENATOR LAIRD IS A IT WAS RECENTLY AMENDED AND IT NOW EXTENDS THE **JANUARY 1** 2:25:25 2026 SUNSET DATES ON PROVISIONS AUTHORIZING A STATE BODY TO MEET VIA 2:25:31 TELECONFERENCE THERE AND IT'S GOING TO NOW BE 2:25:36 MOVED TO 2030 IT ALSO REMOVES THE REQUIREMENT THAT ANY STATE BODY THAT IS 2:25:43

AN ADVISORY BOARD ADVISORY COMMISSION ADVISORY COMMITTEE ADVISORY SUBCOMMITTEE OR SIMILAR 2:25:48 MULTI-MEMBER ADVISORY BODY TO MEET VIA TELECONFERENCING IF A DECORUM OF THE 2:25:54 MEMBERS ARE PHYSICALLY PRESENT AT THE PRIMARY PHYSICAL LOCATION FOR THE MEETING AND INSTEAD ONLY REQUIRES THAT 2:26:01 AT LEAST ONE STAFF MEMBER OF THE STATE BODY TO BE PRESENT A PIECE OF 2:26:07 EVIDENCE THAT THE SPONSORS HAVE BEEN USING WHICH IS THE CALIFORNIA COMMISSION 2:26:12 ON AGING IS THAT THE LITTLE HOOVER COMMISSION CONDUCTED AN ANALYSIS THAT 2:26:18 PROVIDED THE OPTIONALITY FOR REMOTE PARTICIPATION HAS CUT COSTS FROM THE STATE WHILE INCREASING PARTICIPATION AND 2:26:26 THIS BILL PROVIDES EQUITY AND INCLUSION WITHIN A SUBSET OF THE GOVERNMENT BY 2:26:31 ENABLING CAREGIVERS AND PEOPLE WITH DISABILITIES TO SERVE ON DECISION-MAKING BODIES THAT AFFECT THEIR 2:26:38 LIVES IT MADE IT THROUGH THE SENATE GOVERNMENTAL ORGANIZATION COMMITTEE AND THEN THE SENATE JUDICIARY COMMITTEE AND 2:26:45 THE SENATE APPROPRIATIONS COMMITTEE IT'S NOW ON THE THIRD READING FILE OF THE SENATE FLOOR AND RULE 28.8 HAS BEEN 2:26:52 APPLIED SO IT WILL BE MOVING TO THE ASSEMBLY SHORTLY IF WE CAN MOVE TO THE NEXT 2:26:59 SLIDE OKAY SO AB508 BY ASSEMBLY MEMBER AGUIAR-CURRY PROVIDES THAT A RATIO OF 2:27:09 DIRECT CARE STAFF TO THE PATIENTS THAT THEY ARE SERVING WILL BE AVAILABLE TO CONSUMERS AT CRITICAL DECISION-MAKING 2:27:16 JUNCTURES NAMELY WHEN A RESIDENT IS ADMITTED TO A FACILITY OR WHENEVER THERE IS A RATE INCREASE THIS FIGURE WILL BE 2:27:23

PROVIDED TO THEM SO THAT THEY CAN MAKE THE BEST DECISIONS FOR OUALITY OF 2:27:29 CARE THE INTENT OF THIS BILL IS TO IMPROVE QUALITY OF CARE WHICH 2:27:35 RESEARCH HAS PROVIDED IS CLOSELY LINKED TO THE AVAILABILITY OF DIRECT CARE STAFF 2:27:42 A RESIDENT'S INDIVIDUAL OUTCOMES INCLUDING THE PRESENCE OF WEIGHT LOSS BED SORES AND GENERAL FUNCTIONAL ABILITY 2:27:49 ARE REGULARLY LINKED TO STAFFING ADDITIONALLY THERE'S A CONNECTION BETWEEN HIGHER TURNOVER RATES AND LOWER 2:27:56QUALITY OF CARE THIS BILL IS IN THE ASSEMBLY APPROPRIATIONS COMMITTEE AND 2:28:01 BELIEVE IT IS AWAITING A HEARING IF WE CAN MOVE TO THE NEXT 2:28:07 SLIDE SB530 BY SENATOR RICHARDSON CONCERNING MEDICAL TIME AND DISTANCE 2:28:14 STANDARDS THIS BILL BUILDS OFF OF AB 205 BY ASSEMBLY MEMBER WOOD FROM 2:28:21 2017 WHICH PLACED TIME AND DISTANCE STANDARDS INTO THE STATE STATUTE AFTER CMS PROMULGATED THESE REGULATIONS IN 2:28:29 2016 AND AB1642 BY ASSEMBLY MEMBER WOOD FROM 2019 2:28:35 WHICH REQUIRED MANAGED CARE PLANS TO PROVIDE A SET OF INFORMATION WHEN REQUESTING ALTERNATIVE ACCESS STANDARDS 2:28:41 TO PROVIDE TRANSPORTATION ENROLLEES REQUIRED TO TRAVEL FAR DISTANCES IS EXISTING LAW INCLUDES NEUROLOGISTS IN 2:28:48 THE LIST OF SPECIALISTS IN GENERAL INDIVIDUALS CAN'T WAIT AN EXCEEDINGLY LONG TIME FOR AN 2:28:55 APPOINTMENT TO SEE A NEUROLOGIST UPON REFERRAL WHICH IS WHY WE ARE SUPPORTING THIS MEASURE IT HAS BEEN PLACED ON THE 2:29:02 SUSPENSE FILE IN SENATE APPROPRIATIONS WE CAN MOVE TO THE NEXT 2:29:07 SLIDE AB 315 BY ASSEMBLY MEMBER BONTA FOR MEDICAL HOME AND COMMUNITY BASED

2:29:15

ALTERNATIVES SO THE HCBA WAIVER PROVIDES PEOPLE WITH DISABILITIES WHO QUALIFY FOR 2:29:21 AN INSTITUTIONAL LEVEL OF CARE TO INSTEAD RECEIVE THESE SERVICES IN THE COMMUNITY SPECIFICALLY THE HCBA WAIVER 2:29:28 SERVES MEDICAL MEMBERS WHO ABSENT THE WAIVER WOULD REQUIRE CARE IN AN 2:29:35 ACUTE CARE HOSPITAL A SUBACUTE FACILITY NURSING FACILITY INCLUDING SKILLED 2:29:41 NURSING FACILITIES OR AN INTERMEDIATE CARE FACILITY AS OF DECEMBER 2024 THE HCBA 2:29:49 WAIVER SERVED ABOUT 9,300 PEOPLE STATEWIDE AND OVER 5,100 2:29:56 PEOPLE WERE ON THE WAITING LIST A FEBRUARY 2025 REPORT COMMISSIONED BY 2:30:01 DHCS NOTED THAT THERE WERE GAPS IN ACCESS TO THE HCBA WAIT PROGRAM BECAUSE OF 2:30:09 THE LIMITED NUMBER OF SLOTS AND LONG WAITING TIMES THIS BILL HAS BEEN PLACED 2:30:14 ON THE SUSPENSE FILE AND ASSEMBLY APPROPRIATIONS IF WE'VE MOVED TO THE NEXT 2:30:21 SLIDE SB250 BY OCHOA-BOGH IS A SIMPLE 2:30:27 BILL THAT WILL HELP MEDICAL ENROLLEES SEARCH FOR SKILLED NURSING FACILITIES THAT ARE COVERED BY THEIR 2:30:34 PLAN UNDER SOME CIRCUMSTANCES A SKILLED NURSING FACILITY CAN BE THE BEST OPTION FOR PEOPLE LIVING WITH ALZHEIMER'S IT 2:30:42 CAN BE DIFFICULT TO NAVIGATE THE AVAILABLE OPTIONS WHEN DESIGNING A CARE PLAN THAT IS RIGHT FOR INDIVIDUALS 2:30:47 LIVING WITH DEMENTIA THIS BILL WAS PLACED ON THE CONSENT CALENDAR IN SENATE 2:30:53 IN SENATE HEALTH IT HAS BEEN PLACED ON THE SUSPENSE FILE IN SENATE 2:30:59

APPROPRIATIONS THEREAFTER IF WE CAN MOVE TO THE NEXT SLIDE WHICH IS MY LAST 2:31:05 ONE THIS IS ANOTHER SIMPLE BILL THAT WAS ON THE CONSENT CALENDAR BUT IT IS AN 2:31:10ASSEMBLY BILL 403 BY ASSEMBLY MEMBER ORTEGA IT REQUIRES DATA COLLECTION 2:31:17 FOR THE COMMUNITY HEALTH WORKER BENEFIT OFFERED TO MEDICAL ENROLLEES COMMUNITY 2:31:22 HEALTH WORKERS OR CHWS SERVE AS A LIAISON BETWEEN HEALTH 2:31:27 SOCIAL SERVICES AND THE COMMUNITY CHWS OFTEN SERVE AS CULTURAL AND LANGUAGE 2:31:33 INTERPRETERS WHICH HELPS INDIVIDUALS NAVIGATE THE HEALTH CARE SYSTEM COMMUNICATE WITH PROVIDERS AND ADVOCATE 2:31:38 FOR THEIR SPECIALIZED CARE NEEDS CHWS HAVE AN INTIMATE UNDERSTANDING OF THE 2:31:44 COMMUNITIES THAT THEY SERVE AND ARE TRUSTED CARE TEAM MEMBERS CHWS CAN ASSIST INDIVIDUALS WITH ALZHEIMER'S AND 2:31:51 OTHER FORMS OF DEMENTIA BY PROVIDING A KEEN UNDERSTANDING OF THE CULTURAL VALUES TO PLAN DAILY ACTIVITIES 2:31:58 ASSIST WITH COMMUNICATION AND PROVIDE GUIDANCE FOR END OF LIFE WISHES AS WELL AS I MENTIONED IT WAS ON THE CONSENT 2:32:05 CALENDAR AND ASSEMBLY HEALTH COMMITTEE AND IT HAS BEEN PLACED ON THE SUSPENSE FILE IN ASSEMBLY 2:32:11 APPROPRIATIONS AND THAT DOES CONCLUDE MY PRESENTATION 2:32:20 THANK YOU BOTH FOR THE LEGISLATIVE UPDATE NOW IT'S TIME FOR US TO MAKE 2:32:26 ANY COMMENTS OR ASK ANY QUESTIONS FOR THEM I THINK I SAW DR MOBLEY YEAH DR 2:32:32 MOBLEY YEAH THANK YOU SO MUCH IT'S FOR BARBRA BARBRA I SEE A LOT OF PEOPLE 2:32:41

NOW BECOMING OUITE AWARE OF THE VERY REAL LIKELIHOOD THAT THEIR FINANCIAL 2:32:48 SECURITIES UNDER THREAT THE 2:32:54 THE CABINET MEETING YESTERDAY SUGGESTING THAT WE'LL HAVE TO GO FROM 30 DOLLS TO TWO 2:33:01 DOLLS WAS A GROSS EXAMPLE OF THE CRUELTY THAT'S ATTENDING THESE 2:33:10 REALLY INCREDIBLY AGGRESSIVE POTENTIALLY INJURIOUS ACTIVITIES 2:33:18 WHILE I SEE PEOPLE CONCERNED ABOUT THEIR BOTTOM LINE I DON'T KNOW THAT PEOPLE REALLY 2:33:24 UNDERSTAND THAT BASICALLY DEGRADING THE ACTIVITIES 2:33:30 IN THE FDA THE NIH ARE GOING TO COMPROMISE THEIR CHANCE 2:33:36 TO HAVE A THERAPY THAT WORKS FOR THEM OR THEIR LOVED ONE WITH DEMENTIA I'M 2:33:43 AFRAID THERE'S SO MUCH CHAOS THAT SOME OF THE THINGS THAT REALLY REALLY MATTER AND THIS REALLY REALLY MATTERS ARE BEING 2:33:50 LOST IN THE DUST IN THE CLOUD AND I'M WONDERING HOW CAN THIS COMMITTEE OR THE 2:33:58 STATE HOW CAN WE MAKE IT MORE EVIDENT TO THE AVERAGE AMERICAN THAT THEIR DEMENTIA CARE IS IN 2:34:06 DEEP TROUBLE BECAUSE OF THE CHANGES THAT WE'RE SEEING BEING MADE BY THE 2:34:12 ADMINISTRATION YEAH I MEAN IT'S A GREAT QUESTION I THINK WHEN IT COMES TO PEOPLE WHO SIT IN OFFICIAL 2:34:20 PLACES STATE GOVERNMENT COUNTY GOVERNMENT IT'S HARD FOR THEM IN A 2:34:26 LOT OF CASES THEIR HANDS ARE TIED THERE ARE CERTAIN THINGS THEY CAN'T SAY AND CERTAIN WAYS THEY CAN'T USE THEMSELVES 2:34:32 SO WHAT I THINK THAT DOES TO THOSE OF US LIKE ALZHEIMER'S LOS ANGELES AND 2:34:39

OTHER HEALTH COALITIONS THAT HAVE FORMED TO TRY TO PUSH BACK ON SOME OF THIS 2:34:46 IS WE NEED TO PUSH MORE MESSAGING OUT 2:34:52 THERE AND THEN PEOPLE FOR EXAMPLE WHO GET OUR EMAILS THEN NEED TO SHARE THAT 2:34:58 MORE YOU KNOW IF YOU ARE ON SOCIAL MEDIA YOU KNOW POST IT TO YOU KNOW THE 2:35:04 PLATFORMS THAT YOU'RE ON TALK ABOUT IT WITH YOUR NEIGHBORS BECAUSE I THINK 2:35:10 THAT YOU'RE RIGHT IT IS SUCH AN AVALANCHE OF INFORMATION AND IT'S 2:35:16 DEPENDING ON WHATEVER THE STORY IS THAT MAYBE THAT PARTICULAR MEDIA OUTLET HAS 2:35:22 CHOSEN TO FOCUS ON THERE'S A WHOLE BUNCH THAT'S BEING LEFT UNTOUCHED AND SO I I DON'T KNOW IF THERE'S 2:35:29 ANYTHING THIS COMMITTEE AS A COMMITTEE CAN DO MAYBE THIS IS A QUESTION OF 2:35:34 SOME OF THE STAFF THAT SUPPORT THIS COMMITTEE LIKE WHAT ARE THE LIMITATIONS OF THE ADVOCACY MESSAGING WE CAN PUT OUT 2:35:41 THERE SO THEN IT FALLS TO EACH OF US AND OUR OWN INDIVIDUAL ROLES TO MAKE 2:35:48 SURE THAT WE'RE EDUCATED WHICH IS WHY I WANTED TO SHARE THAT INFORMATION TODAY BECAUSE I WANT YOU GUYS ALL TO HAVE IT AND THEN TALK ABOUT IT WITH YOUR 2:35:55 CIRCLES YEAH I'M JUST I THINK WHEN I THINK 2:36:01 WE REALLY OUGHT TO I MEAN THIS IS NOT A THIS IS NOT A POLITICAL MESSAGE 2:36:08 THE MESSAGE WE'RE DELIVERING IS MEMBERS OF A COMMITTEE THAT WE'RE REALLY WORRIED 2:36:14 THAT WHAT'S GOING ON AT THE LEVEL OF FEDERAL FUNDING COULD COMPROMISE SIGNIFICANTLY

2:36:20

THE WELL-BEING OF CAREGIVERS AND THOSE THEY CARE FOR SO I MEAN I THINK WE SHOULD CARRY 2:36:26 THIS FORWARD IT'S A VERY POWERFUL STATEMENT AND IT REALLY IT 2:36:33 MAKES SENSE FOR US TO SPEAK TO THIS IN CALIFORNIA AND THEN BARBRA I'M JUST 2:36:39 THINKING NATIONALLY NOTHING TELLS A STORY BETTER THAN THE STORY 2:36:44 AND I'M JUST THINKING MAYBE THE ALZHEIMER'S ASSOCIATION COULD BE VERY OUT THERE AND AGGRESSIVE IN TELLING 2:36:51STORIES OF REAL PEOPLE WHO GOT CARE PEOPLE WHO DIDN'T GET CARE AND MAYBE 2:36:57 PEOPLE WHO WILL NEVER GET CARE BECAUSE OF THESE INTRUSIONS ON WHAT WAS A VERY VERY GOOD PROCESS BEFORE THIS SO 2:37:06 AGAIN I DON'T HAVE A SOLUTION TO WYNN OR BARBRA BUT I THINK WE CAN'T BE SILENT 2:37:12 THIS CANNOT BE A TIME FOR US TO PRETEND IT'S BUSINESS AS USUAL BECAUSE IT'S EVERYTHING BUT THAT YEAH I AGREE WITH 2:37:19 YOU COMPLETELY AND STORY BANKING IS HAPPENING MY ORGANIZATION IS DOING IT WE 2:37:24 ARE SHARING IT WITH NATIONAL PARTNERS BECAUSE I COULD NOT AGREE WITH YOU MORE FACTS ARE FUN I LIKE THEM BUT ELECTED 2.37.32OFFICIALS AND THE GENERAL PUBLIC ARE MOVED EMOTIONALLY BY A STORY AND SO IT 2:37:38 IS A REALLY POWERFUL ADVOCACY TOOL 2:37:47 THANK YOU DR MOBLEY AND BARBRA YEAH WE DEFINITELY NEED TO MAKE SURE THAT OUR 2:37:54 VOICES ARE HEARD FOR THE PEOPLE WHO CAN'T SPEAK FOR THEMSELVES I THINK NOT 2:37:59

ONLY SHOULD WE BE SHARING OUR STORIES BUT ALL THESE PROGRAMS THAT HAVE BEEN 2:38:04 DEVELOPED AND HAVE BEEN FOUND TO BE HELPFUL WE SHOULD SHARE THAT THAT THERE 2:38:09 HAS BEEN SOME RESULTS WITH ALL THESE THINGS THAT WE'VE TRIED TO DO AND THAT WE SHOULD CONTINUE TO DO OR EVEN EXPAND 2:38:17 ANYONE ELSE 2:38:28 ANYONE IN THE ROOM I CAN'T REALLY SEE THE FOLKS IN THE CONFERENCE ROOM THERE 2:38:36 NO OKAY 2:38:42 ALL RIGHT SHOULD WE I THINK WE'RE GOING TO OPEN IT 2:38:49 UP FOR PUBLIC COMMENTS IS THAT RIGHT LET ME LOOK AT MY 2:38:57 YES YOU ARE OKAY 2:39:07 HI GOOD AFTERNOON EVERYONE THIS IS OUR SECOND PUBLIC 2:39:13 COMMENT PERIOD OF THE AGENDA AND WE'VE HEARD OUITE OUITE A LOT 2:39:20 TODAY IF YOU'D LIKE TO MAKE A COMMENT AND YOU ARE IN THE ROOM RAISE. 2:39:26 YOUR HAND AND ONE OF THE STAFF WILL CALL ON YOU ONLINE OUR ATTENDEES. **ONLINE YOU** 2:39:35 HAVE A RAISED HAND ICON VIA THE ZOOM WEBINAR FUNCTIONS PLEASE FEEL FREE TO 2:39:41 CLICK ON THAT AND IF YOU ARE CALLING IN IT WOULD BE STAR 9 THAT WOULD ALSO 2:39:47 RAISE YOUR HAND SO HAPPY TO TAKE YOUR COMMENT NOW DO KNOW THAT YOU CAN ALSO 2:39:55 SUBMIT A WRITTEN COMMENT IN THE Q&A AND WE'VE HAD A COUPLE OF THOSE TODAY 2:40:01 ALSO AT ANY TIME YOU CAN EMAIL OUR ENGAGE EMAIL BOX WHICH WE DO MONITOR

2:40:08

ALL DAYS OF THE WEEK I'M SORRY FIVE DAYS A WEEK DURING BUSINESS HOURS ENGAGE 2:40:15 E N G A G E AT AGING DOT C A DOT GOV 2.40.34WELL AGAIN ANYTIME YOU WOULD LIKE TO EMAIL US FEEL FREE TO DO SO ENGAGE 2:40:42 E N G A G E AT AGING A G I N G DOT C A DOT GOV 2:40:58 AND DR CANIO CARLOS 2:41:04 I THINK WE DO NOT SEEM TO HAVE ANY PUBLIC COMMENTS AT THIS TIME $2 \cdot 41 \cdot 11$ OKAY I THINK IT'S TIME FOR US TO MAKE OUR FINAL RECOMMENDATIONS FOR THE 2:41:17 SECRETARY AS WE THINK THROUGH FINAL RECOMMENDATIONS WE ENCOURAGE US TO STAY 2:41:24 GROUNDED IN THESE OUTCOMES AND HOW THEY CAN CONNECT TO THE BROADER PRIORITIES WHAT STOOD OUT TO YOU AS THE 2:41:32 MOST IMPACTFUL IDEA TODAY 2:41:42 OR DO WE NEED FURTHER INPUT I THINK IT MIGHT BE DR MOBLEY'S COMMENT ABOUT 2:41:48 YOU KNOW UNDERSCORING THE POTENTIAL DAMAGE THAT 2:41:56 THE ACTIONS TAKEN AT THE FEDERAL LEVEL WOULD HAVE SO BROADLY HERE IN CALIFORNIA 2:42:06 DEFINITELY THANK YOU YOU SHOULD JUST GO LISTEN TO THE RECORDING I FELT LIKE YOU SAID IT JUST PERFECTLY DR MOBLEY HE DID 2:42:13 TRANSCRIBE THAT I I DIDN'T EVEN WANT TO REPEAT IT TO BUTCHER IT I KNOW 2:42:20 RANJANA PLEASE GO BACK TO THAT AND YEAH HE SAID IT 2:42:26 PERFECTLY I THINK THIS MORNING TOO YOU KNOW THERE WERE SOME GREAT COMMENTS 2:42:33 ABOUT HOW CAN WE SHARE ALL OF THESE GREAT RESOURCES WE HAVE RIGHT HOW CAN WE

2:42:40 ALSO UPDATE THESE RESOURCES THAT ARE BEING IMPLEMENTED I KNOW THERE WERE SOME IDEAS OR THAT I GUESS WE HEARD THAT THEY 2:42:47 ARE AUDITING THEM QUARTERLY AND ALSO MAKING SURE THAT PERHAPS LEVERAGING 2:42:52 AI TO ENSURE UPDATES FOR THESE THINGS AND THEN DR QAZI TALKED ABOUT 2:43:01 YOU KNOW TRYING TO FIGURE OUT HOW TO MEET DEMAND FOR THESE RESOURCES. THAT ARE 2:43:07 AVAILABLE AS WE YES WE DO HAVE THEIR RESOURCES BUT 2.43.12ONCE WE KNOW PEOPLE KNOW ABOUT THESE WE MIGHT NEED MORE AND HOW ARE WE GOING TO THEN ADDRESS THAT 2:43:22 YEAH JUST MAKING SURE THAT THE INFORMATION IS ACCESSIBLE TO ALL GO AHEAD BARBRA COULD WE MAYBE WHEN 2:43:29 WE'RE TALKING ABOUT THE CONVERSATION WE HAD THIS MORNING ABOUT NO WRONG DOOR COULD WE PUT IN A SENTENCE THERE MAYBE THAT'S SOMETHING LIKE 2:43:37 DESPITE YOU KNOW CHALLENGES THAT FUNDING DECISIONS LIKE WE DON'T WANT TO SEE THAT 2:43:43 WORK SLOWED DOWN OR DERAILED BY SOME OF OTHER DECISIONS THAT 2:43:49ARE MADE FUNDING WISE YOU KNOW AT THE FEDERAL OR THE STATE LEVEL THAT WE REALLY IT'S SO IMPORTANT THAT THIS NO 2.43.55WRONG DOOR INITIATIVE MOVE FORWARD ROBUSTLY 2:44:00CAN'T AGREE MORE YES RANJANA IS WRITING NOTES SO SHE GOT 2:44:08 THAT ANYONE 2:44:13 ELSE AND JUST KNOW THAT THERE ARE STILL A LOT OF INFORMATION THAT WE RECEIVED 2:44:19 TODAY IT'S GOOD TO STILL SHARE THOSE RESOURCES THAT ARE AVAILABLE THAT WHAT WE HAVE I KNOW DR GRAVANO IS LEADING 2:44:27

SOME OF THAT WORK WITH THE CAREGIVER TRAINING ONCE THOSE ARE AVAILABLE L 2:44:34 THINK ALL OF US SHOULD BE AWARE OF THOSE AND MAKE SURE THAT WE ARE SHARING THEM 2:44:39**TO EVERYONE CARLOS** 2:44:46 I THINK WE NEED TO ASK WHERE DO WE NEED THE FURTHER INPUT OR ENGAGEMENT 2:44:52 BEFORE FINALIZING RECOMMENDATIONS 2:45:01 ANYBODY HAS ANY INPUT I REALLY LIKE WHAT DR MOBLEY SAID 2:45:06BECAUSE IT'S CURRENT AND 2:45:14 IT'S IMPORTANT TO RECOGNIZE THAT 2:45:21 DO YOU THINK WE COULD DO YOU CARLOS OR WYNN DO YOU THINK THAT WE COULD ASK FOR 2:45:26 AN OPPORTUNITY TO SPEAK TO THE SENATE AND THE ASSEMBLY I 2:45:33 MEAN WHY CAN'T WE JUST WHY CAN'T BARBRA JUST GO UP THERE AND MAKE OUR CASE 2:45:41 IF IT'S AT THE FEDERAL LEVEL THOUGH THAT'S I MEAN THAT'S WHERE I THINK OUR FIRST CHALLENGE IS 2:45:49 YEAH I MEAN I THINK SO CAN ADD TO THAT YOU KNOW WHAT WE HEARD THE FORMER 2:45:54 THIS IS JUST ONE PERSPECTIVE BUT ALISON BARKOFF WHO LED THE ADMINISTRATION 2:46:00 FOR COMMUNITY LIVING FOR MANY YEARS RECENTLY SPOKE AT THE AMERICAN SOCIETY 2:46:05 ON AGING CONFERENCE AND SHE HAS ENCOURAGED US TO WORK IN UNISON AS 2:46:12 A COALITION AND IT'S ABSOLUTELY DR MOBLEY MEETINGS WITH US SENATORS AND US 2:46:20

MEMBERS OF CONGRESS AND WE'RE URGING PEOPLE TO GO IN COALITION SO INSTEAD 2:46:27 OF A SMALL SUBSET OF PEOPLE TALKING ABOUT ALZHEIMER'S AND A SMALL GROUP TALKING ABOUT NUTRITION IT YOU KNOW TO 2:46:35 WORK WITH ALL OF YOUR PARTNERS AT THE LOCAL AND COMMUNITY LEVEL TO REALLY SHOW 2:46:41 THIS ECOSYSTEM THAT IS BUILT UP AROUND PEOPLE AND THE INTERDEPENDENCIES 2:46:48 AMONG MANY FEDERAL DEPARTMENTS AND AGENCIES 2:46:58 I ALSO LIKE TO ADD THAT AS A VOLUNTEER ADVOCATE 2:47:05 WITH WORKING WITH THE ALZHEIMER'S IMPACT MOVEMENT WE GET YOU KNOW REGULAR 2:47:11 UPDATES ON HOW TO APPROACH OUR MEMBERS OF CONGRESS AND YOU KNOW WE GET PROMPTED 2:47:19 OFTEN TO YOU KNOW SEND THEM A MESSAGE YOU KNOW YOU KNOW ASKING THEM TO 2:47:26 LOOK AT DIFFERENT BILLS OR FUNDING REQUESTS BUT I THINK IT'S ALSO 2:47:33 IMPORTANT THAT WE MAYBE TAKE INITIATIVE ON OUR OWN TO REACH OUT TO THEM ON 2:47:40DIFFERENT OCCASIONS TO SAY "HEY WE DON'T LIKE WHAT'S GOING ON AT THE FEDERAL LEVEL AND WE NEED TO HAVE CERTAIN THINGS 2.47.47HIGHLIGHTED I THINK IT'S IMPORTANT AS A COMMUNITY 2:47:52 AS CITIZENS WE VOICE OURSELVES AND IT'S IMPORTANT THAT A LOT 2:47:58 OF THE THINGS THAT ARE HAPPENING NOW IS GOING TO IMPACT US AT THE STATE LEVEL 2:48:13 SO IF ANYBODY DOESN'T HAVE ANYTHING ELSE I WOULD LIKE TO THANK YOU FOR YOUR THOUGHTFUL INPUT AND COMMITMENT TO THIS 2:48:20 WORK YOUR VOICES ARE CRITICAL IN SHAPING STRATEGIES THAT 2:48:26

ARE BOTH MEANINGFUL AND ACTIONABLE WE'LL SEND THESE RECOMMENDATIONS AND 2:48:32 ITEMS TO THE CALIFORNIA HEALTH SECRETARY AND YOU KNOW KEEP ON PUSHING FORWARD 2:48:44 THANK YOU THANK YOU THANK YOU CARLOS AND WYNN THANK YOU 2:48:50 FOR LEADING US ALL RIGHT JUST A FEW MORE THINGS BEFORE 2:48:56 WE FINISH JUST A REMINDER IS OUR MEETING OUR NEXT MEETING IS AUGUST 7TH AND I THINK NOVEMBER 6TH IS WHERE WE ARE 2:49:03 HIGHLY RECOMMENDING EVERYONE TO MAYBE GATHER IN SACRAMENTO BUT WE OBVIOUSLY 2:49:09 WILL HAVE THE HYBRID OR THE ZOOM VERSION FOR THOSE FOLKS WHO CHOOSE TO 2:49:14 DO SO THEN GO AHEAD TO THE NEXT 2:49:20 SLIDE I THINK THAT IS IT RIGHT YEAH SO JUST THANK YOU EVERYONE FOR YOUR 2:49:27 THOUGHTFUL PARTICIPATION AND INSIGHTS TODAY IT'S BEEN INCREDIBLY VALUABLE TO ENGAGE IN SUCH A COLLABORATIVE SPACE 2:49:36 WHERE SYSTEMS OF CARE ARE NOT JUST ACKNOWLEDGED BUT ACTIVELY EXPLORED 2:49:41 AND AS WE REFLECT ON TODAY'S DISCUSSION I WANT TO SPECIALLY LIFT THE IMPORTANCE OF CONTINUING TO CENTER THE LIVED 2:49:48 EXPERIENCE OF INDIVIDUALS LIVING WITH ALZHEIMER'S AND RELATED CONDITIONS ALONG WITH THEIR CAREGIVERS AND MAKING SURE 2:49:54 THAT WE ARE PROVIDING THAT VOICE FOR THEM SO CARLOS ANY CLOSING REMARKS 2:50:02 JUST LOOKING AHEAD I'M EXCITED ABOUT THE OPPORTUNITIES WE'VE IDENTIFIED 2:50:07 TODAY TO STRENGTHEN PARTNERSHIPS ACROSS A 2:50:13 ACROSS AGING AND BEYOND WHETHER WE'RE TALKING ABOUT SERVICE COORDINATION 2:50:19

WORKFORCE DEVELOPMENT OR POLICY REFORM IT'S CLEAR

2:50:24

THAT OUR COLLECTIVE WORK IS NOT ONLY NECESSARY BUT ALSO URGENT

2:50:34

ALL RIGHT EVERYBODY THANK YOU FOR PARTICIPATING TODAY AND ADDING INPUT AND

2:50:40

FEEDBACK WE REALLY APPRECIATE IT THANK YOU EVERYONE SEE YOU IN AUGUST 2:50:47

THANK YOU THANK YOU GUYS THANK YOU BYE THANK YOU GOOD DAY