

CALIFORNIA DEPARTMENT OF AGING

DISABILITY & AGING COMMUNITY LIVING ADVISORY COMMITTEE (DACLAC)

MEETING TRANSCRIPT

AUG 10, 2022

14:01:35 Welcome. A couple of reminders before we get started. We are continuing to meet virtually you can join this discussion by smartphone.

14:01:42 Tablet computer or You could always use your telephone to dial in live captioning is available to enable captions.

14:01:51 Please select the Cc. Icon on your zoom Toolbot, and we also have American sign language interpretation.

14:01:59 So we've got jasmine on your screen right Now you should be able to see her and we've got Anna, who kind of alternate throughout the webinar the recording slides and transcripts will be

14:02:10 posted to the California Health and human Services Community living Web page after the webinar, and you can also go there to find an archive of past meeting recordings, material transcripts.

14:02:26 We are saving time for public comment, so please feel free.

14:02:30 You can use the Q. A. Icon at any time to submit your comments, and certainly will be opening lines at the designated times to if you're joining us by phone.

14:02:41 You can press Star 9 to join the queue and we'll unmute your line to hear from you directly, and if you are joining us via Webinar in zoom you can use that raise hand feature to join

14:02:51 the queue right, and with that I am going to pass it off to

14:02:59 Director Susan Demos. Thank you, Maria, and good afternoon.

14:03:05 Everybody. Here we are, the middle of August, and 66 people are joining us.

14:03:10 So thanks everybody for making time today for the disability aging and Community Living Advisory Committee.

14:03:16 I want to give a very special thanks to my 2 co-chairs, one Eric Harris, is not with us today because he is on vacation, and i'm so happy about that.

14:03:27 But Patty Poin Hoover is here to lead us today and welcome Patty to all the members of Daclac.

14:03:33 Thank you for joining today and participating especially our newest member, Debbie Tope, who I just saw in the chat, is here and to all of our department and agency colleagues who are joining us today either

14:03:49 listening in to learn or presenting. We have several presenters as well.

14:03:55 And to our public members. Thank you for joining in and please do add your comments, and the 2 times that we've set aside for public comment, and without further ado we have a very packed agenda today, and i'm

14:04:09 so grateful for that, because everyone's been working hard since the last meeting to move the work forward, especially Sarah Steinhausen and Amanda Lawrence, who helped us build this agenda.

14:04:21 So. thank you, Sarah and Amanda. and now I want to turn it over to under Secretary Marco Meach, from the California Health and Human Services Agency.

14:04:30 Marcos, representing Secretary Galley today, and Marco were so grateful that you could be with us.

14:04:36 Welcome to you, I, Susan. I hope everyone can hear me.

14:04:42 Okay. So first to the Cda team, Thank you for all your work and the special thanks to Patty and Eric for you, their commitment and dedication to this work in really helping us bring in all of you to help

14:04:57 us think about how we much more meaningfully continue to engage with those with loved experience and others to make our programs and services much better.

14:05:07 So I'm really excited to be back home 7 years ago.

14:05:11 I joined this agency in the first assignment I had was to work with the officeed advisory committee at the time, and i'm really excited about the journey that i've had with this group and how much

14:05:24 we've evolved together, and what we've been what we've done.

14:05:28 And so i'm just really happy to be back home. with all of you, and and have a chance to connect with all of you today. I I want to first start by saying, thank you.

14:05:40 I know that many of you have rolled up your sleeves and really helped us.

14:05:43 And really meaningful ways over the course of the last couple of years to help us think about how we deliver on the promise of some of our programs and services in a much more holistic way.

14:05:54 And for that. I just wanna say thank you, because we know you do this on a volunteer basis. but it has a profound impact in our ability to really be more person-centered.

14:06:06 And so I just want to say, thank you for your time and commitment to this work.

14:06:10 We know that this is an easy I also send the secretaries regrets.

14:06:16 As you know, we are in the final stretch of the legislative session, with a large chunk of bills in the Hhs space.

14:06:24 So he is very busy on that and Then we also obviously are continuing to respond to Covid 19, but have a very monkey pox outbreaks across the State that he's working actively.

14:06:40 So he certainly sends his report, and wanted me to express our deep thanks to each of you again for being part of this conversation.

14:06:50 What what I wanna do is spend a little bit of time.

14:06:56 Maybe walking you through in my mind. how we puzzle together our various lanes of effort in service of those we look to serve to give you just a little bit of a sense of how these things come together.

14:07:10 Because I think to many of you, these might be disparate efforts, but to me and I think to the secretary, they are pieces of a broader puzzle that build on top of each other with the idea that we much more

14:07:25 holistically serve the individuals that are coming in front of us across the various departments and offices within our organization.

14:07:35 And as you have seen we've also engaged a number of our sister agencies in this conversation, whether it's business consumer services and housing or labor or transportation really this isn't just an hhs issue this

14:07:49 is a whole of government issue and so we're really looking to work together to break down the bureaucratic barriers, to be able to much more holistically deliver on the promise of our programs But before

14:08:02 I start I do wanna take a moment and acknowledge the fact that, just in the last couple of weeks and months, we not only celebrated the anniversary of the historic homestead, decision which was the

14:08:16 impetus for this group to convene. but we also celebrated at the anniversary of a historic Civil Rights law that was passed.

14:08:27 The Americans with Disabilities Act, which I think also as an American pillar of of the work that you all do.

14:08:34 And I think, as I reflect back on the last 2 years, I think that although we've made a lot of progress, I think that much of this work is a constant work in progress, and so I think we will never get to a state of being

14:08:50 fully at a place where we've achieved the promise of the Olmsted decision, or the Ada.

14:08:57 And that this is gonna require us working together constantly to iterate on kind of the the the commitments we made as a society to individuals who are older and those who are disabled.

14:09:09 And so I think that you know the secretary is called on all of us to recommit ourselves to the promise of those 2 pillars, and I think we wanted to have you all do that as well.

14:09:20 As you think about your work, and engagement with us so I think it's important to acknowledge those pieces.

14:09:26 But let me step back for a minute, and just outline for you all, and spend a little bit of time outlining for you.

14:09:33 Kind of how I think about our work in a much more holistic way, and I am spending a lot of my time with my colleagues, both at the agency and with our directors.

14:09:45 Really thinking about how we break down the silos and integrate our work in a much more holistic way with the idea that we serve the whole person in the community.

14:09:56 And so to me. I think that there are a number of things that we've done over the course of the last couple of years that really build on this, and our budget alone has grown significantly to be able to really deliver on

14:10:10 this vision, and i'm not gonna go through each one of the budget items.

14:10:15 If you have insomnia and want to go through the budget documents, you should do that. But I think that there are certain pillars or or ideas in all of those that tied together really nicely.

14:10:26 So for me. I think the the the foundational components are kind of 3 different buckets.

14:10:33 One is our work around workforce, and I think this is probably more cute to all of you than anybody else, in the sense that we are seeing an older population.

14:10:46 We are seeing individuals that certainly should and must really reside in the community.

14:10:53 And in order to do that, we need to have the right people around them to be able to deliver on that wish.

14:10:59 And so really thinking about what is the health and human services workforce in the future, Look like this has been exacerbated by the Covid 19 pandemic on the health side.

14:11:09 But we can't just think about this as just physicians and nurses.

14:11:13 We have to think about this as social workers. and I just work and and we have to think about it as promot daughters or community health workers in the community.

14:11:22 And so we've put forward a package with our colleagues at the labor agency of one person 5 billion dollars.

14:11:30 To really think holistically about how we not only beef up the existing types of workers in the community, but how do we think about the workforce moving forward and more innovative ways?

14:11:45 As well. So workforce to me, I think, with one colleague, the second pillar, or or foundational aspect, is really our workaround data and and data exchange.

14:11:55 And I think that traditionally we think about this from the perspective of health and your ability to go to a healthcare provider, and they may have an Ehr or an emr.

14:12:06 These are electronic medical records and their ability to really provide you holistic care Right?

14:12:12 There might be a lab result or a prescription and for the provider to be able to see all that in one place.

14:12:19 But we're looking to take that a step further and and and break down the barriers around, Not only the integration of that data on the health side.

14:12:27 But now beginning to think about this from a social service assigned as well, because what we know and what we've learned is that it's not just about giving access someone access to health insurance and having them get access to a doctor

14:12:40 It's also about the food that they have on the table, and the access to transportation and the roof over their head.

14:12:48 And so we must think about the integration of these data elements much more holistically, so that those on the ground were doing the work have a better understanding of who they're serving, and what gaps they might be interacting with and

14:13:01 so really looking at kind of some historic work that we've undertaken to be able to deliver on the promise of data exchange in in a much more holistic way.

14:13:12 And then the third foundational aspect for me is infrastructure, and we are spending a lot of time whether it's part of our workaround cal aim and the path funding to be able to really build up the

14:13:23 infrastructure at the community level to deliver on the idea of people living within the community. choosing where they want to reside.

14:13:35 And And so we've invested a billions of dollars in both the behavioral health infrastructure.

14:13:40 But we're also investing a lot of money in the community care infrastructure to really be able to lift up those facilities on the ground to to be places that folks can reside.

14:13:54 And so we're spending a lot of time and effort and kind of thinking about what that looks like, not just from the health side, but also from the social services.

14:14:03 Side. So data exchange, workforce and infrastructure, I see, is kind of the bed, right?

14:14:10 Those are the foundational pieces underneath. All of that is kind of the idea of equity and inclusion.

14:14:17 And so, no matter what we do, and no matter how we do it, we have to embed the lens of equity.

14:14:23 Inclusion in in that conversation. And so, we learn from our experience in Covid 19, that individuals with disabilities and individuals of different races were disproportionate impacted. when it comes to when it comes to the the

14:14:42 Covid 19 pandemic, and our work to get resources out to those communities was really anchored in this idea of leaning in on the data and being able to leverage the data to lift those individuals who

14:14:55 disproportionately impacted higher. And what I will say to you all here is that for us equity and equality are 2 very different things.

14:15:04 Equality means giving everyone the same amount and equity means giving some folks more in order for them to be lifted higher because they're disadvantaged.

14:15:13 Further, and so really thinking about in a much more holistic way, not as just an afterthought, but something that really is embedded in our work in a much more holistic way across our program.

14:15:27 And so those 4 elements build the foundation to create some pillars that we kind of think about.

14:15:35 And those pillars really are focused around access so making sure that people have access to health insurance and services in a variety of different ways.

14:15:43 It's about a affordability we're looking at a affordability from the perspective of making sure that middle income individuals have access to cover California.

14:15:53 For example, we're also looking at some of our work around insulin to make sure that, really we can have that not be a barrier, so that people aren't making the decision around putting food on the table or making a decision around picking

14:16:07 up the prescription of insulin, and then really thinking about some of our work around quality and quality here for us is not just with respect to you know the the health side, but really thinking about how do we lift up our providers in a much

14:16:27 more holistic way on the ground. How do we give them the resources and the technical assistance to be able to raise their ability to deliver our holistic services on the ground, and i'm really excited that you have the opportunity to

14:16:42 think of or talk about Calam later, because Cal am is one of those components, and certainly are Reprocare is another component on the Medicaid side.

14:16:52 But we're also doing a lot of work around quality in other areas, whether it's our skilled nursing facility, reform work, really looking at quality as a way for us to build up our our ability to deliver services in

14:17:06 the community. And all of this is kind of tied together with the idea that we integrate the health and human services.

14:17:13 Component seamlessly in the background as we think about all of these pillars with the idea that at the center of all of this work really is the person that we're trying to serve and for us it's about making

14:17:25 sure that we're serving all individuals people with visible and invisible disabilities that we're thinking about all racism, ethnicities, and different genders, or sexual orientation in a much more holistic

14:17:40 way. and so I wanted to spend a little bit of time to just frame this for you, because I think that as we look to you know, talk about Kellyin, for example, today is one piece of a bigger puzzle around how we

14:17:55 deliver on this vision, and Cal am is tied to our work on home and community business services.

14:18:04 It's tied to our work around the master plan for aging It's tied to our work at the department of rehabilitation to really integrate holistically people with disabilities into employment so all of

14:18:15 these pieces really come together in a much more holistic way, to be able to deliver on what the secretary and the governor call a healthy California for all

14:18:26 So I I just wanted to spend a little bit of time.

14:18:28 Just kind of framing that for all of you, and really look to maybe engage for a few minutes.

14:18:36 Susan and Patty. if that is okay with both of you.

14:18:39 In a conversation and and i'm happy to take any questions that you have what I will say as kind of a last point is that this is all a working progress, and one of the things that I'm.

14:18:52 That I will just emphasize with humility is that this isn't perfect, and it's not gonna it's not gonna meet everybody's needs.

14:19:00 But we want to learn, and we want to iterate on this work in a in in a meaningful way. And so we welcome your feedback.

14:19:07 We welcome your criticism. We want to have you help us think about how we do this in a much more thoughtful way.

14:19:16 And I also want to just say that we we we want you to roll up your sleeves and really engage with us.

14:19:22 Don't sit on the sidelines and just wait to be asked to engage, really engage with us in a thoughtful and proactive and respectful way, so that we can move the needle on these pillars in a much

14:19:32 more holistic way. So with that I will be quiet, and I will turn it over to Patti and Susan, and so glad Eric is getting some time off to just kind of get some feedback from folks and engage with all of

14:19:46 you terrific, Marco. Thank you so much for really taking us, you know, off of our little our little computers screens, and giving us the big picture of you know, the entire state of California, and how this all works together.

14:20:04 I will turn it over to Patty we can take about 10 min, Patty, for questions, and i'll let you feel those that's fine, Excellent! I'm.

14:20:12 Looking in the Q. A. box. But in the meantime I wanna thank Marco also for creating the the large view that we need to jump into this work, and you will hear from us.

14:20:26 You are hearing from us. I know you expect it want it and even when it's.

14:20:30 Sometimes challenging and I just wanna call out one thing that you said, because I I think it's really important in in looking at how we deliver on both the Ada.

14:20:45 And its promise as a as a historic Civil Rights Act, and on the Olmsted decision that flowed from it.

14:20:50 That said that individuals with disabilities have the right to live in the most integrated setting possible, and that is really the the fundamental charge of this group and all the stakeholder input that.

14:21:06 We get and And so when we look at that, I think we want to look at all the healthcare services, and then you pointed out.

14:21:12 And and this is, of course, something near and dear to my heart that you can't.

14:21:16 Do home and community-based services or other integrated programs without a home and understanding the importance of a roof over one's head.

14:21:27 So thinking about that as a piece of health care that not only is housing health. it's the what makes all other things possible, and I just wanna comment on that last piece just really quickly before we jump into questions.

14:21:41 You know there's 2 particular individuals and i'm not i'm not seeing the boxes. I don't know if they're here.

14:21:47 But Michelle Boss and Kim Johnson I think epitomize the work in the space, and and you know I consider myself Michelle's older son, because she has a Marco with the C and I'm.

14:22:00 Marco with the k and i'm her older kid and I think that they've talked Kim and Michelle have really taught me about this integration work.

14:22:09 You know, Michelle, when she was at the agency, really pushed this from a foster youth perspective, and the 2 of them have partnered up in in really profound ways, and I think it it just demonstrates I

14:22:21 think at the leadership level. how committed the 2 of them are to some of this work in a much more holistic way.

14:22:28 And so I think it's reflective both in kind of how we looked at Calen.

14:22:33 Because I think the thing you will probably hear i'm hoping that Michelle and Kim are on or joining you later.

14:22:39 But I think that that will kind of come through in the calendar conversation.

14:22:43 And then, when we think about some of the infrastructure investments, you know, behavior, the behavioral health infrastructure work, and the continuum of care work, I think they've really looked a partner in a profound way to be able to leverage

14:22:56 this resources across the way. And so I I am really excited about what the possibilities are with those 2.

14:23:06 She rows and the work that they do in terms of leading the department, because I think that we've got some tremendous leaders in the 2 of them, and I am more hopeful than ever before that the integration of health and human

14:23:18 services or social services is going to be here, because of those 2 so I'm really excited, and I hope you get to hear from them a little bit later about some of this work, because I think that their teams are doing some tremendous work in

14:23:29 this space great. And now, because we are so fortunate to have you here, we're not going to let you off the hot seat until the you get some questions.

14:23:38 We're gonna take mario Moto first hey? Marco I I think, January, this Gene. Oh, I I couldn't tell the order in which they came in. I'll get to you Jeannie after Peter

14:23:50 Mendoza did, should I go?

14:24:02 Oh, good to hear that. No, but I just wanna first of all, marty modo Cdc. can now be member.

14:24:07 I I want to thank you for the way that you gave the overview.

14:24:12 And I know you've given it before and I and I hope you know how important it is.

14:24:18 And you know, way back when Dr. Galley first came on board, and then you you've been around but the focus of the of looking at the whole person and crossing system lines.

14:24:30 To get everything he said about the 3 pillars are so critical to everything that we're trying to do.

14:24:35 So you know we can throw money and programs but if it's not done in the right way.

14:24:40 All we're doing is doing things that we did before that didn't quite work, and I would just urge you to consistently put up that message that you just gave to us today because for a lot of people that's new and

14:24:53 it's hard to grasp and all of us is advocates.

14:24:57 We've heard it, but we still operate in silos every every one of us, and we just gotta get out of that.

14:25:02 And you being the messenger, and you know I put the guiding principles of the Health and Human Services Agency in every report.

14:25:10 I do I I thought that was so transforming. And one thing I would ask the committee.

14:25:17 And, mark you, is the under Secretary Marco is the data exchange is so pivotal that I don't think a lot of people understand how pivotal it is. And the fact that you guys are focusing on that was.

14:25:26 Amazing. So I would suggest that that's an agenda item, you know, coming up to where we are with that and why is important.

14:25:34 Thank you, Mark. Thank you, Marty, and I think You know, in government we do a really poor job of communicating how we what we do.

14:25:43 And so I think part of our task is to your point to be able to communicate how these pieces really come together, and I think that we have a lot more work to do in the space. and I know the secretary is meeting with the directors to kind

14:25:57 of. think about this in a much in a different way. So if you have feedback or ideas and everything we do, Marty is anchored in the guiding principles and strategic priorities, and we will kind of geterate on those

14:26:11 over time, based on conditions changing on the ground and things that are happening.

14:26:16 But I think it's really important to kind of think about what that looks like.

14:26:19 And then on the data exchange I often tell people that was almost like

14:26:26 Reaching a piece of chord at the United Nations, because there were some many different players with different opinions and interests. and somehow we were able to land.

14:26:38 A really what I think is historic and and meaningful piece of legislation that is going to move the field in a profound way.

14:26:47 And the scale and size of that working California could be quite transformative if we do it right.

14:26:52 So, although we have a lot more work ahead of us I I would highly encourage this group to engage in a conversation on that, and I hope, Susan and Patty, and whenever it gets back that we can bring in John O'hanyan

14:27:03 and have kind of a work group session around where we go next with that work, because it's gonna require some feedback.

14:27:10 And input from all of you around what that means and how we deliver on it.

14:27:13 Thanks so much, and I think we will want to have you come back and talk more deeply about the data exchange and understand how that intersectional data will be available which is so important to look at.

14:27:28 To make sure we are centering equity. So we look forward to that. I'm gonna turn it to Peter Mendoza, who has a question for you.

14:27:38 Hi! Peter!

14:27:45 Apologies. I think that was some confusion. I actually asked for it.

14:27:52 I was asking a technical assistance question which was okay.

14:27:55 Happy birthday, Peter. Thank you, everyone. I really appreciate it.

14:28:02 Happy birthday, birthday, Peter. I hope you party hard today.

14:28:12 Well, i'll party up in a later but in the Meantime it's good to celebrate my birthday with all of you Community delivery is so important, and I am a testament to that so i've had to be here

14:28:24 at the age of 56, because I wasn't supposed to be here that one. So I beating the ads doing the work.

14:28:32 So it's a good day, love it it's great to see you, Peter, and thank you for all your continued work and help.

14:28:39 You've been a great friend and partner thank you and thank all of you and the public for being here today.

14:28:45 Thank you, Peter. Genie, Are you able to unmute your mic?

14:28:52 Sure. Thank you, Patty. this is jeannie Parker Martin, from me age, California.

14:28:56 It's great to see you Marco and thank you for your incredible inspirational words, and the holistic approach in the pillars that you described as I sat in listened and thought about all the people on this call including the

14:29:12 public were on the call I wondered if you have any thoughts on how the integration across departments of these important pillars are is or might or for going forward, and maybe that's what you're looking for feedback from

14:29:27 us, but I think it might be helpful for us to understand even at an early stage, where you might be.

14:29:33 I think that's a fantastic question and thank you for asking it. So I'm spending a lot of time kind of internally thinking about that. and I will outline a few different areas that I think are really important so first I

14:29:44 as Marty alluded to the guiding principles and strategic priorities are designed to really galvanize this across the agency.

14:29:53 It's not any one department on its own it's all of us together, and as an hhs family kind of rowing in the same direction. The second piece is, we've issued guidance to all our departments.

14:30:04 And offices as we embark on the next budget and legislative cycle.

14:30:08 To really be thinking about some of those strategic priorities and how we move them across.

14:30:16 Multiple silos of the organization. So we are very much interested in thinking about the next budget cycle, not only from from the perspective of how we build on the investments that we already have, but how do we continue to break down the

14:30:29 silos to think about investments that further some of this work.

14:30:32 So a really good example, as I alluded earlier, is some of the work that Dhcs and social services are working, doing around infrastructure that is designed really to break down some of those silos.

14:30:44 Third, we are beginning to create a set of tables internally that brings subject matter.

14:30:50 Experts from across the organization, deep within the organization on specific topic so We're having a table around whole child we're having a table on older and disabled individuals.

14:31:01 We're having a table around homeless individuals and there's a set of 6 tables that we're gonna be convening with the idea that really we bring people together to create a community of practice, so that we're thinking about

14:31:13 this, not just from a dhs perspective of an aging perspective, But we're thinking about this from a person perspective, and all of those individuals are coming with all their programs to the table to think about how we move the needle on the

14:31:27 integration component. So our hope really is that that is going to further some of our work.

14:31:32 And then, finally, we're really beginning to think about how we leverage our data to better understand the gaps from an equity perspective, but also from an integration perspective, so that we can begin to leverage that to help us move the needle on those

14:31:48 gaps in a much more holistic way. and so what we're doing now is saying, you know, where are the gaps and what data do we have during identify the gaps? and in other instances we may not be collecting? the data?

14:31:59 But maybe we should be to better. understand what is actually happening and there's a twofold process there there's one for us to better understand what's happening.

14:32:08 But it's also for us, to put it out so that you all can better understand how you're delivering services in a much more holistic way as well.

14:32:16 And so our hope really is. By making some of these data assets available to folks.

14:32:21 We have the ability for folks to see those gaps, and fill them over time in a much more strategic way.

14:32:28 So I think there's a question greater opportunity always to think about how we do further integration.

14:32:35 But those are some concrete examples that we're beginning to kind of implement across the organization.

14:32:42 To be able to really begin to see these things come together. much more so.

14:32:46 I hope that answers your question absolutely, and I think it compels all of us to look at the pillars, and also use them to help integrate the work.

14:32:55 We all do often collaboratively and sometimes as Marco, or, as was mentioned earlier in silos.

14:33:01 So it's really helpful Thank you and I think one thing that I will just add, You know the beauty of the process around the master plan is that we have the disability community on one and the aging community on the other and they

14:33:12 never work together in this for you. You all came so beautifully together in that process, and I think that it just kind of a pitomizes how we need to work together to really move the needle in a much more

14:33:25 intentional way, and so I would I would not think about this, as about disease, states, or classifications of people, but really like irrespective.

14:33:34 It's just about the human in front of us and really trying to figure out how we make up government work better for them at both the State and the local level.

14:33:42 So, Marco, there's a lot of interest i'm gonna ask people to be brief, because we are behind.

14:33:50 But this is a really rich conversation. i'm also gonna ask if you'd be willing to put your email in the chat people could follow up with you we're gonna take Nina and then Robert and kim and then

14:34:02 we're gonna have to stop so nina so good afternoon.

14:34:08 I actually we myself again. I actually set up a really quick question, something big vision question.

14:34:14 But I think a lot of that has been filled in, genie. Your question was fabulous.

14:34:18 Thank you. And this is really exciting work. My question was, and this could be an offline conversation earlier you mentioned when talking about workforce, emphasizing work for speaking about it in one innovative way.

14:34:32 Is it so? I I would like some definition of what that means or some elucidation.

14:34:38 It doesn't happen doesn't have to happen today but it's sometimes.

14:34:43 So I understand that we understand what you're talking about also really appreciate the comments just generally about the aging discipline community having come together over the last 5 years and also really speaking to California of all incomes all locations, and making

14:35:00 sure taking care of of all of us. So my my basic question on the on the workforce package.

14:35:07 So the 1.5 billion dollars has specific buckets and we're looking at those buckets.

14:35:14 But we're looking to also innovate in those buckets and Nina i'm happy to follow up and i'll work with Susan and Patty to also there's a document that we put together that outlines some

14:35:24 of those, so you can. you can take a look we are very in the early stages of thinking this through, and we've got multiple departments working on this.

14:35:35 So. You know Kim Johnson is engaged from a social worker perspective.

14:35:38 Susan is engaged from kind of the aging and disability perspective.

14:35:41 Michelle and her team are working on. You know the community health worker piece, I mean The Dhcs.

14:35:49 And Medicaid led the way on this by creating a benefit on community health workers, and we're just blowing this up in a much more strategic way.

14:35:57 And so h kind of the anchor in in the space.

14:35:59 But I I will just say this is the beginning of the conversation. so we would welcome your feedback around.

14:36:05 What we should be thinking about in those buckets and how we do it. And there's tables being set up by our departments to really engage stakeholders.

14:36:15 But I but it it would be important for us to get feedback from all of you as well, and Susan can follow up around kind of the workforce package, and how we think about workforce moving forward great and if you Marco

14:36:29 can communicate with with the Daclac Committee, with myself or Susan about opportunities for engagement.

14:36:35 When those tables are happening, and around this, around the Hcbs.

14:36:42 Settings rule. that would be excellent, we would really appreciate it.

14:36:45 I'll be happy to do that great Robert I don't wanna miss a chance for you to ask your question or say something.

14:36:51 Yeah. good afternoon to everybody Marco. i'm Robert Mayel and Taylor.

14:36:57 One of your consumer advocates at dagblack.

14:36:59 Got to see you, and i'm concerned about the insulin issue right now.

14:37:03 Type. 2, one, and 2 diabetes is very permanent here in California, and we have just found out that in the Senate they only gave \$35. Who those who are medicare to get insulin, which I I

14:37:17 congratulate. but unfortunately, plants like mind like partnership and others will not have that advantage of definitely getting soil at \$35, which is capped.

14:37:26 What's the State is going to do for everybody to get insulin?

14:37:30 That is not on Medicare, because to prevent type, one and type, 2 diabetes, we need to have instantly.

14:37:37 That is affordable, and it could definitely reach everybody. So, Robert, thank you for raising that, and just to clarify the United States Senate, not the California Senate is looking at the patches past the inflation.

14:37:50 Reduction package as part of that package. They did approve for Medicare to begin.

14:37:56 Note negotiating on certain drugs and there's only a subset of drugs that they are going to engage, and that's gonna phase into more drugs over time.

14:38:05 The \$35 cap on out of pocket spending actually did not make it through the parliamentary procedures.

14:38:12 From my understanding. and so that's still kind of out and I think that to be determined on kind of where that ends up in terms of what California is doing.

14:38:21 Let me just step back and terms of just the insulin piece.

14:38:25 I think this is really important for us and it's something that is of concern, particularly when we have a conversation about what I call the forgotten middle.

14:38:34 So these are individuals who are not income eligible for Medicaid.

14:38:39 They are on Medicare and They're teetering right They may event at some point be on Medicaid, but they're not right now, and Michelle and her team are working on the office of medicare and medicare innovation integration.

14:38:51 I think that's gonna be an important piece on a stage of dots and is leading that.

14:38:55 But the Governor also has allocated money as part of our caller.

14:39:00 Rx initiative for us in California to create our own insulin generic brand, and we are beginning conversations around.

14:39:09 How we do that with the idea that we significantly cap dollars.

14:39:13 So there is a 100 million dollars investment in the budget.

14:39:16 50 million dollars for us to bring a bios similar onto the market in California, and 50 million dollars for us to produce it right here in in California, with the idea that we drastically reduce the price of insulin in the State and so our hope is that we're a model

14:39:31 for the nation in order to be able to do that while we do that. I think the the ability for medicare to negotiate is gonna be a big deal, and I think that's gonna help reduce the price over time and our hope

14:39:43 is that you know that that folks also Lean in on the \$35 cap?

14:39:48 Because I think that's an important component of this work thank you, Marco, in my apologies because I was taking of the Us.

14:39:56 Senate, when I should have said that, and thank you for letting us know about it.

14:40:00 And please work directly with our Chs test department and social services.

14:40:06 Whatever we can definitely do to definitely get insulin that can be affordable for those who have type.

14:40:11 One and type do diabetes that they really need that cap for them to definitely get across the State.

14:40:16 Thank you, Robert, that's a really really important issue to raise, and I want to make sure we have time for Kim.

14:40:23 Thank you, Patty. Marco, Thank you so much for sharing The vision of the Department is really exciting.

14:40:28 I am. My name is Kim Mills. I am a provider of the Sandy, with the San Diego Regional Center, provide supported, living, independent, living services down in San Diego, and and I think about a person that we are supporting

14:40:41 who who kind of goes across lots lots of different areas and so being able to help her now navigate these systems. she's involved in mental health services, child welfare services.

14:40:53 She's currently homeless in and out of hotels due to some mistakes, she made along the way and and and so she's our most challenging case as a single mother who's was trying to raise her son who's

14:41:05 also being served through the regional center, and being able to in the future access, go across the aisles and access services.

14:41:13 To help her parent, her son, and help her with her mental health and her, her medical issues, and all those things would be great.

14:41:21 She recently got hospitalized because of some medical issues. and There was no options for her son, except to go to a the county receiving home, and which which was sad right. It's she's she has some you, know some issues.

14:41:36 That she has to get. She has to take care of but because she's been so unstable in our housing.

14:41:40 She's not taking care of her health and her son's not getting his health.

14:41:45 So It's a it's it's a frustrating case, and we're doing we're getting support from the San Diego Regional center as much as they can and so being able to open up doors to be able to

14:41:53 access, other services or other departments is, is is exciting for me.

14:41:59 So thank you for sharing the vision and what's to come. And so and I I just can thank you for sharing the story because I think this epitomizes where we're trying to get to because in your story

14:42:11 i'm just gonna name this person joanna like she's having to go through 5 different doors to get services, And what should be happening is she needs to be going through one door and in theory that is a very easy thing to say the directors on

14:42:25 this call will say That's all that's like really hard to do right But part of like what Michelle and her team are doing on Calhoun is to really deliver on the promise of that integration and the whole person in

14:42:36 one door idea and what Susan and others are doing outside of the Medicaid program for the broader population.

14:42:43 And what Nancy is doing around the regional center system in a much more realistic way to that vision.

14:42:49 It's not gonna happen overnight we're gonna have to push ourselves.

14:42:51 But what we learned is that this is really hard work that and it's busting the status quo.

14:43:00 People are very comfortable in their silos because that's the easy thing to do, but it's not the right thing to do so.

14:43:06 I think that we have a lot more work to do. but your example is a perfect example of what we're trying to what Kim and Michelle Lynn, Susan, and Nancy and Stephanie and others are trying to

14:43:15 get to as part of our work across the agency. Absolutely.

14:43:20 And working with Nancy is is wonderful thing to do i'm on a couple committees with her, and and so it's It's great. But you can see the limitations.

14:43:29 It's like their hands are tight it's only so much.

14:43:31 And i'm always thinking what about this what about that there so it's it's it gives me hope being in the field for over 17 years.

14:43:38 It's nice to hear that things are gonna get better and people like the person that we were supporting actually get the support that that she needs.

14:43:44 I love it. thanks for all that you do to support as well.

14:43:47 Well patty I don't wanna get in trouble I think that was the last one. i'm sure you'll hear from our departments in a minute, and i'm so stoked that you get to hear from the awesome

14:43:56 team at the Hcs. Susan and others are just incredible.

14:44:01 Susan Phillips, I think, is presenting a little bit later. so i'm very grateful to have the opportunity to be here.

14:44:07 And Thank you. Thank you. Thank you. Thank you, Marco. and Thanks, Secretary Golly for his leadership as well.

14:44:16 Okay, Marco, and we will. You know the those those names that Marco just mentioned?

14:44:22 I want to note that our directors are all joining us, too, and this is just, you know, 1 one of many, many examples of their commitment.

14:44:30 We have Michelle Boss Kim Johnson, Nancy Bargeman.

14:44:34 Stephanie are all with us today, listening in, and have staff represented as well.

14:44:41 So for our next topic. what we're gonna do here with our agenda is we're gonna make a slight, and it would not be the Daclac committee if we weren't behind already.

14:44:51 So what we're gonna do is we're gonna actually take our break at 3 30 and

14:44:58 So we're just going to adjust things by 10 min and We're going to pick it up at 4 30 with our California for all ages and abilities.

14:45:04 Item. So we wanna be sure that Susan philip who is joining us from the Department of healthcare services has ample time to talk with us about path funding an incredible opportunity that's in front of all of us and to to

14:45:20 aprise the group of activities with within calen.

14:45:25 This is a a topic that this group has been. The deck like has been following since we first met, and we are so appreciative that Susan can join us in, and we can have official representation from department of health care services before

14:45:39 introducing Susan. I also was remiss in acknowledging many of our legislative partners who are with us today, representing both the Assembly and the Senate, joining us today.

14:45:51 So thank you for being with us as well. So, Susan.

14:45:55 Please take it away, and thank you again. So much for being with us Great!

14:46:00 Thank you so much, Susan. fine and hoping everyone can hear me.

14:46:03 Okay for sound great. Okay, great. Thank you so much. Well, thank you all for having me.

14:46:09 That was a great conversation really energizing my name is Susan Philip I'm.

14:46:14 Deputy director for healthcare delivery systems at the Department of Healthcare Services, which is of course, our department. That's administers the Medicaid program.

14:46:22 And i'm here to really provide an overview of a newly launched initiative under Kellyn called Path and path stands for providing access and transforming health.

14:46:33 So. So what i'm gonna do is just lay out some of the key initiatives under path, I did want to spend a minute just reminding folks what path is intended to do in terms of calam and our enhanced care management community

14:46:48 supports benefits, and then really talk about how path is intended to support local capacity and really develop the capacity among our providers and our community-based organizations to really scale and support calam initiatives and

14:47:05 ultimately help our medical members. So just really quickly,

14:47:12 If we go to the next slide and the slide. after that.

14:47:14 Thank you. So just a reminder in his care management is a new medical benefit under Kelly that is really designed to help support individuals that have high complex needs so complex care management for members who you know, as we heard do need to engage

14:47:32 with many different delivery systems, the mental health care need support for long-term services, primary care, specialty care, etc.

14:47:40 So it's really providing that high touch high knees set of care management services, and it also includes clinical and non clinical needs.

14:47:49 So it's really intended to coordinate that for members with really high needs.

14:47:54 And you know, this is really part of kelly's vision to ensure that we really are taking a look at our entire population right in medical programs and saying, you know, are we really providing the set of care management services that everyone

14:48:09 every in in all settings, and the full continuum of care that they really need.

14:48:15 So just Ecm is a pretty big initiative we're really focused on specific populations of focus.

14:48:22 We're taking a phase in approach. we went live Jenny, one of 2,022 for

14:48:29 Individuals were high utilizers, individuals experiencing homelessness.

14:48:34 And that was for those that were already in whole person, care, counties, and health home accounts.

14:48:40 Those were previous pilot programs. So those folks were transitioned to, count killing first, and then, as of July, just a few weeks ago. there is scale to the rest of the counties.

14:48:56 A couple of things I just want to flag for you is as of January the twentieth 23. A population of focus that will go live, are for individuals who are at risk for institutionalization, and living in the

14:49:09 community might be at risk for institutionalization and eligible for long-term care, and then individuals that might be reciting and nursing facilities, but can transition to the community so that population focus in ecm will

14:49:23 go live January, the 2023, and then, July of 2023, the remaining populations of focus will go live, and that is for our children.

14:49:33 And youth with complex conditions. Foster kids that will go live out of July the twentieth 23, and then for individuals who are transitioning from incarceration are just this involved. population.

14:49:48 So folks who are in transitioning out so we can go to the next slide.

14:49:54 Okay, and then just really, quickly, A community supports.

14:49:58 These are 4 sets of services that are meant. Our managed care plans are can offer, and I just wanted to highlight a couple of these services.

14:50:14 Specifically. Again, these are services at managed care plans can offer but they're not required to offer.

14:50:18 However, we have seen quite a lot of take up amount. manage care for a number of these services.

14:50:24 So you know these ultimately they're designed to address social drivers of health and a couple of services community support services.

14:50:33 I want to highlight are those relevant to for cooperative care.

14:50:38 So those are for individuals who might be leaving a hospital or and no longer need hospitalization, but do need some additional recruitment care services, because, you know, maybe their home. or they're they're not living in stable

14:50:54 housing, and so providing that recruitment space will help enable, enable them to have that that safe place to recuperate after a hospital.

14:51:06 Respite services could be for caregivers. So for individuals who are, you know, really providing stuff at home services for for a loved one for a member the respite services would be for caregivers so a

14:51:19 couple of community supports. I just wanted to highlight, and these are have all you know gone, live as of January, and then again taking in a phase and approach as managed care plans begin to offer them

14:51:33 statewide. So now, getting into path we go to the next slide.

14:51:42 Okay, so As I mentioned, Pat stands for providing access and transforming health.

14:51:48 So Dhcs: we have received authorization for for

14:51:53 1 point, 4 4 voices and the dollars are to be spent to really implement and scale enhance, care management and community supports.

14:52:02 Under Kelly. The idea is that you know we know that there is a need in the State.

14:52:09 We know that there are providers out there that could potentially provide these services, but they might not be ready right on day.

14:52:15 One. So how do we ensure that we are developing that capacity? And making sure we're supporting that capacity building throughout the State?

14:52:26 So. The path funding dollars is really intended to go to community based organizations, providers, counties, local entities and organizations, also to tribal partners.

14:52:38 You know we're really looking to ensure that we cast a wide net, and that organizations that raise our hand and say, you know we are interested in providing, say, a specific community supports or interested in being ncm part

14:52:52 provider can have that technical assistance and the capacity building support.

14:52:58 During these transition years. our managed care plans are not eligible to receive funding under path.

14:53:05 They have other dollars that are really intended to help incentivize and build capacity from the managed care side.

14:53:12 Okay, So i'm gonna get into on each of the different it is so there's a lot of information here, so i'll be speaking fast and hopefully, we'll have some time for questions at the end.

14:53:23 So just I wanna just really focus on the 3 initiatives.

14:53:28 I have the star next to it there. So first I wanted to talk about collaborative planning and implementation initiative.

14:53:36 These are dollars that are really intended to support planning and implementation, As it sounds like, so you know, at a regional level or at at account, only wide-level, you know, organizations including providers, community base

14:53:50 organs. conversations, you know, accounting public hospitals and the managed care.

14:53:57 Plans coming together to say, Okay, you know we, What? What are the gaps in our community?

14:54:02 And what do we need to do to really promote readiness for enhance care management?

14:54:06 So these are specific dollar and 10 to support the planning efforts.

14:54:12 The next initiative is called capacity and infrastructure, transition, expansion and development.

14:54:18 So cited is the acronym for that

14:54:22 And so these dollars are really into intended to support that transition and expansion, development of capacity can again for providers.

14:54:34 Community-based organizations agencies. And

14:54:39 The idea is these are: Suppose these dollars are really supposed to be tangible dollars to be given for a specific efforts like you know, if if or Cbo needs help with their billing system, or if they need the technical

14:54:54 assistance specifically, as it relates to all getting that that that technical infrastructure these dollars will will be intended for that.

14:55:06 And then, finally, there's a technical assistance marketplace initiative. And the idea here is you know we know that again there's lots of organizations that might want to participate.

14:55:17 But really don't know how to say for example engage with a manager, or how to kind of do that strategic planning so, or or they don't have that capacity as of yet.

14:55:28 So the technical assistance marketplace. The idea is to really have vendors that could partner with organizations that need that help.

14:55:37 So our intent is to set up that marketplace and have that go live.

14:55:42 January of 20, and i'll go into each of these in a little bit more detail, you can go to the next slide.

14:55:53 Okay. So this provides a time line for our path.

14:55:57 Initiatives. we are really in the midst of having this go live so collaborative planning and implementation initiative, we have launched that.

14:56:08 And so what we are doing right now is working to identify facilitators, and in the counties and regional facilitators that can help again bring organizations together and ensure that that planning effort is underway so we are

14:56:24 a presently working to identify an interview on potential facilitators, and then on our website, we will have some registration open

14:56:37 The cited initiative has also launched. We actually just went live as of August first.

14:56:43 So this is all very new. so i'm really glad to be here.

14:56:47 Just help spread the word and helping you all will help spread the word as well.

14:56:52 And i'll definitely have information i'll share these slides.

14:56:55 I saw some notes here Yeah, definitely. we'll share these slides, and we'll also ensure that you know you know exactly where to find the applications.

14:57:03 So. there's at the very at the end of this presentation.

14:57:06 There's a links to all the to where to find the applications.

14:57:11 So So cited initiative has launched and

14:57:17 We are intending to have a application window period between.

14:57:19 Now at the end of September, and then with funds being dispersed.

14:57:22 By the end of this year the team marketplace, as I mentioned, that is one that will require, you know, kind of a bigger lift for us to identify the different T vendors, and to bring them on board and then to set up a website.

14:57:35 that will show You know who here the vetted T.

14:57:40 Vendors that into organizations that are interested in technical assistance can partner with.

14:57:44 So that website and the marketplace will go live January.

14:57:50 So we can go to the next slide. So for a number of these initiatives.

14:57:57 Dhcs. we need a third party administrator, because, as I mentioned, these are pretty big lists.

14:58:03 So we did hire, and on board a third party administrator called Public Consulting Group.

14:58:08 They have quite a lot of experience from working with other States, and being a fiscal intermediary and working to provide develop applications that applications provide grants.

14:58:20 So they just started as a beginning of July July first is when they started. so they really hit the ground running. and

14:58:28 They've set up on specific website. for for us where a lot of the application and those processes are currently being launched, and the cited one has gone live.

14:58:43 So we can go to the next slide on collaborative planning.

14:58:45 So just want to Just dig into these 3 a little bit more, and then and then I think we can break for questions.

14:58:53 So as I mentioned, so collaborative planning so we're working with our third party administrator to again identify stake that the facilitators for the collaborating planning effort the idea is that

14:59:07 each path facilitator in county or region will have funding, and the planning efforts really are to build off existing collaborative planning efforts.

14:59:17 So, for example, under other initiatives called the incentive payment program, we know that there's help, plan, magic care plans and organizations in in the community that they partner with already have done work to develop

14:59:32 gap filling plans. So we want to make sure that any efforts that are currently underway that the collaborative planning it really takes that into account.

14:59:42 We're also looking to make sure that there's real clear milestones.

14:59:45 You know, you know the dollars are to be used to ensure with them meetings actually happen that really bringing everyone to the table, we really want the facilitators to be neutral and ensure that you know that there is that that

14:59:58 collaboration in the county, and and there's good representation.

15:00:03 We really as you know, Marco alluded to earlier.

15:00:05 For all of these initiatives we are looking at everything through an equity and inclusion lens.

15:00:11 So one of the things that we charge our tpa to do is ensure that we're looking at our application to ensure that there's equitable distribution of bonds that we really are looking to ensure that

15:00:22 we'll bring as many folks to the table and that organizations that have good representation are engaged throughout the process.

15:00:33 So Then the next initiative is cited.

15:00:37 And this is an application based process. So the application will have to meet minimum eligibility criteria.

15:00:46 So you know. First, you know, organization just needs to fill out an application.

15:00:49 So that's first thing and then the funding request needs to be reasonable, and you know, and a test that the funding will only be used for permitted uses.

15:01:01 So and i'll get into a little bit more detail of what we mean by permitted uses. so there's also a requirement that there can be application of funding, so that should be avoided.

15:01:14 But we are looking to ensure that the funding is really used again to develop capacity.

15:01:18 So the dollars can be used, for example, for hiring for you know, looking to increase the provider workforce.

15:01:29 It could be used for billing and referral systems. it could be used for it.

15:01:33 Systems, you know, as long as there is a tie on, to count, aim, and to deliver Ecm.

15:01:38 And community. The other point I did want to mention is that

15:01:44 These funds may be used for retroactive actually to as only till January, 1 2022, which is, when we received you authority to spend So you know, if there are projects underway and that

15:01:57 there is a clear hi to investments that the organization is made that is a permitted use of funds.

15:02:05 We are permitting to, you know, have the application. Reflect that, and the retro retroactive funding request is permitted, and it will be subject to

15:02:17 Some guard rails, and requirements so for the application windows I did want to it's just show this just to indicate that you know what we're trying to do here.

15:02:31 Is have kind of big application windows a 2 month period.

15:02:36 We will. What we will be doing is ensuring that there's multiple application windows throughout the throughout the process, and the idea is, you know, we know that you know, organizations that might really need the funds, but not might not be

15:02:49 willing able to kind of raise their hands and develop the application on day one, you know.

15:02:54 They can then do it at a later application. You know, you know, we do know that more sophisticated organizations that might already have some capacity will be able to fill out the application.

15:03:05 But we want to make sure that the dollars are really going to those organizations that need the capacity building.

15:03:11 So we have multiple application windows throughout the process

15:03:19 To the next slide. So then, finally, we do have the technical assistance marketplace. And you know again, the notion here is that entities that need the technical assistance can apply for that hands on technical assistance support

15:03:32 from vendors, for example, for off the shelf to resources.

15:03:38 The third party admirator that we have on boarded Pcg.

15:03:44 Will con contract with vendors so we're going through a process right now, or we're taking a look at potential vendors.

15:03:51 They will be on vetted. there will be contracts with them, and then they will be those approve vendors that will be participating in the marketplace, and the sorts of services. that they might provide are safety for example guidance for

15:04:06 data sharing processes, you know. How do I set up a robust data exchange process?

15:04:11 How do I, You know, contract with a managed care plan.

15:04:15 How do I ensure that you know i'm thinking strategically over the long term on how to build capacity for my enhance care?

15:04:25 Managers. So there's a number of technical assistance. services that will be on the available through the ta marketplace.

15:04:34 We can go to the next slide. So this is giving you a little snapshot of the different domains.

15:04:41 If you will, of the T marketplace. So we envision you to have multiple domains and click on one.

15:04:48 And then you see the vendors that are that we vetted.

15:04:50 That would be providing those types of services under each domain.

15:04:54 You know, as I mentioned it's a range of services, that, depending on where you sit, and what your current capacity is, you know these are the domains that could be offered to the ta marketplace, or You

15:05:07 know, really interested in hearing from you all if there are other technical assistance domains, or you know, other things that you're hearing that you think we really ought to ensure is reflected especially in terms of ta needs that you know we

15:05:21 need to try to support the team marketplace

15:05:28 So. So I think that you know just in the interest of time.

15:05:33 I think that really wraps up the meat of the presentation and i'll definitely make sure that the presentation is available for everyone.

15:05:44 Just really quickly on the very last slide. if we can get to that.

15:05:49 Yup, Here we have links. that we can make sure that you all have available.

15:05:56 The very the one I want to apply now specifically as a path cited round one application is live now

15:06:05 Accepting applications through the end of September.

15:06:07 So please do help us get the word out there. So with that I will pause.

15:06:14 Thank you so much, Susan, that's such a rich and one might say dense amount of information.

15:06:22 So thank you for sharing the slides. I want to I know you're on a tight timeframe, and and we are running a little behind.

15:06:29 But I want to make sure there's an opportunity for a few people.

15:06:33 Perhaps you haven't asked questions at the last Q and A. if they have questions for Susan about the path program, about how community-based organizations can access this?

15:06:44 What kinds of Cbo you're seeing come to the for to make sure that we are reaching into communities that might be underserved

15:06:58 Let's see Michael I see you have a question

15:07:09 Michael, do you have? can you unmute? I think we lost Addie.

15:07:15 It looks like Michael may have stepped away let's let's go to

15:07:23 I'm just seeing who's hand is up i'm gonna take.

15:07:27 I know, Peter, you asked a question before but I don't see another question.

15:07:32 So. so why don't you go ahead okay

15:07:40 You're still muted Peter sorry they didn't know how to work.

15:07:47 I technology by now. this is a great presentation will be helpful to so many community members.

15:07:52 I'm just wondering. you reaching out to regional center, for example, have you talked to the association or regional center agencies independent?

15:08:04 Let me say, an Adrcs which are aging and disability resource connect.

15:08:12 How does this get, and a one door system I know that's all I well, that's a great question, Peter.

15:08:20 I that is definitely on our target list, you know.

15:08:25 This is all of you know we're getting this all launched. And so, actually, we're looking for folks that we need to be reaching out to.

15:08:31 But the that they are The Association regional center is as our list.

15:08:37 And yeah, we definitely welcome any suggestions for organizations.

15:08:42 We need to outreach to, especially those that can help, then help us further reach out to additional organization.

15:08:48 So thank you for that great Lydia. I see your hand us up. Yeah.

15:08:54 Hi, Susan, Thank you for that. A quick question, and it follows up on

15:09:01 Peters for the local conveners was I to understand they're already gathering community members together.

15:09:08 And if so, I was wondering if you're aware of how they're doing their outreach.

15:09:11 So it's sort of a similar question to peters is how I don't know that, for example, in our community people are aware of the convenience. I wanna be sure they are yeah so they haven't started the

15:09:24 convening yet. we have done is clearly just getting started on identifying who they might be like, who are the potential facilitators. We're in the process of getting them.

15:09:35 Now we're actually looking across state and assessing you know Are there areas where we we need conveners there, aren't any.

15:09:43 So you know, we're really also open to suggestions if there's, you know, areas and organizations that you think would be great neutral conveners.

15:09:53 We're also very open to that so please do suggest thank you Thank you.

15:09:59 Jeff, do you have a question?

15:10:06 Great, great, very informative presentation thank you very much for some of us.

15:10:13 It's a little hard to save the mature the links from the chat, so it would be helpful Patty, or someone to send out the link so that we could keep it and pass on to other folks who I know would like to

15:10:25 see it Thank you for that. and I know it's always an access issue that we should be aware of, and doing in every Daclack meeting.

15:10:32 So we'll thank you for that reminder thanks Susan can I ask you a question.

15:10:39 I i'm curious. I see this suite of services that managed care.

15:10:45 Homes are going to be able to offer, and, as you point out, many of them are voluntarily choosing to offer most, if not all, of them.

15:10:57 What happens when an individual wants a service? Is there any way in which they can?

15:10:59 For example, say that they need a particular service and if the managed care. Organization denies that that they have a way to grieve that, or appeal that to to get that service, whether it's restit care or some security

15:11:15 deposit or or some other enhanced care management. Yeah.

15:11:20 So the In healthcare management benefit is statewide.

15:11:25 All plans are required, provide that. so that is, you know, the care coordination.

15:11:30 So helping to identify that the services are needed is a responsibility of the Ecm.

15:11:37 Provider, and and the managed care plan to ensure that that is done.

15:11:40 So you know if there are first of all we'll say that easy i'm in community supports providers are to be listed in our in the managed care plans provider Directory, you know there is

15:11:54 sometimes a lag, and sometimes it's not complete But that is the requirement. and you know, they are pushing where, and we're, you know, pushing to to ensure that those are as complete as possible especially during the first couple of years of implementation so we are

15:12:09 reviewing those and then in terms of member complaints and grievances, there's always for any, any any metacal covered benefit.

15:12:18 Of course, members may grieve and or complain.

15:12:24 If there are, you know, services that are potentially different. 9.

15:12:26 Let the manage care. Plans are you know even if there's something that they're not offering.

15:12:30 They are to work with the Ecm. providers to help the member find those resources in the community.

15:12:35 So, even for noncovered benefits is requirement that that you see on provider help, too, provide the to locate those services within community.

15:12:45 So the referral even for non-covered benefits it's it's a requirement. are there other questions.

15:12:53 I see Nina put a question in the chat let's see if we can find that is it in the chat, or the Q. A.

15:13:03 Or or you just wanna come on

15:13:10 So my question was really about. So the ecm they they don't all have to be offered across all counties, and, by the way, this looks like a great pathway to training community healthcare providers.

15:13:22 But I guess my question is to answer this today.

15:13:26 Will we ever see a time where the services were being innovated and beautiful?

15:13:34 So. in other words, counties may deliver them in different ways.

15:13:37 I mean we see that it's still highly frightening too.

15:13:42 You got one account you get this is there any way you can answer that.

15:13:48 I mean it's a great question and great observation it's true there is very variation throughout the State.

15:13:52 I will also just clarify again that enhanced care management is statewide, and is required to be prevented statewide.

15:13:59 It's a community support, so that 14 set of services where there is variation across.

15:14:07 So we have are working with to understand where there is variation.

15:14:11 So, for example, you know, we know in certain counties, you know, the providers are working to provide certain types of community support services that might be really time-sensitive, you know.

15:14:23 So after a hospitalization ensure that there's you know quick authorization of those services.

15:14:30 So the there's has been some variation and so we've been providing guidance and now enforcing that to say, okay must authorize these services within 72 h.

15:14:41 It doesn't make sense for it to be languishing for you know an authorization to be languishing for

15:14:46 You know days and days, especially when it's time sensitive same with

15:14:50 You know, medically, Taylor fields especially if it's post hospitalization.

15:14:55 Those need to be awesome quickly, because the whole point is it's to be done right after a hospitalization.

15:15:00 Right. so So where there is variation, and we can provide guidance to standardize that we're trying to understand.

15:15:08 And here, and hearing from you all of where there is variation and understanding that is also helpful.

15:15:14 So. we're always open to hearing feedback and especially during this implementation phase.

15:15:19 Thank you, Susan, for this very informative sort of new launch.

15:15:24 We really look forward to a successful implementation and a lot of community and stakeholder input I'm gonna let you go because I know you're on the clock and turn it over to Lydia from the alliance for

15:15:37 leadership and education to talk about the Calen Work group update, create thanks.

15:15:45 Patty and I know we're a little behind schedule so i'm i'm glad I put some slides together.

15:15:50 I didn't make them fancy but the content in there is something that can be viewed later for a little bit more information on what we've been up to. so first.

15:16:00 I just want to say thank you to all of you for this opportunity to join forces with a collaborative for California collaborative for long term services and supports since there's great deal of overlap between this committee and that group that were group it made perfect

15:16:19 sense. So we did have a meeting on the 20 fourth had representatives from Department of Health Care Services, and they're consultant.

15:16:30 Manette, and I have to say, as sort of an overarching common.

15:16:34 I think it ties in really well with what we've heard already from Marco and Susan, and others that it has been terribly refreshing to have meetings not among ourselves.

15:16:48 We know each other. we've worked together a long time but with the department and their consultants, and really feel like there's engagement.

15:16:56 There's some deep listening and there's a reflection back when we see updated guidances as this one, which I hope you will all take a peek at your leisure.

15:17:07 The enhanced care management policy guide that shows folks have been listening.

15:17:12 So I wanted to first start with that. Thank you to the Dhcs team and Manette, Susan, and your team for really listening to the community and the feedback from lived experiences that many people have shared and from systems

15:17:29 issues that some of us care deeply about so let's go ahead to the next slide, And this piggybacks on what Susan was just talking about in Marco data exchange and sort of global population health goals

15:17:45 that want to be reflected in these guidances, and I think they are.

15:17:54 And You can see from listening to Susan that the path funds are a way for all of us to engage our communities in calam.

15:18:03 You know a way that has never happened before with initiatives i've been a part of for now 30 plus years.

15:18:11 There's actually funding to help communities get ready if they're not yet. or if they are ready and just need a little bit of help to really become part of this incredibly complex and important initiative called calamity so

15:18:28 You know we do have some questions, especially my se best community, because we have been part of managed care for so many years.

15:18:37 Now, as to you know how our plans investing in improving systems.

15:18:41 I have to tell you guys. The infrastructure at the health plan level varies widely.

15:18:49 There's still a lot of factsing going on Some health plants have just recently created uploads where providers can upload data directly to their computers.

15:19:00 But there is no data exchange going on today so it's a vision.

15:19:06 And Co. we we all support on the see See it.

15:19:10 Lt. s Work group, and and I believe this group as well.

15:19:15 So we really want to continue to push that we should be monitoring.

15:19:19 We will hear more about that. It sounds like at a future meeting.

15:19:21 So next next slide there.

15:19:27 I am really thrilled. and the Ccl Tss Committee and those of you who were engaged from this committee.

15:19:36 As we had this look at the May revision of the Policy guide really thrilled. to see that again.

15:19:46 Dhcs listened deeply. and this definition, I think you will agree if you have a minute to study it.

15:19:54 Really captures what we need to identify those people who are the most complex in terms of their needs, their biological, their medical needs, their psychological needs, their social needs.

15:20:07 To be as inclusive as we can and i'm also very proud that I can see a great deal of reflection in this definition from our experience with the community-based Health Home Project.

15:20:22 And also the sea bass. msp definitions that are used today for eligibility.

15:20:29 So we're very pleased with this it focuses on function, and not medical criteria.

15:20:34 So my editorial comment, we've come a long way baby over these last few decades.

15:20:40 Next slide, please. Network development is going on now I can tell you all that. And I was happy to hear Marco and Susan, reflecting that this is going to be an iterative process and ongoing. so all.

15:20:57 Of you again. if you're not familiar with calam and you represent, or you are community provider, and feel you can contribute, you know.

15:21:05 Please do get more familiar. It is a big complex system change but it's an incredible opportunity, and it's combined on us in this committee, and the Ccl.

15:21:18 T Ss. to help now, and to provide some oversight and feedback.

15:21:26 As Marco and Susan both invited us to do.

15:21:29 As this rolls out there is going to be, believe me, lots of bumps along the way.

15:21:33 And who better than to provide that feedback? but those of us who i'm care deeply about this, and are connected to our communities, and in so many ways.

15:21:43 So these are some of the questions. you know we've been asking some of them are addressed in the guidance, so we were happy to see that community services.

15:21:53 Yes, is not required to stay wide, and each plan can pick and choose.

15:21:58 There is a huge grid that one can view that to show what each health plan has selected for their community services. menu!

15:22:07 If you will. So if any of you are interested in that i'm sure we can get you that link. So you can see that directly.

15:22:13 If you're wanting to understand what's going to be available in your community for

15:22:20 This next rollout of population Number 5, which is rit large, going to be a lot of dual eligible being able to engage in them, enhance care, management, and community services.

15:22:36 What does network adequacy look like and think? that is really clear?

15:22:39 Yet we do. No, because this community of long-term services and supports has been so under resource for so many decades that there are going to be huge gaps in certain parts of the State, especially.

15:22:54 So what is being done about that half funding is one approach for getting some access improvements.

15:23:04 But we have areas where I think there's literally going to have to be some building from the ground up of services to make them available to everyone.

15:23:13 So next slide we'll be keeping an eye on that how will people be identified?

15:23:19 So the may 2022 guidance clarified this.

15:23:23 A little bit more. Our group that discussed this really believes that the biggest way that people will be identified as referrals from the community. the risk stratification it's called that the health plans will be engaged in sort of

15:23:39 you know, ranking people by criteria that show how complex or at risk they are, is not gonna capture all of those social determinants.

15:23:50 And the other factors that put people at risk as we've talked about today.

15:23:54 So. We really believe that the referrals are going to be from the community, and we need the community to understand what that process is, how they can make referrals.

15:24:05 What happens when they make a referral? So feedback loop?

15:24:09 Did that person actually get connected? Have they been assigned a care manager, and so on.

15:24:15 So I need the scenario. We all need to pay really close attention to everybody, and, you know, continue to provide feedback.

15:24:20 We've been invited to do that next slide we've also learned through our discussions that there will be a standardized tool that all the plans will use. Its currently in effect.

15:24:34 And there are some common assessment questions having to do with the with long-term services and supports.

15:24:41 But beyond that, in terms of designing a care plan.

15:24:43 And further screenings or assessments that may be needed at the plan level.

15:24:50 Or if the plan is delegating to a physician group at that level, it isn't clear.

15:24:57 Yet how much standardization there will be. So this is another area.

15:25:00 I think we need to dig into a little bit more when someone is found to be eligible.

15:25:06 Then how do we figure out with that person at the center and communicate with them about what their needs are?

15:25:15 So. We also talked a little bit about a copy especially for people that are already receiving multiple services in the community, or might have gaps where new services are going to be offered.

15:25:30 Who's accountable for that care plan and to make sure that the person truly is connected and has transportation, and all of those things that you all know are so important when ones living in the community.

15:25:42 And trying to access multiple services. So I think this another area that we can talk about a little bit more.

15:25:46 Yes, just a couple more ideas here to share. Oh, sorry, Yes.

15:25:52 Meeting slide next slide. Please just have a couple more. Coordination is going to be another area.

15:25:59 I think that we all need to pay a lot of attention to, and what are going to be the reporting requirements, so that we can understand what a success look like in terms of eligibility, care, planning referrals and Then the

15:26:13 coordination. So We need to also pay close attention to that as it rolls out.

15:26:19 Next slide, and we've talked quite a bit about providing ongoing feedback and improvement, and is there a way to formalize that a little bit more.

15:26:30 Can there be a rapid response team, for example, at Dhcs.

15:26:33 So when we see systems issues emerging as we did early on in Cci, you know.

15:26:39 Is there a way to identify those quickly to the right people and talk about solutions and make course corrections along the way.

15:26:48 Okay, next slide. I think this is about it the other things we've talked about in these discussions at Ccl.

15:26:57 Tss. is making sure member notices as they go out, or clear and understandable, using plain language, languages, etc.

15:27:08 Making sure we have the technical assistance I just mentioned.

15:27:11 How are we educating physicians that was a huge barrier during the rollout of Cci, A lack of awareness among the physician community and others, and contracting and payment problems?

15:27:25 Path Sounds like there could be some technical assistance provided through that. but I don't know if it'll be in place by January, and then sufficiency of rights to attract people.

15:27:35 So that's kind of a high level overview of multitude of things that we've discussed and provided feedback to Dhcs about him.

15:27:45 I appreciate the time to give you that overview and I think we're at time right now.

15:27:49 Thank you so much, Lydia very welcome there's a lot here.

15:27:57 If people want to get involved, if any of the stakeholders are members of the public, want to get involved, can you put in the chat how they might do that?

15:28:06 And this is a really great presentation. Thank you so much.

15:28:09 And Also, if you're willing to share your slides I think we could put those up on the slack site where we provide materials because there's a lot of a lot of helpful information here.

15:28:20 Yes, that was my intention. so thank you patty Yes, thank you Lydia and and we're gonna everyone's been very patient.

15:28:27 We're gonna take a break now, if i'm not mistaken.

15:28:31 It's a 10 min break and we will be back at 3 38.

15:28:38 See you soon

15:40:15 Patty, would you like me to start things up again here

15:40:25 Yes, and I and I think that we're ready now for a public comment.

15:40:32 Excellent great. So we did allow 10 min at the middle of our agenda for public comment, and we will also have, at the close of the meeting additional time for public comment.

15:40:44 On your screen. you will see the instructions or anyone who would like to make a public comment.

15:40:54 Maria, do you want to walk through The instructions?

15:41:00 Sounds great, Susan. i'm happy to do that let me get myself on on camera and and up, and going.

15:41:08 Okay, So thank you. everybody. public comment is open. So if you are joining us by zoom, you can use the Q.

15:41:16 A function, or you can use that raise hand icon, and that will add you to the queue for questions and comments and attendees joining by phone can press Star 9 on your dial pad.

15:41:27 That will add you to the queue. I just want to flag that there have been some questions that were submitted in Q.

15:41:32 And A. and it looks like folks have been responding on a rolling basis.

15:41:36 So I encourage you to check that out. and We'll give it a couple more seconds to see if there are any guests joining the meeting today.

15:41:51 Who want to jump in

15:41:53 Okay, seeing. then, i'm going to pass it back to Susan and I will pass it to Patty, and we're going to move into the second half of our agenda Thank you Maria where we'll now hear from our

15:42:07 housing subcommittee so patty would you like to leave this I'm gonna pass it to marty so we're we're passing I will be back on But barney's gonna sort of set the stage for us So take it

15:42:19 away, Marty. Thank you. my name is Marty moto I'm.

15:42:27 A family member, Cdcan, California, just releasing your Community Action network.

15:42:31 And first of all, just thanks to the Department, the California Department of Aging, CD.

15:42:39 8, a fantastic team, Susan, and everybody in the interpreters.

15:42:41 Everybody who is, you know, did the logistics for this?

15:42:45 Meeting. yeah, I mean it's a top notch is it's very valued, and it helps make the information much more accessible.

15:42:51 So thank you to that let's go to this I don't know if my slides are out it's not We're gonna make this really brief.

15:43:01 Given the time. I just want to remind everybody as we're talking about housing and all these major initiatives, and is going back to what Marco actually spoke of at the beginning, which I thought was really important because it's very foundational for

15:43:16 the all the changes we want to make to really transform what happens in people's lives.

15:43:23 But ultimately everything we do, whether it's housing transportation health, supports in the community.

15:43:33 It's about people and It's gotta be ultimately that it has to make a difference in someone's life.

15:43:41 And so when we talk about the Olmstead decision often, what gets lost in that is that it was about 2 individuals.

15:43:49 I mean it impacted millions of people across this country, but the lawsuit was filed by 2 individuals. lowest Curtis and Lane Wilson lanes wearing the red or pink dress.

15:44:03 There I had the honor and privilege of introducing and helping lowest Curtis speak to a audience of 1,500 people in front of the State capital many years ago, and also had the honor of actually

15:44:22 getting to know Elaine Wilson by phone actually, in those days before she passed away.

15:44:27 But I want us to remember that the olmstead decision and all the rights that came from that that came from the Americans Disabilities Act.

15:44:39 We're about people and in this case of lowest Curtis in the lane. Wilson Homestead, by the way, was named after the lawsuit was named after the then headed of the short State of

15:44:50 Georgia Health and Human Services Agency, Tommy Homestead.

15:44:54 So next slide, and why I got involved, like many of us, is is on a for personal reasons that inspired us.

15:45:03 The black and white pictures. My older sister Lena.

15:45:07 She had developmental disabilities, physical disabilities, mental health needs and she lived into her fifties And all through her life there was always issues of getting access to the right health care to the right supports and later years housing

15:45:22 and then the other picture is my younger sister Sherry.

15:45:26 Who had helped problems with their heart and could not access insurance because of the cost.

15:45:33 Both died within 2 years, 2 years of each other 2,003, 2,004

15:45:40 And so they've inspired me can to continue working to make sure that kinds of things don't happen to other people.

15:45:48 In the future. Next slide and right now i'm extended family unpaid caregiver to a young man.

15:45:55 This is 16 years ago. you Alex Brownhouse down syndrome is on autism spectrum.

15:46:01 Is my who's pictured to the ride passed away and died.

15:46:07 If they had no family, I was i've known him since since he was 7 years old.

15:46:11 He would have been put place in the group home, basically, or some other setting that was not one that he wanted to be in.

15:46:19 And so I took him in. but that's a good example though where housing is so fundamental.

15:46:26 You know, to a person, but it has to link into what that person needs and wants.

15:46:31 Next slide. And as we talk about housing as we talk about transportation as we talk about healthcare or behavioral health, and all these other issues, it is ultimately about justice it's about people back you know, many years ago, in 1,900 and

15:46:48 69, the families who came up to sacramento to fight for the rights of people with developmental disabilities.

15:46:55 But really rebuilt the rights of all people with disabilities, and even older California's in those families told the Legislature.

15:47:03 We are here to speak for justice and so I think we can't forget that what we talk about is not just a thing like a house or a car, or a bus or healthcare in a in a hospital.

15:47:18 It's about justice next slide and i'm sure these pictures next slide to just remind us that whatever we talk about again, it's about human beings, people who are desperate for all these things that we are talking about and ultimately

15:47:34 we have a responsibility as advocates. as we sit here in our various places throughout the State.

15:47:40 In this meeting to make sure that we do that whatever we do in terms of our our work, it makes a difference in the lives of people.

15:47:51 That these pictures represent next slide. and again, these are more pictures of people that we need to make a difference, for.

15:48:03 And in everything that Marco was talking about next slide and next slide, and I I know this is kind of small for you to read, But I wanted to make sure that everyone knew on this committee and also the public who are members of this

15:48:22 subcommittee. We have met several times since I I think, February and we plan several more meetings every month.

15:48:30 To really take a deeper dive on on a lot of issues of housing.

15:48:36 Some of it will will and will. I will actually next slide.

15:48:44 Some of these issues will be issues such as supportive housing.

15:48:47 How am additional Kelling supports regarding Reno assistance? Ssi reimbursement rates.

15:48:55 I won't go into the detail here because of the time next slide

15:49:02 Other issues like applying the Ab. 1480, to 2019, tenant protection.

15:49:08 That cap on rent increases to low income housing, tax, credit properties and mobile home land rents.

15:49:16 That defining what the housing need is based on a whole person planning concept and also linking that to outcomes. not only with the Department of Developmental services, but also their key State agency department of healthcare services.

15:49:32 and department Social Services department of Aging. one of the issues that some of the advocates raised in the subcommittee is, we don't even know the dimensions of the housing need that older California and some people with

15:49:46 disabilities base. Now, in other words, what are the numbers of people who've face crisis imminent crisis of losing their home.

15:49:53 How many people are actually homeless, but actually are not on the street, as one of our subcommittee members actually is experiencing.

15:50:02 She is homeless with her family, but is not on the street and and so where?

15:50:07 Where does she fall in terms of the reporting? also?

15:50:11 And this is goes back to a point made by one of the subcommittee members, and also a member of our committee.

15:50:17 Nina, who's you know always has pushed that we remember those who don't fall up from medic Medicare or other low income programs. And so that the subcommittee will look at how do we

15:50:31 find solutions to help order California and some people with the Disabilities who may not qualify for low income housing assistance programs to do their income.

15:50:41 Next slide, and again going back to ultimately what we came up with.

15:50:49 We came up with the priority in terms of recommending to this committee to focus in on the September twelfth event, the day of action, California

15:51:00 Was the California abilities up for all, for all ages and abilities.

15:51:06 Day of action, and we were focusing on one priority or decided to focus on one priority.

15:51:11 And Patty will speak to that and the reason we focused on one priority is because this particular next slide this particular priority crossed all the different disability groups crossed was important to people who are older California's hostile departments

15:51:31 and it's something The state of California has not done but actually would make a difference in people's lives.

15:51:37 If it was done, and that's targeted rental systems for older Californians and adults with disabilities.

15:51:45 Including developmental, and also tying it to also low income renters at imminent risk of homelessness, and also those who are homeless.

15:51:54 I do wanna first of all, before we turn it over to Patty to, you know, take a little bit deeper.

15:51:59 Dive on this priority that we want to recommend to the committee.

15:52:03 And again. This is a priority for that September the twentieth event, but I Wanna open it up to allow the subcommittee members to weigh in on on the prior this particular priority and also

15:52:17 on on other points. You wanna make just be conscious of the time

15:52:22 And actually I don't know how we're gonna do this, because I don't have control of the who could speak. No, often.

15:52:28 I wish I could, Marty. that was brilliant. I just want to thank you for

15:52:36 Making it personal making it inspirational and also reminding us that there's work to be done so perfect, just perfect

15:52:47 I will, if I can share my screen. which means if you can stop sharing your screen. we will very quickly describe the targeted rental assistance program.

15:53:01 And the martyr said what we're really trying to do here is when we go to the september twentieth day of action, and it is the twentieth we want to come in with some very

15:53:14 concrete recommendations. And we want to prioritize those that are really critical, to moving dalex goals and vision along of integrated community living for for everyone who can embrace that if they have the

15:53:37 services that they need. Okay, So now, i'm going to try to share my screen

15:53:47 This is our know. not. Excuse me, not going to be a surprise to you, but unaffordable rents are driving homelessness.

15:53:58 We we know that. and we we know that about 8 out of 10 extremely low income renters, which is not as low as you might think in California.

15:54:12 That's about \$26,000 a year. pay more than half of their income for renting utilities, and older adults and people with disabilities who live on fixed incomes are being priced out of the

15:54:26 rental market. 48% of those Eli Renter households are seniors or people with adults, with disabilities, and we also know that there are start racial disparities where black latinx and

15:54:41 other. Bypoc people are likely to be lower income and likely to be more rent burdened, and renters with high costs are likely to forego medical care, nutrition, and other basic necessities

15:55:02 Oops. Sorry about that. See if we can go back. Yeah, there we go.

15:55:11 So what does that mean for older adult homelessness?

15:55:14 Since 2,017 to 2,020 and We don't have the 2,021 data in here. yet. We have seen a 61% increase in the number of older adults.

15:55:25 Age, 55, and older, who have accessed homeless services in California.

15:55:30 And if you look at the age group of 65 plus, you can see that it has more than doubled.

15:55:38 So, while the numbers started small, we now have over 15,000 people who have needed homeless services as of 2,020, and that only grew during the pandemic and beyond.

15:55:54 So how does this relate to our our master plan the master plan has a goal in goal 5 of affording aging to prevent and end homelessness for older adults and people with disabilities?

15:56:09 It's initiative. Number 1 17 and A group of coalition of groups came together to say, What can we do around making sure that there are effective homeless prevention policies in place because in many communities people are being

15:56:31 housed, but new people are becoming homeless for the first time in greater numbers than the number of people were able to get into housing.

15:56:39 So the solution is at targeted rental assistance, which is a a subsidy to prevent or end homelessness.

15:56:47 It would be a voucher that you could use to stay in the home you're in until 8 and a affordable unit becomes available, or a Federal subsidy becomes available.

15:56:57 Or it could be to end homelessness to get you housed with a subsidy

15:57:03 Who is it available for you must meet all 4 of these criteria?

15:57:08 You're either an adult or a disability or you are age 50 and older.

15:57:13 You are acutely low income, which is 20% of area meeting income.

15:57:19 So it's going to really the very lowest income renters.

15:57:24 You are severely rent burden, paying more than half of your income for rent, or if you're homeless, you would be if you were housed, and you meet one or more of the high risk factors The predictive

15:57:37 factors for becoming homeless that have been developed by the Ucla policy lab, and they are things like losing a spouse or partner, and illness or injury that prevents you from being able to work coming out of an

15:57:53 institution, and and other high risk factors for housing, precarity, and homelessness.

15:58:01 So where are we? We began this process last year, and we got an author for A.

15:58:10 B. 2547. many of you were our coalition partners.

15:58:14 So thank you. and that Bill got a lot of a lot of love in the assembly.

15:58:21 It was well received. People saw it as an important measure. While we get more affordable housing built.

15:58:29 We have to do something to prevent home homelessness among people who are very unstably housed.

15:58:37 It passed through all the Assembly committees, including appropriations, and it was sent to the Senate and at the other side of things, not in the Legislature.

15:58:49 The the master plan for aging has an impact committee.

15:58:54 A stakeholder committee, and it had 2 top recommendations for the next period of focus.

15:59:02 And they were to really address caregiving that works and to adopt a rental subsidy program.

15:59:08 We did not get our 750 million dollars that was going to be needed to fund this program in the budget, so we did not proceed to the Senate.

15:59:21 This year. there are plans to try again next year, whether through a bill or a budget.

15:59:30 Ask, or both. There may be new opportunities to tap into available Federal funding.

15:59:37 That has increased flexibility. and there. may be an opportunity. and that's why we are coming to you now, as the housing subcommittee with a unified ask that took for us to coalesce around this

15:59:50 recommendation at the day of action on September 20.

15:59:56 So. here are the 5 co-sponsor groups, and we did have over 40 coalition partners who signed on as supporting this bill.

16:00:09 And so we hope we can move it forward in the coming year.

16:00:12 Happy to take questions. I see there's some information in the chat and I will stop sharing

16:00:26 This. Fuller says, I love this bill. Well, of course she does.

16:00:29 It was her boss who was the author. Thank you, Liz Assembly.

16:00:39 And then Nazarean was our author, and then, after we went through the housing subcommittee, we were joined with Assembly member Buffy Wix, as a joint author

16:00:53 How do it? looks like? Jeff and Sherry have their hands up.

16:00:58 Thank you let's see I don't know who was first, but sherry your first on my screen.

16:01:04 Thank thank you. I think we'll both have an opportunity to ask questions or make comment.

16:01:10 Thank you, Marty and Patty for the excellent presentation.

16:01:13 I, was, very appreciative and honored to be able to serve on the subcommittee with both of you as well as the rest of the team members.

16:01:22 I think I agree also with with Jeannie.

16:01:27 Is that this is a critically important piece of potential legislation. and to get funded.

16:01:34 You know we have a a long range plan that we've put into action the State and in our local communities to build a much more affordable accessible housing over the next 10 to 15 years and in the meantime we

16:01:50 are actually allowing many more people to become homeless because we're not keeping them from becoming homeless.

16:01:58 And this gives us an opportunity to have basically a stop gap in place to keep people from sliding into homelessness while we hopefully work to generate and develop more housing opportunities that are affordable for our extremely low income older

16:02:19 adults and adults with disabilities. I know firsthand.

16:02:25 My agency provides For over 30 years we have been a Fema emergency food and shelter program.

16:02:30 Grant recipient, and the first you know 30 years of that time.

16:02:39 We, you know we're able to serve you know maybe 15 to 20 families, with a grant of around 20 or \$25,000 to help them with rent rent, stability in an emergency situation just in the last few years and it continues

16:02:53 to grow this, and not just a pandemic issue, although certainly the pandemic made it much worse.

16:03:01 But it's continuing we had an allocation this past year for our county to serve many more families with over a \$100,000, and we went through that amount of money in a matter of 3 months.

16:03:15 I mean that's how high the need is for people who need some rent stability, and an emergency rent assistance. So

16:03:24 This is such a hugely important bill. I was excited to see it of being possible in the last legislation, but I would like to have us take this as a number one priority for all of us, and next month, as well as for the rest of

16:03:45 the year in educating our legislators and the Governor about the importance of this kind of intervention and this kind of action to help our our lowest income residents.

16:03:55 Thank you so much. Thank you. Were there any other members of the Housing subcommittee?

16:04:02 We wanted to weigh in Yeah, I haven't I have a question go ahead.

16:04:10 Okay, what, go? This is a great bill, and I totally applaud the priority.

16:04:16 If you did receive what would amount to the funding level that you had hoped to get this year?

16:04:25 How many people would you estimate that would be able to help That's a great question based on the 750 million.

16:04:33 We would have spread it over 3 years. sort of with a one year to ramp up in 3 years of actual programmatic rental assistance.

16:04:45 And we were saying somewhere between 15 and 20,000 individuals because it's often a very small subsidy you know it's filling the gap. but between somebody's income of 30% of their income for rent and

16:05:00 what their actual rent is it may be you know 400 or \$500 a month which is compared to how how much we spend to try to get somebody house once they enter homelessness that's that's a

16:05:15 screaming deal, It's also of course a much better policy.

16:05:21 Okay, thank you.

16:05:24 Any other questions. Oh, Nina, yeah, just really quick question we supported this, and maybe 25 standing many to see what's coming in 2023 This slide.

16:05:41 That you just did just hi wendy the big pieces in the bill would be very helpful if we could get that. just so.

16:05:47 It's easier for us to explain to other staff around i'd be happy to put it in the the daclac materials.

16:05:56 Thank you. Thank you all. this has been great and we will see you on the twentieth. and hopefully we will elevate this this initiative as really critical to the master plan for aging and advancing that that

16:06:11 goal. He thanks Patty and I, Susan, I think we we, as part of this presentation, bring this over to Cody.

16:06:19 Zager, the Director of Statewide Policy California Interagency Council on Homelessness.

16:06:25 Is he here? I didn't see hello actually cody wasn't able to make it.

16:06:31 But I will be taking his place. i'm Gisel Sanchez.

16:06:35 I am the Council specialist for the Kelly Ch. or the California Interagency Council on Homelessness.

16:06:42 I'm gonna go ahead and share my screen I hope you go over at the

16:06:49 The Statewide Strategic Funding Guide

16:06:57 Alright hope you could all see this. So this is the strategic uses for

16:07:03 All of the homelessness, funding resources within the State.

16:07:08 Something to know is This was released in November of 2020, when we were still the California homeless, coordinating, and financing council.

16:07:17 Since 20 to 22 we have changed to call Ich, and included 5 new departments into our council, including the department of aging So we're very happy to have the director until work with the department.

16:07:29 On supporting people older adults who are experiencing homelessness, which is a significant population, people experiencing homelessness.

16:07:38 So this is the the funding guy that we have put together.

16:07:42 It go. It is really essentially to support the community level and figuring out what kind of resources are available in their community, and how they could bridge to these different funding sources and work together to fund a variety of different housing

16:07:58 projects and homelessness internment, I will go ahead here's just the table of contents, the 4 different sections.

16:08:09 One is just a crosswalk of all the programs available within the system.

16:08:13 State a overview of very details on the major programs within the State, and then just kind of a local investment, and how local communities could use the sending plan into their own planning, so they could arrange the resources

16:08:29 however, they need, and at the end just a definition of all of the definitions of housing interventions that we.

16:08:41 So this is the first part. So this is just all the available resources.

16:08:49 The State. So you'll see programs from each CD our own from account Ich listed here at 80 see Cdss.

16:08:59 And these are major State investments. We also, on the next time page have major Federal investments.

16:09:06 So the way that you would use the sky is if you need to look up a certain a certain project that you're trying to find this will try to figure out which funding resource will be best to part of So in our own cases

16:09:20 if you're looking at rental assistance and you're trying to figure out, Oh, you know we have the hot program.

16:09:27 The encampment. Resolution which one would be better used to fun. friends, assistance.

16:09:33 You would go for the whole Z. The have program as opposed to being.

16:09:39 It does this for all of the programs here. also has it for the Federal program.

16:09:46 So there is a lot of questions on there so many different funding sources.

16:09:51 How do we put them together? How do they work together? Where can different programs supplement gaps within their programs?

16:09:59 So this just lays out all the different possible options to use within this program. And then the next part goes into very detailed information on what these different programs are.

16:10:14 So here's a birth overview this is all the programs listed as well as where they are being funded.

16:10:21 The county citizens see, so it can make a look at this and see that both cities and counties are getting the same kind of funding They could work together on trying to figure out what kind of programs to use and how they could use their

16:10:34 funding together to support different programs. Guys the next couple of pages go very in detail on specific per.

16:10:43 So we have the high key program up here. it is updated up to November.

16:10:50 2021. we are planning on having one release for the fiscal buzz budget that was just approved.

16:10:58 So by the end of this year this should be an updated version of this

16:11:04 But if you're looking for the most recent content or March recent information there is always ones to go.

16:11:11 So this is hunky program i'll tell you the funding amounts, and the constraints where the spending would not be eligible, or something similar to that eligible activities.

16:11:23 The status and strategic guidance for local so the recommended uses and just details on how how those could be used with other.

16:11:34 And then again, it'll go do the same thing for the Federal funding resources.

16:11:42 It is a very intimidating document, because it goes through 39 pages of all information, but it is very helpful if you take a read through trying to figure out where the different opportunities are.

16:11:59 And then so the next part is the local investment plans.

16:12:01 These are examples of how local communities could use this into their own planning for their city, their county there's Coc. also.

16:12:14 So this is an example of the different performance. Measures local communities often set goals for what they would like to see in the community. and these performance measures offer examples for what kind of goals is specific goals to what kind

16:12:33 of.

16:12:38 It also offers the template, the blank version.

16:12:41 So community to take this and really modify it for their own needs within them.

16:12:50 We also have a reference to our own statewide action plan for ending and preventing homelessness.

16:12:56 So if any communities are looking for other ideas on what is happening around the State for different activities, This goes through a summary of what our action plan is.

16:13:07 So the first section plan is just strengthening the system. a second is addressing equally

16:13:17 Getting health, safety, and services is too unsheltered people experiencing unsheltered homelessness.

16:13:20 Third is expanding communities, capacity for sheltering it in the room.

16:13:25 Housing. fourth is the expanding of access to permanent housing within communities, and then fifth is focusing on prevention.

16:13:33 So those are the 5 different action areas we're having within our action plan.

16:13:39 This action plan is currently being updated and it'll be presented.

16:13:43 Other one council meeting on September first if you would like to have more information on this.

16:13:51 Please join us for accounts meeting we'd love to have you And then, finally, is this fourth part on what does it mean to fund different kinds of projects and interventions?

16:14:03 This will go through the different terms. so that i'm housing and non congregate versus other interim housing just a rundown at all of variety, of of housing interventions homelessness.

16:14:19 service. Okay? and then also I would like to show you where you could find this information.

16:14:31 So this is our call, Ich web page if you go down to resources.

16:14:38 It'll take you to the this putting together the funding pieces Guide.

16:14:46 We have a Youtube video recording of a presentation that goes very in depth into each part of this strategic funding guide.

16:14:56 There's a link to the strategic funding guide as well as an excel version of those local community planning and then also a link to all the State and Federal and national resources that were presented within the

16:15:12 guide, and then in our own web page if you'd like to get more updates from us.

16:15:20 You're welcome to subscribe to us this this plant or this guide is being updated, so we will send out information on if there's a presentation.

16:15:30 More updates on our accounts. alright so I will transition to questions that there's any question

16:15:48 How do you wanna i'm i'm not seeing any hands raised?

16:15:59 Alright I will ask you one that doesn't relate to the funding.

16:16:02 But we use the dashboard. we think it's very helpful to have a picture of what is happening with homelessness in the State of California, and one of the things I think that the Daclac committee

16:16:17 would be very interested in is to be able to look, not just at age.

16:16:22 But and disability, self reported disability, but also to see those intersectional ways of looking at the data, so that we can know not just who, over the age of 65 is experiencing homelessness or

16:16:38 asking for services. But what are the racial disparities?

16:16:43 You can look at race, and you can look at age but you can't look at them intersectionally, and the same with disabilities.

16:16:49 That would be a huge help in understanding who homelessness is really affecting.

16:16:57 Yeah, Thanks. Thank you So much for for your feedback work.

16:17:04 Lot to know that communities user resources and they're using them to make decisions within their own.

16:17:08 Really happy. So if there aren't further questions thank you so much gazelle for this information, and a lot of meat in this guide. and we know that there's further Federal funds coming down so we'll be

16:17:25 interested to see those added into the mix, and we have some suggestions of how those can be used, including what you just heard about a rental assistance program which is a key portion of homeless prevention.

16:17:39 So, thank you, thank you, and I think we're ready to move to the transportation.

16:17:44 Presentation of the transportation Work Group

16:17:53 Tokidoki. Does that mean that is alright?

16:17:56 Thank you, Patty. it's so cool to see you in a box after I've met you live in in the flesh.

16:18:03 So it was really an unexpected wonderful thing for those of you who have not met her. She is like 6 feet tall and just glorious in person. I mean these boxes just don't do justice. anyway.

16:18:16 Hi! everybody i'm debbie toad with choice and aging.

16:18:18 I am your subcommittee co-chair I think i'm a co-chair. maybe i'm the chair.

16:18:24 I don't know I get promoted every time I come to a tackle meeting, so it's fabulous.

16:18:28 But now the chair and we are going to i'm not gonna actually get into the presentation.

16:18:34 Maria, i'm gonna let John do this part of the presentation. What I would love to have is that when page document that talked about our shared values. And Maria, you're the best I wish you could be with me everywhere.

16:18:51 Okay, so brief. briefly: the transportation subcommittee spent a time with a small number of people saying, Okay, now that they've given us this space, what are we going to do with it?

16:19:04 And so we got together. We met with a facilitator, and had a conversation about what it is that our shared values are.

16:19:14 What are the dreams of our group? What are the fears of our group?

16:19:18 And really, how are we getting there? to? Where are there is?

16:19:23 So just briefly, I want to ground us in this and then we're going to move on to a presentation from John Cunningham that compares how California is structured in terms of accessible transportation, and comparing it to other

16:19:37 places that might do it better than we do. which is shocking because California does everything the best right.

16:19:45 So disability and aging community. Living Advisory committee, transportation, subcommittee shared values, dreams, and fears.

16:19:52 Here we go, agreed upon values, inclusion, equity, collaboration, and follow through sustainability and candor.

16:20:02 And I do want to explain. Candor really is that we can freely and openly talk about the brokenness without pointing fingers, or having people feel responsible for a history of inaccessible transportation.

16:20:19 We just want to be able to say it's broken and not you did this, but it's broken, and we need to fix it.

16:20:24 Dreams of the group. This subcommittee drives the internal work of political staff and legislators.

16:20:31 That's it that's a dreamy dream right there's, participation, and champions driving the work at all State agencies.

16:20:40 Another wonderful dream. Tangible milestones are created and reached, not just because of this work, this this to me, this is the this is the absolute key Because of this work.

16:20:57 Everyone is able to get where they need to go with they want the fear of the group is lack of integrity. like conversations don't lead to action.

16:21:08 So we finally get Cal Trans. in the room i'm just calling you out Cal Trans.

16:21:12 Cause why not? And you're like yes, we're in it we're we're totally equity based we get that agism and ableism. are these really terrible things in the system.

16:21:21 And we're gonna fix everything and then they can't like there's a fear about that.

16:21:26 Our other fear is that the status quo will continue to remain strong, which is what the history has been.

16:21:34 As you know, We've presented on this before we have more studies on accessible transportation that sit on shelves than probably any other topic.

16:21:46 And I just wanna say at this point that whole presentation I don't know if it was giselle or gazelle.

16:21:50 I'm sorry if i'm pronouncing it wrong I think it's just so I want that for transportation.

16:21:56 I I wanna know what all the funding streams are.

16:21:59 I wanna know all those different bits, and pieces and how we access them like we don't put the energy and effort into knowing all of these things in transportation.

16:22:09 And yet, if you can't get to and from the grocery store, or you can't get from to and from medical appointments, or your place of worship, or to see your friends and family housing doesn't mean much so I

16:22:19 just you know there's no Emphasis there so how are we going to get there?

16:22:23 I'm sorry back getting on back. on topic passway so how do we get to this place where everyone is able to get where they need to go when they want to get there?

16:22:34 So the pathway is too full. we've got one education and partnership with State agencies.

16:22:40 This is happening, I have to say I am thrilled that we have Caltrans Chp.

16:22:50 The California Commission Transportation Commission. We have all of these folks now coming to our transportation subcommittee meetings, so we have the department heads here in the full dack lack, and we have these other folks now attending and interested and

16:23:05 engaged and it's a it's a beautiful new day So that's one is educating we're learning about them, and how they do things, and they're learning about us and what our demands are so that's the education and

16:23:18 the second piece. The second part of our pathway is creating policy and budget reform legislation that will foster transportation systems change incorporating truly accessible transportation in planning investment and implementation.

16:23:36 So I do want to put a little asterisk here and say at our last transferation, subcommittee meeting, which was yesterday, we agreed that we needed to come up with an a definition for accessible transportation, so

16:23:51 we're going to be doing some sidework on coming up with what that definition is.

16:23:56 So that our work can kind of be universal, and we hope at the next full Daclac, to be able to present you with the legislation and budget.

16:24:06 Ask that we want this body to push forward so that we can truly revolutionize systems change.

16:24:11 For accessible transportation in California. So now I will tell you every reporter.

16:24:18 I talked to every State person I talked to, asks me, Debbie, how is accessible?

16:24:23 Transportation done right. So John cunningham's gonna come on and do a little presentation.

16:24:30 Now looking at California compared to a few other States, John

16:24:39 I can't hear you

16:24:46 There he is! welcome. Great! Hello, everybody! my name is John Cunningham. I'm.

16:24:54 A transportation planner in contrast. to county and she's in the East San Francisco bay area and i'm gonna give this presentation.

16:25:07 But i'm gonna provide a caveat and first this is a work in progress.

16:25:12 Only just started to put this together at the request of the Dac Clack transportation subcommittee is the yeah described in her in her introduction in addition to other other folks that have asked for

16:25:29 this information, you know, who is doing it better? Okay, fine. if we are doing it Well, who is doing it better?

16:25:35 One thing that Debbie hasn't seen in the new version, We we I do have a slide next slide, please.

16:25:43 That defines accessible transportation you know we have launched into this presentation a few times or different presentations, and we usually, we usually define it, and we sort of left that off as we've moved ahead and so we're adding it

16:25:58 back in and it's an important piece to describe what We're talking about, but also what we're not talking about, and i'll get to that in a second.

16:26:05 So accessible. Transportation is really talking about wide range of services, a continuum of services, not a one size fits all service.

16:26:19 And you see the bullet points there talking about door 2 or to door transportation service door through door transportation service.

16:26:26 Travel training, even food delivery really sort of fits in this.

16:26:33 In this spectrum volunteer driver programs way finding systems.

16:26:36 How helping people get around areas they're not used to and and even it goes to to advocacy accessible chance transportation, advocacy.

16:26:45 And so and so that's what we're talking about when we say accessible transportation, and when I say when I said at the outset of this slide it's important what we're not talking about and that is Americans

16:26:57 with Disabilities Act paratransit service and So that is a very specific type of service that is typically provided by public transit providers.

16:27:08 It's a bit of an odd public service area and and subculture.

16:27:12 Frankly When the Ada Pair transit regulations were were adopted.

16:27:18 It defined minimum standards, you know, very reasonably.

16:27:20 And now over the approximately 3 decades since those standards, those regulations were passed.

16:27:27 Those minimums have sort of morphed into maximums and a lot of areas, and i'm i'm I'm, you know i'm generalizing we're we're talking statewide and some areas.

16:27:38 Do it better. but, generally speaking, if you talk to public transit folks, they stick to the Ada pair transit regulations, and and they see them as maximums, not as not as minimums. it's it's if you're familiar

16:27:53 with the saying, when a measure becomes a target it's c to be a good measure that's that's sort of Ada pair transit defined, and so that is not what we're talking about here that very

16:28:03 rigid type of service. So next slide, please. And so why?

16:28:11 Why a comparison between States debbie debbie touched on it a little bit in her intern introduction.

16:28:20 But you know i'll i'll give you the broad strokes of the California model right now, and i'll get into it a bit more detail in a a subsequent slide, But the California model is really limited the existing

16:28:31 statutes were passed in 1,979 and and frankly, they just Aren't, very impactful at the time they were passed.

16:28:41 It was acknowledged that this was a permissive a permissive program.

16:28:47 It wasn't you know, it was very limited in terms of funding, and in terms of sort of requirements compulsory actions.

16:28:55 And then, yeah, studies in 18 years in California on this specific topic area with 0 implementation, and that that for most people when they hear that.

16:29:12 That's the that's the phrase you know studies sit on shelves.

16:29:16 Well, that is that's what we've done here, in the accessible accessible transportation service area.

16:29:22 There are a number of different reasons why that's the case i'm not gonna get into him here.

16:29:26 And then the other reason why we want to compare between states is unlike other areas of the transportation system, accessible transportation.

16:29:36 There really isn't a lot of standard approaches the approach is very by locality, because these types of services are provided. that's sort of the very hyper local level, local nonprofits cities provide them and So depending

16:29:51 on the capacity of your locality the approach is going to change There's no sort of turn key system unlike area.

16:29:58 Other areas of the transportation system and that's that's. That's why we do need to look at other on the other areas.

16:30:06 So next next slide, please, and so i'm gonna cut to the chase.

16:30:15 When this on this slide. But then i'm gonna get into the details on the wise and the next slide other areas that are more successful.

16:30:24 Have have, you know better programs there's 2 sort of defining components of those programs.

16:30:31 A one. it's the policies and There are compulsory oversight and implementation structures.

16:30:39 California system or non system, Maybe is is very permissive it's an option for areas.

16:30:46 Yeah, do you want to provide the service fine here's a mechanism that's available to you again.

16:30:50 I'll get into that mechanism in a subsequent more detailed slide, and then funding you need to have dedicated specific funding for these types of programs and that's not just me saying this you will see

16:31:03 this in the subsequent slides, and there have been numerous studies that say you need funding to implement these programs.

16:31:11 As I say, that it sounds a bit ridiculous, because, of course, you need funding to implement programs.

16:31:18 You know I I often try and draw analogies with other areas of the transportation system.

16:31:23 You talk to somebody, talk to an engineer. Can you build this bridge without any funding?

16:31:28 You would get laughed out of the room so it seems a bit ridiculous.

16:31:31 But we're in the position here where we don't have dedicated funding for our programs.

16:31:36 I do need to point that out. what i'm not discussing here is local funding again.

16:31:41 That varies by jurisdiction. some localities dedicate, you know, local local sales tax or general fund on Mondays to their programs.

16:31:50 We can't discuss that there's too many variables and we're also not talking about Federal 53 10 funding, which is available nationwide and frankly, it's not a lot of money California for the

16:32:00 entire State gets 18 million dollars a year just it's it's a pit so next slide alright California.

16:32:12 So I I have 3 different slides we'll talk about California, and Florida start with a baseline here.

16:32:18 What we have on, and i've tried to make the the The heading is consistent, so we have apples to apples.

16:32:26 The program name, which again really it's a bit of a stretch to call this a program.

16:32:30 It was a statute passed in 1,979, and it's the social services transportation Improvement Act.

16:32:37 No that again. That that act created a very specific mechanism. you see there in the last bullet it's the Consolidated transportation services agency mechanism.

16:32:51 It it it doesn't have a lot of impact it doesn't give you a lot of options in terms.

16:32:59 So administrative strength. but it does make you eligible for what you see there in the middle, under funding sources.

16:33:08 This Transportation Development Act article 4.5 funding that's community transit services funding.

16:33:15 Now that funding is not dedicated to this type of service.

16:33:20 It's also a transit agencies are eligible for or this money.

16:33:23 So right out of the gate. When we created this program in California, the funding there was a there was built in competition for this funding.

16:33:33 So there was a built-in sort of suppressing influence on on creating these.

16:33:41 Ct: Yeah, Because nobody wanted to share that That piece of the pie and public transit agencies are, you know, well established, politically powerful players.

16:33:52 And you know this new mechanism really couldn't compete so like this: this 1,979 act just Hasn't had a big positive effect throughout the State.

16:34:02 There are some examples of successes but again i'm i'm generalizing.

16:34:06 It's just it's just hasn't been that impactful next slide, please, and so we move to Oregon, which is a good.

16:34:16 It's a good comparison, because They they did have a special designation much like California.

16:34:23 Ours was the ctsa that I just mentioned. They created this program, the Special Transportation Fund, and that establishes consistently statewide these St.

16:34:35 F. agencies that are eligible for funding.

16:34:39 And they have oversight for these Stf agencies.

16:34:43 There are, there are available, statewide. and more importantly, they have dedicated funding to to pay for these programs.

16:34:50 You see there in the middle category funding sources and there's a variety of funding sources that go into the special transportation fund, and this is one of the areas where i'm i'm still compiling

16:35:04 the information you would think in this day and age of the Internet that these funding amounts would be easy to find.

16:35:10 But they are not so i'm still tracking that down as time goes on. I'll populate this slide with the amount of funding that they that they have and so that's that's the Oregon that's

16:35:21 organ program can go to the next slide, please, and then the Florida, before the program is is very comprehensive.

16:35:28 And It's both in terms of funding but also in terms of policy support.

16:35:38 They have the policy again, the the last set of bullets There it's a The program is managed at the State level, as you can imagine.

16:35:46 They have a statewide commission for transportation disadvantaged.

16:35:49 We don't have such a commission in in this state and then there continues to be administrative and policy support trickled down to the local level.

16:35:59 They have community transportation coordinators, and then they have a local coordinating board and and just oversight for this program.

16:36:07 And then again, importantly, very importantly, they have a dedicated funding source.

16:36:12 And yeah, it's it's very well supported I see the 4 bullets there in the middle of the in the middle of the slide straight.

16:36:21 The vehicle, registration. fees go into into this fund. it's even included as a normal part of the State transportation budget, which I guess I shouldn't find shocking.

16:36:31 But I do it's it's you know it's a part of you know.

16:36:35 But budgeting is a sort of a it It it broadcast your your your values, and it's in their budget.

16:36:44 And then they also have capital programs and grant programs as well, supporting supporting this.

16:36:50 This program. So in next next slide, please, And we were also asked to take a look at international examples.

16:37:00 This isn't definitely an area where my research is pending. and when I initially took a look at it, I started to look in Europe.

16:37:10 They just have very robust transit programs. Unfortunately most of the information that I found is they leverage their already robust rail and bus systems to expand provide incremental expansion for accessibility.

16:37:25 We don't we don't have that advantage here just financing and culturally we don't have a robust public transit system here to leverage, and so I I i'm not sure how much information i'm gonna

16:37:37 get there. But at our meeting yesterday with the Dac Clack transportation subcommittee, they gave me a lot of good to input some Asian examples that I just started to research and even some more information is rolled in

16:37:52 today, V. email and i'll update this slide as time goes on, and and that ends my presentation.

16:37:58 I'd be happy to answer any questions. and I I would love any feedback, particularly considering the almost semi-draft level of this this presentation.

16:38:07 I I do, wanna I do, wanna

16:38:13 Thank you so much, John, for that wealth of information this is actually the second time I've I've absorbed it, and each time I learned I learned more.

16:38:25 So I really appreciate this presentation. I I wanna make sure if there are any members of the transportation subcommittee who wanted to say anything or make a comment before we move on to Now how are we going

16:38:39 to use this on September the twentieth, and I wanna make sure we we leave enough time for that as well.

16:38:47 So if if nobody has questions or comments, though i'm sorry Kate, you have your hand up for some reason.

16:38:55 I'm not seeing hands on my screen. looks like we have a hand from 8.

16:39:00 Yeah, I I do i'm sorry I had to unmute myself.

16:39:04 So this is absolutely fascinating, and as someone who tries very hard to take public transportation.

16:39:10 It's very spotty as you know but i'm thinking also there are some promising practices in California, and I don't know how highlighted those are.

16:39:19 Few years ago in Sacramento, the the mayor of West Sacramento, I think, talked about a really innovative program that they were doing.

16:39:26 And so i'm wondering how much there is here that we can test into and then completely on the other end of this spectrum spend some time in Ireland a few years ago, and 65 and over and

16:39:39 adults with disabilities right free, and all the transportation systems. and the part that I thought was really fabulous is they do a lot of training with the bus drivers and frontline transportation people and that shows it

16:39:53 just is they're so welcoming they're careful so just a couple of couple of points.

16:40:00 But this is fabulous. Thank you so much. Thank you, Kate. Good information.

16:40:05 If I could make one comment, kate's comments for reminding me something else.

16:40:09 We have been talking about West Sacramento success story.

16:40:11 There are other success stories we can pull to throughout the State, which is great.

16:40:17 What we want to do is set up a system so it's not an anomaly that you have a successful program.

16:40:22 We don't. We don't want to need a hero to have a successful program.

16:40:27 We want it to be just systemic and implemented everywhere.

16:40:30 But but thank you for the the heads up on west Sacramento.

16:40:33 I'm gonna i'm gonna look at it hi this is Debbie?

16:40:38 Can I just say that we we're doing some I think some pretty impressive work at least right now in Contra Costa County, and getting some local funding streams to fund implementation, not a plan, not a study but actual

16:40:51 implementation of the studies that we've been doing for 30 years in contradictory county. So I do want to echo.

16:40:58 That is possible. and I want anybody who's interested in this topic to please join our transportation subcommittee.

16:41:04 There's no like you don't have to go through any jumping in process.

16:41:08 You just show up Amanda sends out the emails from the California Department of Aging and anybody and everybody is welcome.

16:41:20 We want to know about where it's being done Well, but we need a system and a funded system that is reliable that we can count on to be there for us for our funding.

16:41:33 Every year, because we're fighting for that little tiny pile of money every year, and it needs to not be that way.

16:41:38 We need to be able to think about people getting around inclusively, and we don't do that.

16:41:45 We're not there yet and we will get there we are we are committed to getting there, so I would just encourage anybody who's interested in this topic to please join our transportation committee, and learn like like i've

16:41:57 been. we're all learning and there's a great way to do this, and yes, we we we hope to have some policy to you at the next meeting.

16:42:09 So thank you for the opportunity. Everybody great, Thank you. And I think, Bill, you had a question, or or something.

16:42:18 You want to say

16:42:24 And Peter, I see you have your hand up. Yes, and thank you i'm off video because of a disability reason.

16:42:33 Peter Windows, I do just want to encourage that.

16:42:37 We do need to at some point t talk about parent transit that's an important service to people with disabilities.

16:42:47 People that know actually when development of disabilities along with older adults, edited as important as 6 fruits and other types of accessible transportation, and it serves a large portion of our community who cannot use it's fruit or other it

16:43:05 says, due to a disability. it helps condition. So I would encourage that the conversation not stop here that we talk about pair transit as well, because particularly as we toggle back transferation the rights to the national plan on

16:43:27 is the whole part people who are have disabilities of their agent or community.

16:43:34 So I just saw my dad to go past presentation and I look forward.

16:43:40 She's very more. thank you Peter we're gonna move to really figuring out how we use these 3 excellent presentations that we've had on September 20 eighth September twentieth

16:43:55 excuse me and get an update from cda on that and Bill, we're holding your your question.

16:44:02 We're gonna have a public comment period after we get that update.

16:44:07 So is that Susan who's going to give us that update I know, Patty.

16:44:11 It's Amanda yay hi amanda Hello, Good afternoon, everyone.

16:44:17 There has been a lot of excitement and this hasn't around September twentieth Cal.

16:44:23 For all ages and Abilities Day. Here is the homepage of our website.

16:44:27 So I wanted to just spend a little time today talking about how registration is going, and about next steps.

16:44:34 And then Maria will actually walk us through the registration page in a second, and i'm gonna go ahead and put it in the chat box.

16:44:44 So planning is well under way we don't have a final agenda to share with folks yet.

16:44:49 But we have a good idea of how the day is going to go

16:44:53 And we were I can share that in a few moments.

16:44:56 Go ahead and go to the next slide. I just wanna talk a little bit about how registration is going.

16:45:02 So. we actually have 500, maybe possibly more. This time people registered for the events, and it does have a maximum capacity.

16:45:09 We do have limited space at the convention center so It just wants to encourage everyone to take advantage of that link right there in the chat box right now, to go ahead and register.

16:45:21 It's really simple. just takes about a minute and We wanna make sure we have the most representation possible from

16:45:27 This committee, and all of our committees next slide please here's a little breakdown of who has registered.

16:45:34 So we have around 78% from who are identifying as general admission.

16:45:40 These are. These could be State partners. They could be members from advocacy organizations.

16:45:46 They might be folks who previously served as stakeholder committee, and are currently serving on one of the committees.

16:45:53 And then we have just 4% from our our phone topic partners just wonderful.

16:45:59 And then 14% from our stakeholder members.

16:46:02 Next slide, please. exciting thing to note is that we have lots of out of State participation.

16:46:09 We are going to see folks come in from a litany of State here, and Washington, Dc.

16:46:14 We've got folks from Colorado Idaho the Carolinas Indiana.

16:46:19 Even you know Minnesota and North Dakota.

16:46:21 So we have folks coming in who are supported by the California, our center for health care strategies.

16:46:27 Sorry, and some of our philanthropic partners.

16:46:30 The rise, fellows. so we're going to be showcasing what we're doing here in California.

16:46:35 It's you folks from across the country next slide please just wanted to briefly go over some of the agenda what it looks like.

16:46:42 We are going to have our breakfast meeting great that's when all of you are able to meet each other in person, and perhaps mingle with the other. committees as well.

16:46:53 Then we're gonna have welcoming and opening remarks from director to Morris, which will be followed by our keynote to be provided by Ashton apple white.

16:47:02 If you haven't seen her ted talk yet I recommend you check that out.

16:47:06 I can try to find it and put it in the chat box in a second. she's an amazing speaker very engaging.

16:47:12 She's very funny. and then we will have your presentations. You will be setting the the priorities for the next 2 years, as you see fit for the master plan for aging.

16:47:22 You will have about 10 min per committee to provide your platforms.

16:47:27 Then we are going to have a conversation led by Mark Omich on a cross-lector partnership.

16:47:33 You know how that really is the linchpin of advancing the master plan for aging.

16:47:37 We will also hear from Joe Zavier, director of the California Department of Rehabilitation on how California is leaving the way with all these partnerships that we are building in growing across aging and disability next slide please really excited we're going to

16:47:53 be having a video that has been developed by inclusion films.

16:47:59 Which will spotlight the lives of well at minimum for individuals.

16:48:02 We have been. They have the The film production team has been filming all over California.

16:48:09 Older adults, people with disabilities and family caregivers.

16:48:14 So we have a true perspective coming from their lens and then we'll have a panel discussion with some of the folks who are featured in this film.

16:48:20 We'll also Have a conversation with state leaders facilitated by Kim Mccoy Wade, and then at the end we'll talk a bit about you know.

16:48:29 I have a table discussion and sort of activity where people can report out what they feel like.

16:48:34 Maybe the gaps were in the day. What they wanted to hear more about during during the event, and want to ensure that it also is included in the public and stakeholder comments for input to the master plan for aging's next round

16:48:47 of initiatives, and then we will hear from a Reass striver chair of the Governor's task force on Alzheimer's prevention and preparedness.

16:48:57 In former first lady, she will provide closing remarks at a call to action.

16:49:00 So that is what our agenda looks like. Of course there are also breaks and lunch built in

16:49:06 We will have box lunch, and that's one reason you have to register is to order your lunch.

16:49:11 I see Marty's question at this time we are not able to offer offer remote participation.

16:49:19 And of course there is first stakeholders you know It's really important that we do have that in meeting time.

16:49:26 To see each other and meet each other in person.

16:49:31 And develop your it. just do the file touches on your presentation, etc.

16:49:35 So we will provide any updates if we are able to go Offer a live stream closer to the date.

16:49:41 How about Maria? Could you go ahead and screen share the website and show folks how quick and easy it is to register?

16:49:52 Yeah, I would be happy to take myself off of mute Thank you.

16:49:58 Al all right. So just wanna as kind of do a little screen sharing of the out for all website.

16:50:05 Here's our homepage if you scroll down it has a kind of a brief description.

16:50:09 I do want to just draw attention to a couple of different tabs here.

16:50:13 There are some instructions or some suggestions about lodging and travel near the Safe Credit Union Convention center.

16:50:22 I do want to flag that there's a small number of rooms that I believe are still available at the shared and hotel at a discount rate.

16:50:29 So if you need overnight accommodations, please be sure to snatch those up as soon as you can, as prices do.

16:50:36 You tend to trickle upwards as we get closer to the conference State.

16:50:39 I want to flag that there are travel stipends available for folks that meet the guidelines listed here.

16:50:48 They are offered to individuals experiencing financial hardship with preference given to California residents that are older or disabled adults, caregivers as well as individuals residing in rural regions.

16:51:01 The stipends are limited to 250 per individual. and there are other sort of a four-step process to be able to access those funds if needed.

16:51:11 We also have a page that we've set up to talk about Covid 19 policy.

16:51:15 We're asking all attendees to Adhere to the most current covid 19 Public health guidance from the California Department of Public Health, as well as Sacramento County, and this page is subject to change as covid can be

16:51:28 unpredictable and so we're monitoring that closely.

16:51:30 But you can go here to learn about what we're doing to keep folks safe, and what some of the policies and procedures around Covid will be contact and support if you want to email me directly.

16:51:43 You can, if you want to use this page it'll send me an email, and then we can connect to answer any questions that you might have, and finally, just flagging the registration page for our committee.

16:51:54 Members, please be sure to register as a stakeholder committee member.

16:51:57 So use this dropdown and then complete the form some of the basic information being collected that I think you all are pretty used to names emails, phone numbers.

16:52:07 We're asking for affiliation or organizations titles to select and check the committees that you're on.

16:52:12 I know some folks are on more than one here's this really awesome selection for your lunch.

16:52:17 Make sure to let us know what your preferences are.

16:52:20 If you have any food allergies if you have any accessibility needs, we're capturing all of that and finally just a couple of waivers that we're requiring folks to sign off on one of them is focused on

16:52:33 photography and videography. and the other is just acknowledging that that you you may be exposed to Covid 19.

16:52:42 There's there's you know there's always that risk when we gather in person.

16:52:46 So that's really it but i'm happy to answer any questions that folks have about.

16:52:52 Cal for all or the registration process. Thank you, Maria, and as you said they can, Folks can fill out the contact box to reach you if they have any issues with your registration not going through or not receiving a

16:53:09 confirmation. we can get those to you also. Just wanted to take a moment and thank the the work.

16:53:15 Groups who are advancing the recommendations to the Mpa.

16:53:21 We have Debbie and Eric leading the transportation recommendation group, and Lydia working on Cal, Am and Marty and Patty advancing the housing recommendations.

16:53:32 I know it's a lot of work and I really appreciate it, and we will be scheduling a call with the leads from each of your groups to do another a little planning on the presentation portion So we'll have a

16:53:44 little prep time with you before the day. of so we'll be reaching out to you about that. i'd like to get folks time to ask questions of me.

16:53:55 Or perhaps of the the work group, leads about next steps with the the recommendations that these groups will be making.

16:54:04 And this is also a a public comment. Time, If people want to call in who are not members of the committee.

16:54:15 Bill Culture.

16:54:22 Can you hear me? Yes, I wanted to circle back to the comments on transportation.

16:54:28 If I could. I just a couple of quick comments.

16:54:32 We all know that we're at the very beginning of the demand curve of the demographics as we go to 25% of the population being over the age of 50 and 2030

16:54:47 I think the thing it's important to highlight that users of accessible transportation are not only individuals with chronic health conditions or disabilities is also their caregivers, and that that demand is currently not being met and so.

16:55:04 again. it's so important we understand that there's a link between transportation and health, both for the healthcare services, but also for as an antidote to isolation and I I would end my points on the

16:55:24 fact that, Cal, am one of the things that they're offering in the new improve services is looking at the social determinants of health, one of which is providing transportation to medical appointments.

16:55:41 If that individual does not have access to transportation. So again, recognizing the link between health and transportation, and the demand is not being met now.

16:55:53 And lastly, it is only going to get larger going forward.

16:55:56 Thank you for my time. Thank you, Bill. Any other public comment

16:56:07 Well, I think we are narrowing down on 5 o'clock We did it