

# CALIFORNIA DEPARTMENT OF AGING

## EQUITY IN AGING ADVISORY COMMITTEE MEETING

### MARCH 16, 2022 TRANSCRIPT

10:02:25 AFTER THAT.

10:02:53 GOOD MORNING, EVERYBODY.

10:02:56 JUST GIVING YOU A COUPLE SECONDS FOR FOLKS

10:02:59 TO TRICKLE IN AND THEN WE WILL GET

10:02:59 STARTED.

10:03:07 GREAT.

10:03:13 A COUPLE OF LOGISTICS REMINDERS.

10:03:17 NEXT SLIDE, PLEASE.

10:03:19 THANK YOU, NANCY.

10:03:23 THE WEBINAR, WE'RE STILL MEETING

10:03:24 VIRTUALLY, SO THIS WEBINAR IS AVAILABLE ON

10:03:26 YOUR COMPUTER OR BY PHONE.

10:03:29 LIVE CAPTIONING AND ASL INTERPRETATION IS

10:03:33 BEING PROVIDED AND YOU SHOULD SEE OUR ASL

10:03:38 INTERPRETER JULIE T-P YOU'LL WANT

10:03:41 TO SELECT THE LIVE TRANSCRIPT OR CC ICON

10:03:44 ON YOUR ZOOM TOOL BAR AND AS ALWAYS THE

10:03:45 MEETING SLIDES, TRANSCRIPT AND RECORDING

10:03:47 WILL BE ARCHIVED TO THE CALIFORNIA

10:03:50 DEPARTMENT OF AGING'S CALIFORNIA FOR ALL

10:03:55 AGES EQUITY AND AGING RESOURCE CENTER.

10:03:57 WE ARE SAVING TIME FOR PUBLIC COMMENT, SO

10:04:00 ATTENDEES WHO ARE JOINING BY PHONE CAN

10:04:02 PRESS \*9 ON YOUR DIAL PAD TO JOIN THE  
10:04:05 QUEUE AND I WILL ANNOUNCE THE LAST FOUR  
10:04:07 DIGITS OF YOUR PHONE NUMBER TO HEAR FROM  
10:04:07 YOU.  
10:04:11 IF YOU ARE JOINING US BY ZOOM, YOU CAN USE  
10:04:13 THE RAISE HAND ICON ON YOUR TOOL BAR TO  
10:04:14 JOIN THE QUEUE.  
10:04:17 AND FOR ADDITIONAL PUBLIC COMMENT, IF YOU  
10:04:19 THINK OF THINGS AFTER WE ADJOURN, YOU ARE  
10:04:28 ALWAYS WELCOME TO EMAIL  
10:04:29 ENGAGE@AGING.CA.GOV.  
10:04:31 WE'RE GOING TO PIVOT ON OUR ROLL CALL THIS  
10:04:32 MORNING SO WE HAVE ENOUGH TIME FOR  
10:04:33 DISCUSSION AND FOR PUBLIC COMMENT.  
10:04:35 I KNOW IT'S A PRETTY PACKED AGENDA.  
10:04:38 WE'LL KIND OF SCROLL THROUGH THE SLIDES  
10:04:40 SLOWLY AND RATHER THAN GOING THROUGH AND  
10:04:43 IDENTIFYING ALL OF THE MEMBERS, I WOULD  
10:04:45 INVITE OUR COMMITTEE MEMBERS TO USE THE  
10:04:48 CHAT TO INTRODUCE YOURSELVES, MAYBE JUST  
10:04:50 LIST YOUR NAME AND ORGANIZATION, SAY  
10:04:50 HELLO.  
10:04:55 WE'D LOVE TO HEAR FROM YOU.  
10:04:55 GREAT.  
10:04:56 THANK YOU SO MUCH.  
10:05:01 WITH THAT I WOULD LOVE TO INTRODUCE  
10:05:04 DIRECTOR SUSAN DEMAROIS FROM CALIFORNIA  
10:05:05 DEPARTMENT OF AGE.  
10:05:06 >> THANK YOU.

10:05:07 GOOD MORNING, EVERYBODY.

10:05:10 SO HAPPY TO SEE YOU ALL AND TO BE HERE

10:05:13 WITH YOU TODAY.

10:05:17 WE'VE BEEN THINKING A LOT ABOUT THE

10:05:22 TWO-YEAR ANNIVERSARY OF WHEN CALIFORNIA

10:05:27 CLOSED DOWN AND THIS IS A COMMITTEE THAT I

10:05:29 THINK OF IT AS THE ORIGINAL.

10:05:32 THIS IS THE ORIGINAL STAKEHOLDER GROUP

10:05:34 THAT SPUN OFF FROM THE MASTER PLAN FOR

10:05:36 AGING STAKEHOLDER ADVISORY COMMITTEE.

10:05:41 IT WAS FORMED IN THE EARLY DAYS OF THE MPA

10:05:43 WORK AND IT'S JUST REALLY EXCITING TO BE

10:05:48 HERE WITH YOU ALL THIS TIME LATER AS A

10:05:50 STANDING GROUP, AS A STANDING ADVISORY

10:05:53 COMMITTEE, AND I WANT TO THANK THE WISDOM

10:05:58 OF THOSE WHO FIRST PLANTED THE SEED.

10:06:01 RIGO IS ON HERE WHO FIRST SUGGESTED THERE

10:06:06 BE A STANDALONE EQUITY ADVISORY GROUP AND

10:06:08 I'M SO PROUD IT HAS GROWN.

10:06:11 KEVIN AND OTHERS WHO HAVE JOINED THAT

10:06:13 WE'VE NOW ADDED ADDITIONAL MEMBERS AND

10:06:18 THAT WE'RE MEETING REGULARLY AND I WANT TO

10:06:21 THANK MARIA, SARAH AND AMANDA FOR PLANNING

10:06:22 TODAY'S AGENDA.

10:06:22 IT WAS HARD.

10:06:25 THERE IS A LOT TO COVER IN THESE TWO HOUR

10:06:28 MEETINGS JUST QUARTERLY, AND IT'S HARD TO

10:06:30 PICK AND CHOOSE WHAT TOPICS, BECAUSE THERE

10:06:32 ARE A LOT OF OTHER TOPICS WE COULD BE

10:06:35 TALKING ABOUT TODAY, BUT I'M GLAD THAT  
10:06:37 WE'RE TALKING ABOUT WHAT WE ARE TALKING  
10:06:42 ABOUT TODAY AND I WANTED TO JUST PLANT ONE  
10:06:42 SEED.  
10:06:47 KATHERINE BLAKEMORE IS ONE MEMBER OF  
10:06:52 THE -- SHE CHAIRS THE ALZHEIMER'S ADVISORY  
10:06:52 COMMITTEE.  
10:06:55 LAST WEEK WHEN THEY MET AND DEREK WHO IS  
10:06:57 NOT WITH US TODAY BUT A MEMBER OF THIS  
10:07:00 GROUP TALKED ABOUT SOCIAL ISOLATION AND  
10:07:02 THE IMPACT ON NURSING HOMES AND  
10:07:06 RESIDENTIAL CARE FACILITIES.  
10:07:10 AS CALIFORNIA IS OPENING UP, THIS GROUP  
10:07:12 CAN REALLY CONTINUE TO KEEP A SPOTLIGHT,  
10:07:15 ESPECIALLY ON NURSING HOMES, AND WE CAN  
10:07:19 MOVE TO THE NEXT SLIDE.  
10:07:21 WE'LL GET TO THAT.  
10:07:26 I THINK MY -- I JUST WANTED TO PUT A FLAG  
10:07:32 ON THE NURSING HOME RATE REFORM ISSUE AND  
10:07:34 THE PROPOSAL IN THE GOVERNOR'S JANUARY 10th  
10:07:38 BUDGET AND THE CONVERSATIONS THAT ARE  
10:07:38 ONGOING.  
10:07:41 WE'VE HAD SOME EXPERIENCES IN THE LAST  
10:07:45 COUPLE MONTHS THROUGH THE LONG TERM CARE  
10:07:47 OMBUDSMAN PROGRAM WHERE TWO SIZABLE  
10:07:51 FACILITIES WERE CLOSED BECAUSE OF -- AT  
10:07:54 THE SUGGESTION OF THE FEDERAL GOVERNMENT.  
10:07:55 THERE WE GO.  
10:07:59 THANK YOU.

10:08:00 FOR NONCOMPLIANCE.

10:08:05 A LARGE FACILITY IN BAKERSFIELD.

10:08:08 ANOTHER ONE UP IN THE SONOMA COUNTY AREA.

10:08:14 BOTH OF THEM SERVING SIGNIFICANT MEDICAL

10:08:15 POPULATIONS.

10:08:17 WHAT WE SAW DURING THE PANDEMIC IN TERMS

10:08:20 OF OUTCOMES IN NURSING HOMES, THE

10:08:24 INCIDENTS OF COVID, HOSPITALIZATIONS,

10:08:26 MORTALITY IN NURSING HOMES, I THINK THAT

10:08:31 THIS IS AN ISSUE THAT I WOULD INVITE THIS

10:08:36 WORK GROUP TO FOCUS ON IF NOT TODAY

10:08:39 BETWEEN MEETINGS TO REALLY PUT AN EQUITY

10:08:43 LENS ON NURSING FACILITY FINANCING AND

10:08:47 WHERE CALIFORNIA GOES FROM HERE

10:08:50 POST-PANDEMIC, ESPECIALLY FOR NURSING

10:08:50 HOMES.

10:08:53 SO YOU'VE PROBABLY SEEN IN THE GOVERNOR'S

10:08:56 BUDGET THAT THIS IS ONE OF THE YEARS WHERE

10:09:00 WE WILL BE REEXAMINING THE RATE STRUCTURE

10:09:03 FOR CALIFORNIA'S 1,200 NURSING FACILITIES

10:09:06 AND WE'D WELCOME YOUR THINKING ON THAT.

10:09:09 IT'S A BIT OF AN EXTENSION OF WHAT

10:09:12 KATHERINE AND DEREK RAISED AT THE

10:09:15 ALZHEIMER'S ADVISORY COMMITTEE, BUT

10:09:17 THERE'S NOT -- OF ALL THE STAKEHOLDER

10:09:20 GROUPS, SEVEN OR EIGHT OF THEM THAT ARE IN

10:09:22 EXISTENCE THROUGH THE MASTER PLAN FOR

10:09:22 AGING.

10:09:27 THERE'S NOT ONE THAT'S FOCUSED ON NURSING

10:09:27 HOMES.

10:09:32 AND I WOULD JUST ASK THAT YOU KEEP THIS

10:09:37 SETTING IN MIND AT THE EQUITY WORK GROUP.

10:09:39 THAT'S MY REQUEST TODAY.

10:09:40 AND LET'S SEE.

10:09:42 WHAT IS THE NEXT SLIDE?

10:09:46 AND IN THE SPIRIT OF THAT, WE AS PART OF

10:09:49 YEAR TWO OF THE MASTER PLAN FOR AGING AS

10:09:53 OUR WORK CONTINUES, WE ARE RESUMING YOUR

10:09:56 WEDNESDAY WEBINAR SERIES AND WE HELD OUR

10:10:01 FIRST ONE LAST WEEK.

10:10:02 IT WAS WILDLY SUCCESSFUL.

10:10:03 GREAT PANELIST.

10:10:04 GREAT PLANNING.

10:10:06 WE HAD A FEW HUNDRED PEOPLE JOIN US.

10:10:10 THESE ARE GOING TO BE MORE POLICY FOCUSED

10:10:12 THIS YEAR AND THEY'RE GOING TO LIFT UP THE

10:10:16 RECOMMENDATIONS FROM THE MASTER PLAN AND

10:10:18 ALSO START SEEDING FUTURE RECOMMENDATIONS

10:10:21 FOR THE NEXT TWO YEARS OF THE MASTER PLAN

10:10:21 INITIATIVES.

10:10:24 YOU'RE ALL INVITED TO JOIN US ON APRIL 6th

10:10:28 WHEN WE'LL BE FOCUSING ON THE BIDEN

10:10:29 ADMINISTRATION'S RECENT RECOMMENDATIONS

10:10:33 AROUND NURSING HOMES AS WELL AS THE

10:10:37 STATE'S OPPORTUNITY TO REFORM THE RATES.

10:10:41 SO YOU'RE ALL INVITED FOR THAT.

10:10:43 THAT'S THE END OF MINE.

10:10:46 SO NOW WITH A FULL AGENDA, I WANT TO TURN

10:10:52 IT OVER TO -- SHALL I INTRODUCE THE NEXT

10:10:52 TWO?

10:10:54 >> THAT WOULD BE GREAT, YEAH.

10:10:57 >> NOW WE'RE REALLY HAPPY TO SHARE WITH

10:10:59 YOU ONE OF THE KEY PROGRAMS AT THE

10:11:05 DEPARTMENT OF AGING HI CRAP A HEALTH

10:11:07 INSURANCE COUNSELING PROGRAM AND OUR

10:11:10 EFFORTS TO MODERNIZE THE HICAP PROGRAM.

10:11:14 WE'RE DELIGHTED TO HEAR FROM BRIANNA WHO

10:11:16 JUST DID A REALLY EXTENSIVE RESEARCH

10:11:20 PROJECT ON BEHALF OF THE HICAP PROGRAM AND

10:11:24 MY COLLEAGUE SUTEP WILL BE JOINING US,

10:11:28 TOO, WHO LEADS OUR PROGRAM AT CDA.

10:11:32 TAKE IT AWAY.

10:11:33 >> WONDERFUL.

10:11:36 SUTEP, WOULD YOU LIKE ME TO START?

10:11:36 >> YES.

10:11:39 I CAN DO SORT OF A LITTLE RECAP OF WHERE

10:11:42 THIS -- WHAT YOU'RE PRESENTING ON IS OVER

10:11:47 THE SUMMER OF 2021 WITH SUPPORT OF THE

10:11:53 FOUNDATION, CDA ENGAGED WITH BRIANNA WITH

10:11:55 HI ADVISORY TO LOOK ON THE HOW TO --

10:11:58 OPPORTUNITIES FOR MODERNIZING THE HICAP

10:12:02 PROGRAM IN CALIFORNIA AND LOOKING AT HOW

10:12:05 HICAP IS PERFORMING IN THE STATE AS WELL

10:12:06 AS LEARNING FROM OTHER STATES.

10:12:12 SO I'LL TEE THAT OFF FOR BRIANNA TO JUMP

10:12:12 IN.

10:12:15 >> THANKS, EVERYONE, FOR INVITING ME AND

10:12:15 HAVING ME HERE TODAY.

10:12:22 IT'S NICE TO SEE MANY FAMILIAR FACES.

10:12:24 WE CONDUCTED RESEARCH OVER THE SUMMER.

10:12:26 I THINK IT WAS MAY THROUGH AUGUST.

10:12:30 FOR THOSE OF YOU BEFORE WE GET IN THE

10:12:32 RESEARCH, TO MAKE SURE EVERYONE IS

10:12:36 FAMILIAR, HICAP IS CALIFORNIA'S TERM FOR

10:12:37 THE SHIP PROGRAM.

10:12:39 STATE HEALTH INSURANCE ASSISTANCE PROGRAM

10:12:41 WHICH THE MAIN CHARGE OF SHIP PROGRAMS

10:12:45 NATIONALLY IS TO WILL COUNSEL MEDICARE

10:12:47 BENEFICIARIES ON MEDICARE COVERAGE AS WELL

10:12:48 AS LONG-TERM CARE COVERAGE.

10:12:50 KEEP THAT IN MIND AS WE MAKE OUR WAY

10:12:52 THROUGH THE PRESENTATION AND TALK ABOUT

10:12:54 MEDICAID COVERAGE AND SOME OTHER IMPLEMENT

10:13:03 RE SERVICES THAT WE'LL BE TOUCHING ON.

10:13:05 THE RESEARCH WAS AIMED TO PROVIDE THE

10:13:07 DEPARTMENT OF AGING WITH A MENU OF OPTIONS

10:13:10 ESSENTIALLY AS IT THINKS THROUGH HOW TO

10:13:12 MODERNIZE THE SHIP PROGRAM, THE HICAP

10:13:15 REALLY WITH THE AIM AS DEFINED IN THE

10:13:19 MASTER PLAN ON AGING TO SERVE MORE

10:13:23 BENEFICIARIES AND TO DO SO WHILE IMPROVING

10:13:26 CULTURAL COMPETENCY AND ACCESS, SO WITH AN

10:13:29 EQUITY LENS THROUGHOUT ALL OF IT.

10:13:30 THE CHARGE WAS REALLY WIDE.

10:13:34 IT WAS ANYWHERE FROM SHOULD THE DEPARTMENT

10:13:40 THINK ABOUT SHIFTING OUT TO THE DEPARTMENT



10:13:42 OF INSURANCE ALL THE WAY TO HOW SHOULD  
10:13:44 COUNSELORS BE TRAINED, HOW SHOULD THEY BE  
10:13:45 DEPLOYED ACROSS OUR COMMUNITY.

10:13:47 WE COVERED A LOT IN THIS REPORT AND THERE  
10:13:49 IS A LINK AT THE END.

10:13:51 WE'RE GOING TO JUST COVER A FEW PIECES OF  
10:13:55 IT TODAY.

10:13:58 TO INFORM THE SURVEYS WE DID TWO SURVEYS,  
10:14:00 ONE A BROAD SURVEY OF CALIFORNIA.

10:14:03 RECEIVED 374 RESPONSES TO THAT.

10:14:07 WE HAD A SEPARATE SURVEY THAT WENT TO THE  
10:14:09 AAA, THE AREA AGENCIES ON AGING, THE 26 OF  
10:14:13 THOSE THAT ADMINISTER THE HICAP PROGRAM IN  
10:14:13 CALIFORNIA.

10:14:18 SOME OF THOSE AAAs ADMINISTER THE HICAP  
10:14:22 PROGRAM THEMSELVES AND DELIVER SERVICES TO  
10:14:22 BENEFICIARIES.

10:14:25 OTHER AAAs SUBCONTRACT WITH COMMUNITY  
10:14:27 ORGANIZATIONS IN COMMUNITIES AND THOSE  
10:14:29 PROGRAMS DELIVER THE HICAPS.

10:14:45 A LOT OF GREAT INFORMATION ON OPERATIONAL  
10:14:48 CONSIDERATIONS TO MOD OWNERRIZE THE  
10:14:48 HICAP.

10:14:51 WE ALSO CONDUCTED A NUMBER OF INTERVIEWS  
10:14:52 WITH CALIFORNIA STAKEHOLDERS, NATIONAL  
10:14:54 SUBJECT MATTER EXPERTS, AND THEN CURRENT  
10:14:56 AND FORMER SHIFT DIRECTORS IN OTHER STATES  
10:14:59 TO TRY TO IDENTIFY BEST PRACTICES AND  
10:15:01 OPPORTUNITIES TO CONSIDER IN CALIFORNIA.

10:15:08 LOOKED AT LITERATURE REVIEWS AND DID A  
10:15:10 SWOT ANALYSIS TO IDENTIFY OPPORTUNITIES  
10:15:11 FOR CALIFORNIA.  
10:15:12 WE CAN GO TO THE NEXT SLIDE.  
10:15:17 OVERALL KEY TAKEAWAY IN TERMS OF HOW THE  
10:15:18 HICAP PROGRAM IS DOING IN CALIFORNIA, THE  
10:15:20 RESULTS OF OUR STAKEHOLDER SURVEY FOUND  
10:15:22 THAT GENERALLY SPEAKING, THE MAJORITY OF  
10:15:27 INDIVIDUALS THAT ACCESS HICAP ARE QUITE  
10:15:29 SATISFIED WITH THE SERVICES THEY RECEIVE.  
10:15:33 SO 65% RANKED THE SERVICES THAT THEY  
10:15:35 RECEIVED FOUR OUT OF FIVE OR FIVE OUT OF  
10:15:35 FIVE PERCENT.  
10:15:39 THAT BEING SAID, CALIFORNIA RANKS ON THE  
10:15:42 LOW END OF THE SCALE NATIONALLY IN TERMS  
10:15:46 OF HOW MANY INDIVIDUALS IT SERVES AS A  
10:15:48 PROPORTION OF OVERALL MEDICARE  
10:15:48 BENEFICIARIES.  
10:15:52 SO ON AVERAGE, CALIFORNIA HAS BEEN  
10:15:55 REACHING ABOUT 1 TO 2%, A FEW PERCENT OF  
10:15:58 ITS OVERALL MEDICARE BENEFICIARIES WITH  
10:15:59 ITS HICAP PROGRAM.  
10:16:02 OTHER PROGRAMS NATIONALLY MAY SERVE 5 TO  
10:16:02 10%.  
10:16:05 SO INCREASING THAT IS CERTAINLY A GOAL TO  
10:16:06 KEEP IN MIND.  
10:16:09 I ALSO HIGHLIGHTED HERE FOR THIS GROUP  
10:16:12 SPECIFICALLY THE STRATEGIES THAT THE  
10:16:13 HICAPS MENTIONED.

10:16:17 THEY DEPLOY TO SUPPORT DUAL ELIGIBLE  
10:16:19 INDIVIDUALS, SO INDIVIDUALS ELIGIBLE FOR  
10:16:20 MEDICARE AND MEDICAID.  
10:16:22 WE'LL GET INTO THIS MORE BECAUSE I THINK  
10:16:24 IT'S AN IMPORTANT EQUITY CONSIDERATION  
10:16:26 HERE UNDERSTANDING THAT THESE INDIVIDUALS  
10:16:29 HAVE MULTIPLE CHRONIC CONDITIONS, MULTIPLE  
10:16:31 IADL NEEDS, MANY OF THEM DO.  
10:16:32 SOME ARE COMMUNITY WELL.  
10:16:35 SO REALLY DIVERSE GROUP BUT A REALLY  
10:16:40 CRITICAL GROUP WHEN YOU'RE  
10:16:43 THINKING ABOUT THE COMPLEXITY OF THE  
10:16:44 MEDICARE COVERAGE.  
10:16:48 HICAPS DEPLOY DIFFERENT APPROACHES TO  
10:16:50 SERVING THESE BEN FISHERS.  
10:16:52 THEY HAVE DIFFERENT STRUCTURAL COMPONENTS  
10:16:55 THEY HAVE DEALT OUT TO TRAIN BEN FISHERS  
10:16:56 AND TAKE DIFFERENT APPROACHES.  
10:16:58 LOOKING ACROSS THE STATE, IF YOU'RE IN A  
10:17:00 DIFFERENT REGION, YOU MIGHT GET A  
10:17:02 DIFFERENT TYPE OF SERVICE.  
10:17:04 IF YOU'RE A DUAL ELIGIBLE BENEFICIARY.  
10:17:06 WE'LL GET INTO THAT MORE IN A MINUTE.  
10:17:08 I THINK WE CAN GO TO THE NEXT SLIDE,  
10:17:08 PLEASE.  
10:17:11 THIS GOES A LITTLE BIT MORE INTO DETAIL ON  
10:17:15 SOME OF THESE APPROACHES.  
10:17:18 THE KEY POINT IS NOT ALL OF THESE SUPPORTS  
10:17:20 AND ALL OF THESE ORGANIZATIONAL DESIGN

10:17:21 ELEMENTS ARE UNIFORM ACROSS THE STATE.

10:17:23 SO DIFFERENT HICAPS TAKE DIFFERENT

10:17:26 APPROACHES HERE TO COLLABORATING WITH

10:17:30 OTHER ORGANIZATIONS FOR REFERRALS TO

10:17:34 DELIVERING DIFFERENT MATERIALS TO

10:17:39 COUNSELING ON WHAT IT MEANS TO BE IN A

10:17:41 CONNECT PROGRAM VERSUS A PACE.

10:17:44 THAT IS A LOT OF ACRONYMS, I KNOW.

10:17:48 WE GET INTO THE IMPORTANCE OF CREATING A

10:17:50 ROBUST INFRASTRUCTURE FOR COUNSELING DUAL

10:17:53 ELIGIBLES IN A LITTLE BIT, BUT WANTED TO

10:17:56 TAKE A MOMENT TO LEVEL SET HERE THAT

10:17:58 COUNSELING, REFERRING, EDUCATING,

10:17:59 SCREENING HAPPENS.

10:18:00 IT JUST HAPPENS DIFFERENTLY.

10:18:03 THERE ARE POCKETS IN PARTICULAR AROUND THE

10:18:09 SEVEN COUNTIES THAT HAVE CAL MEDI

10:18:09 CONNECT.

10:18:12 THOSE SEVEN COUNTIES HAVE VERY ROBUST

10:18:15 HICAP PROGRAMS DESIGNED TO SERVE DUAL

10:18:16 ELIGIBLE INDIVIDUALS.

10:18:18 THERE'S POCKETS OF BEST PRACTICES THAT THE

10:18:19 STATE CAN LEARN FROM.

10:18:21 AND THEN I THINK WE CAN GO TO THE NEXT

10:18:22 SLIDE, PLEASE.

10:18:24 HERE ARE A FEW MORE KEY FINDINGS THAT I

10:18:27 WANTED TO CALL OUT FOR THIS GROUP,

10:18:29 SPECIFICALLY RELATED TO APPROACHES THAT

10:18:30 HICAPS TAKE TO PROVIDE ACCESSIBILITY FOR

10:18:33 PEOPLE WITH LIMITED ENGLISH PROFICIENCY AS  
10:18:35 WELL AS INDIVIDUALS WITH DISABILITIES.  
10:18:42 AND AGAIN, IT VARIED ACROSS PROGRAMS.  
10:18:45 WHAT WE DID FROM THE SURVEY OF  
10:18:48 BENEFICIARIES, YOU'LL REMEMBER IT WAS 53%  
10:18:51 RANKED THEIR EXPERIENCE WITH HICAP OVERALL  
10:18:52 VERY FAVORABLY.  
10:18:56 WHEN WE ASKED ABOUT EXPERIENCE WITH  
10:18:59 ACCOMMODATIONS FOR DISABILITY OR FOR LEP,  
10:19:01 WE LEARNED THAT NUMBER WENT DOWN  
10:19:04 SIGNIFICANTLY SO THAT 32% OF FOLKS WERE  
10:19:07 SATISFIED WITH THE ACCOMMODATIONS THAT  
10:19:07 THEY RECEIVED.  
10:19:10 SO THERE IS AN OPPORTUNITY THERE TO REALLY  
10:19:13 MAKE THE APPROACHES MORE ROBUST AND  
10:19:15 APPROACHES MORE UNIFORM I THINK TO  
10:19:17 PROVIDING ACCESSIBILITY FOR INDIVIDUALS.  
10:19:20 OVERALL IN TERMS OF THESE APPROACHES  
10:19:23 LISTED OUT HERE FOR INDIVIDUALS WITH  
10:19:26 LIMITED ENGLISH PROFICIENCY, LEVERAGING  
10:19:28 BILINGUAL COUNSELORS WAS THE MOST COMMON  
10:19:30 RESPONSE THAT WE HEARD ACROSS THE  
10:19:35 HICAPS, BUT WE ALSO HEARD  
10:19:37 ABILITY TO DELIVER COMPETITIVE WAGES TO  
10:19:40 RECRUIT AND MAINTAIN COUNSELORS WAS A BIG  
10:19:41 CHALLENGE TO BE ABLE TO DELIVER THOSE  
10:19:41 SERVICES.  
10:19:43 A FEW OTHER APPROACHES, TECHNOLOGY IS  
10:19:46 GOING TO BE USED, VARIOUS DIFFERENT

10:19:47 MATERIALS HAVE BEEN DEVELOPED TO TRY TO  
10:19:49 ACCOMMODATE INDIVIDUALS.  
10:19:51 AND THEN SAME WITH -- SO FOR THE  
10:19:54 ACCESSIBILITY FOR PEOPLE WITH  
10:19:57 DISABILITIES, I THINK THE FIRST BULLET  
10:20:00 HERE REALLY ARE KIND OF STANDARD  
10:20:01 ACCESSIBILITY BASICS THAT SHOULD BE ACROSS  
10:20:04 THE BOARD AND OFTEN ARE IN MOST CASES IN  
10:20:09 VARYING FORMS, AND THEN A COUPLE OF THE  
10:20:10 OTHER MODES THAT DIFFERENT PROGRAMS TAKE  
10:20:13 IN TERMS OF ENGAGEMENT WITH GLAD,  
10:20:15 ENGAGEMENT WITH DIFFERENT PARTNERS TO TRY  
10:20:17 TO REFORM AND MODERNIZE THEIR PROGRAM --  
10:20:19 EXCUSE ME, THEIR APPROACHES TO SERVE  
10:20:24 DIFFERENT POPULATIONS.  
10:20:26 HERE WE HAVE THE TEN RECOMMENDATIONS.  
10:20:29 THERE IS A LOT OF DETAIL, AGAIN, IN THE  
10:20:32 FULL REPORT ON EACH OF THESE  
10:20:33 RECOMMENDATIONS.  
10:20:36 I'M NOT GOING TO WALK THROUGH IN DETAIL.  
10:20:38 MANY OF THESE ARE OPERATIONAL IN NATURE,  
10:20:40 SO THINKING THROUGH I THINK THREE OF THESE  
10:20:42 ARE THINKING THROUGH THE REBRANDING  
10:20:45 POTENTIALLY OF HICAP TO MAKE THE NAME MORE  
10:20:45 UNDERSTANDABLE.  
10:20:48 LOOKING AT A STATEWIDE MARKETING  
10:20:48 CAMPAIGN.  
10:20:51 REDESIGNING THE WEBSITE TO MAKE IT MORE  
10:20:51 ACCESSIBLE.

10:20:55 THERE'S ALSO A FEW HERE ABOUT INTERNAL  
10:20:59 OPERATIONS FROM CDA AND THE DATA SHARING  
10:21:02 SYSTEM, SO SHARP DATA SYSTEM.  
10:21:07 NUMBER SIX IS THE RESOURCE THAT CDA HICAPS  
10:21:09 AND AAAs USE FOR CASE MANAGEMENT OF  
10:21:12 HICAP SERVICES AS WELL AS REPORTING,  
10:21:15 REVAMPING THAT TO ALLOW IT TO CAPTURE KEY  
10:21:17 METRICS, PARTICULARLY AROUND EQUITY IS  
10:21:18 REALLY IMPORTANT IN ORDER FOR THE  
10:21:21 DEPARTMENT TO BE ABLE TO MEASURE ITS  
10:21:23 IMPACT IN HOW ITS DOING ALONG ITS GOALS.  
10:21:27 I WANT TO TALK MORE SPECIFICALLY ABOUT A  
10:21:29 STRATEGIC ROAD MAP FOR SUPPORTING DUAL  
10:21:33 ELIGIBLE INDIVIDUALS AS WELL AS TOUCH ON  
10:21:36 THE RELATIONSHIPS AND FEEDBACK  
10:21:37 RECOMMENDATIONS AS WELL.  
10:21:39 BUT BEFORE WE DO THAT, I DO WANT TO SPEND  
10:21:42 TIME ON THIS OVERALL DEVELOPING A  
10:21:44 STRATEGIC ROAD MAP FOR HICAP, WHICH IS THE  
10:21:46 NUMBER ONE RECOMMENDATION HERE.  
10:21:46 SORRY.  
10:21:49 YOU CAN STAY ON THAT SLIDE FOR ONE MORE  
10:21:49 MINUTE.  
10:21:49 THANK YOU.  
10:21:52 THE FIRST RECOMMENDATION HERE IS TO  
10:21:54 DEVELOP BASICALLY AN UMBRELLA STRATEGIC  
10:21:56 ROAD MAP FOR HICAP.  
10:22:00 THIS COULD BE USING VARIOUS  
10:22:01 RECOMMENDATIONS THAT YOU SEE HERE AND

10:22:05 REALLY THE GOAL HERE WOULD BE FOR CDA TO  
10:22:07 DEFINE WHAT ARE THE EQUITY GOALS, WHAT ARE  
10:22:12 THE MODERNIZATION GOALS FOR THE  
10:22:14 HICAP PROGRAM AND WHAT IT NEEDS TO PUT  
10:22:16 TOGETHER TO ACHIEVE THOSE GOALS.  
10:22:18 SOME OF THAT COULD BE RECOMMENDATIONS.  
10:22:20 IT COULD BE OTHER CONSIDERATIONS THAT IT  
10:22:23 LEARNS AS IT'S UNDERTAKING ITS STAKEHOLDER  
10:22:25 ENGAGEMENT AND OTHER EFFORTS.  
10:22:27 SO I WILL SAY THAT AND THEN WE CAN GO TO  
10:22:31 THE NEXT SLIDE AND TALK MORE ABOUT DUALS.  
10:22:35 SO THE RECOMMENDATION HERE WAS TO DEVELOP  
10:22:38 A STRATEGIC ROAD MAP SPECIFICALLY FOR DUAL  
10:22:40 ELIGIBLES UNDERSTANDING THAT  
10:22:46 THIS POPULATION IS UNIQUE AND THE  
10:22:48 MEDICARE/MEDICAID PROGRAM COMPLEXITY IF  
10:22:50 YOU ARE DUAL ELIGIBLE AND NAVIGATING THAT  
10:22:52 COMPLEXITY IS A REAL CHALLENGE.  
10:22:55 AGAIN, HICAPS ARE INTENDED TO SERVE AND  
10:22:58 COUNSEL ON MEDICARE ELIGIBILITY -- EXCUSE  
10:23:01 ME, MEDICARE COVERAGE AND LONG-TERM CARE  
10:23:03 COVERAGE AND WHAT WE HEARD WHEN WE WERE  
10:23:05 TALKING BOTH INTERNALLY TO FOLKS IN  
10:23:08 CALIFORNIA AS WELL AS TO NATIONAL  
10:23:10 STAKEHOLDERS AND OTHER SHIP PROGRAMS IS  
10:23:12 THAT THIS IS NOT UNIQUE TO CALIFORNIA.  
10:23:16 THERE'S NOT A CLEAR UNDERSTANDING OF WHERE  
10:23:19 SHIP SHOULD START AND STOP IN TERMS OF  
10:23:22 SETTING THEIR EXPECTATIONS FOR COUNSELORS



10:23:24 OF HOW FAR THEY SHOULD GO ON COUNSELING  
10:23:26 DUAL ELIGIBLE BENEFICIARIES.  
10:23:31 WHEN YOU ASK A SHIP -- DO  
10:23:34 YOU COUNSEL ON MEDICAID, IT MIGHT MEAN TO  
10:23:37 THEM MEDICAID ELIGIBILITY.  
10:23:39 BUT WHAT WE MIGHT WANT THEM TO MEAN OR  
10:23:42 WHAT WE MIGHT THINK IT SHOULD MEAN IS  
10:23:44 COUNSELING ON THE VARIETY OF DIFFERENT  
10:23:47 INTEGRATED CARE MODELS OUT THERE FOR  
10:23:47 BENEFICIARIES, RIGHT?  
10:23:50 SO FOR A COMMUNITY WELL DUAL, THEY MIGHT  
10:23:54 BENEFIT THE MOST FROM AN OVER THE COUNTER  
10:23:56 BENEFIT, OTC BENEFIT.  
10:23:58 THAT MIGHT BE WHAT'S MOST VALUABLE FOR  
10:24:01 THEM TO GO TO THE PHARMACY AND HAVE A  
10:24:03 QUARTERLY STIPEND.  
10:24:05 FOR AN INDIVIDUAL WITH MULTIPLE FUNCTIONAL  
10:24:09 NEEDS OR BEHAVIORAL HEALTH NEEDS, HAVING A  
10:24:11 CARE MANAGER THROUGH AN INTEGRATED DUAL  
10:24:14 ELIGIBLE SPECIAL NEEDS PLAN, THAT MIGHT BE  
10:24:16 MOST VALUABLE FOR THEM.  
10:24:20 SO CREATING AN INFRASTRUCTURE THAT ENABLES  
10:24:24 SHIPS TO COUNSEL INDIVIDUALS IN AN  
10:24:27 INDIVIDUALIZED WAY TO ALLOW THEM TO ACCESS  
10:24:30 THE COVERAGE THAT'S BEST FOR THEM IS KIND  
10:24:34 OF THE GOLD STANDARD OF WHAT A COUNSELING  
10:24:38 ON PROGRAM WOULD DO FOR DUAL ELIGIBLES.  
10:24:41 BUT DEFINING WHERE SHIPS STOPS ON THAT IS  
10:24:44 REALLY THE KEY HERE AND I THINK THAT'S THE

10:24:49 FIRST PIECE AND PROBABLY THE MOST  
10:24:53 CRITICAL TO THIS PLAN IS WHERE DOES THE  
10:24:55 CALIFORNIA DEPARTMENT OF AGING RECOGNIZE  
10:24:57 THAT WHEN SHIPS CHARGE ON MEDICARE AND  
10:24:58 LONG-TERM CARE.  
10:25:01 THERE ARE VERY PRACTICAL CONCERNS AROUND  
10:25:03 TRAINING COUNSELORS WHO ARE ALREADY  
10:25:06 LIMITED IN TERMS OF ACCESSING THOSE  
10:25:08 COUNSELORS WITH THE SKILLS AND  
10:25:11 CAPABILITIES AND THEIR BOND HERE IS  
10:25:13 MAINLY, SO HOW DO YOU DEFINE THAT?  
10:25:15 HOW DO YOU DEVELOP A PROGRAM THAT CAN  
10:25:19 DELIVER ON A MORE ROBUST COUNSELING  
10:25:22 PROGRAM AND MAYBE THAT'S HAVING, YOU KNOW,  
10:25:25 A SUBSET OF COUNSELORS WHO HAVE MORE  
10:25:27 ROBUST TRAINING AND KIND OF A SPECIALTY  
10:25:29 WORKSHOP TO SEND FOLKS TO.  
10:25:32 DEFINING THAT IS FIRST AND THEN HOW WE GET  
10:25:35 THERE WOULD BE KIND OF THE REST OF THIS  
10:25:38 STRATEGIC ROAD MAP WHICH I'LL TOUCH  
10:25:40 LIGHTLY ON A FEW OF THESE.  
10:25:42 THE NEXT STEP ALONG THE LINE WOULD BE  
10:25:44 NAMING INTEGRATED CARE MODEL.  
10:25:45 THIS CONSIDERATION IS MORE FOR THE  
10:25:48 DEPARTMENT OF HEALTH CARE SERVICES.  
10:25:51 WHAT WE'VE LEARNED IS FOR DUAL ELIGIBLE  
10:26:01 PROGRAMS, HAVING A NAME SUCH ADD CAL-  
10:26:03 MEDI -- AS OPPOSED TO TO HAVING A PROGRAM  
10:26:07 IS MORE CHALLENGING TO COMMUNICATE WITH

10:26:07 BENEFICIARIES.

10:26:09 ENGAGING OTHER DEPARTMENTS WHICH WE'LL

10:26:11 TALK ABOUT MORE IS CRITICAL TO THE

10:26:11 PROCESS.

10:26:14 DEVELOPING THOSE TOOLS, WHAT THOSE TOOLS

10:26:16 LOOK LIKE TO HELP COUNSELORS AS WELL AS TO

10:26:19 HELP THE SHIP PROGRAM MANAGERS ACHIEVE THE

10:26:22 GOALING THAT THE DEPARTMENT LAYS OUT,

10:26:25 ONGOING ENGAGEMENT WITH ADVOCATES, WITH

10:26:27 BENEFICIARIES, WITH THE SHIP COUNSELORS

10:26:29 THEMSELVES, AND THEN MAKING SURE THAT THE

10:26:33 PROGRAMS ARE UP TO DATE MAY LEAD TO

10:26:34 COORDINATION WITH THE DEPARTMENT OF HEALTH

10:26:39 CARE SERVICES AND CMS AND UPDATES ON

10:26:40 INTEGRATED CARE, PROGRAM DEVELOPMENTS ON

10:26:46 AN ONGOING BASIS, ESPECIALLY AS CAL-MEDI

10:26:47 ROLLS OUT WILL BE CRITICAL.

10:26:48 THAT WAS A LOT.

10:26:49 I THINK THAT'S EVERYONE ON THIS ONE.

10:26:53 WE CAN GO TO THE NEXT SLIDE, PLEASE.

10:26:55 AND THEN THE LAST ONE I WANTED TO CALL OUT

10:26:58 IS REALLY JUST AN EMPHASIS ON

10:27:00 COLLABORATION AND UNDERSTANDING A LOT OF

10:27:02 THIS IS ALREADY BEING DONE TODAY AT THE

10:27:04 CALIFORNIA DEPARTMENT OF AGING IS

10:27:06 FANTASTIC AND HAS A LOT OF STRONG

10:27:09 RELATIONSHIPS THAT THEY MEET WITH FOLKS

10:27:09 REGULARLY.

10:27:13 BUT I JUST WANT TO EMPHASIZE THAT THIS IS

10:27:17 AN IMPORTANT PIECE OF THE PUZZLE AND DOING  
10:27:19 AS A PART OF THE MODERNIZATION PROGRAM,  
10:27:22 DOING THIS SYSTEMIC -- SYSTEMATIC, EXCUSE  
10:27:25 ME, REVIEW OF WHERE THE DEPARTMENT OF  
10:27:28 AGING IS ALREADY DOING THESE THINGS AND  
10:27:30 WHERE THEIR OPPORTUNITIES EITHER AT THE  
10:27:32 DEPARTMENT LEVEL OR ACROSS THE SHIP  
10:27:35 PROGRAMS, THE HICAP PROGRAMS THEMSELVES TO  
10:27:37 MAKE MORE CONNECTIONS WITH OTHER RELATED  
10:27:37 ENTITIES.

10:27:40 FOR INSTANCE, IN IOWA WE KNOW THAT THEY'VE  
10:27:45 DEVELOPED A REALLY STRONG COORDINATION  
10:27:47 PROGRAM WITH THEIR HIV AIDS PROGRAMS.  
10:27:50 SO IS THAT AN OPPORTUNITY AND CAN MAYBE  
10:27:54 EDUCATING SHIPS AND CAPS ACROSS THE STATE  
10:27:57 OF CALIFORNIA ABOUT CREATING SUCH  
10:27:57 OPPORTUNITIES.

10:27:59 SO AGAIN, A LOT OF THIS IS HAPPENING, BUT  
10:28:01 I WANTED TO EMPHASIZE THAT THERE ARE  
10:28:03 DIFFERENT STRATEGIES HERE TO REALLY  
10:28:06 MAXIMIZE HICAP THROUGH THESE -- THROUGH  
10:28:09 COORDINATION WITH OTHER ENTITIES AND  
10:28:10 DEPARTMENTS.

10:28:13 WITH THAT, THIS IS THE LINK TO THE  
10:28:13 REPORT.

10:28:15 I'M HAPPY TO GO BACK AND TALK ABOUT ANY OF  
10:28:19 THE RECOMMENDATIONS WE COVERED OR OTHERS  
10:28:27 THAT I DIDN'T GET INTO DETAIL ON.  
10:28:30 THERE IS MY CONTACT INFORMATION.

10:28:31 I DON'T KNOW IF YOU'D LIKE ME TO -- I SEE  
10:28:33 THERE ARE A FEW QUESTIONS THAT CAME IN  
10:28:36 THROUGH THE CHAT.  
10:28:38 IF YOU WANT ME TO START READING THOSE.  
10:28:41 >> YES.  
10:28:43 THANK YOU FOR THE PRESENTATION AND FOR ALL  
10:28:45 THE WORK THAT YOU'VE DONE IN THIS EFFORT.  
10:28:49 YES, OUR NEXT SECTION HERE IS I THINK WE  
10:28:53 HAVE TIME TO RESPOND TO QUESTIONS AND I'LL  
10:28:56 SAVE SOME TIME FOR MYSELF TO SHARE SORT OF  
10:29:00 WHAT CDA IS UP TO POST THESE  
10:29:01 RECOMMENDATIONS AND PIECES OF WORK IN  
10:29:02 PLAY.  
10:29:05 BUT MAYBE WE CAN TACKLE SOME OF THESE  
10:29:10 QUESTIONS FIRST.  
10:29:19 AND HAVE TIME FOR MORE.  
10:29:21 I SAW MARTY'S HAND UP FIRST.  
10:29:22 >> SURE.  
10:29:23 THANK YOU.  
10:29:28 I REALLY APPRECIATE THE PRESENTATION AND  
10:29:34 THE EMPHASIS ON THE DUALS FOR  
10:29:34 HICAP.  
10:29:35 I KNOW MOST OF THE PEOPLE ON THE GROUP  
10:29:38 KNOW I'M A BIG FAN OF INTEGRATED CARE SO I  
10:29:40 LIKE THAT EMPHASIS AS WELL.  
10:29:41 WHAT I WANTED TO CALL OUT WAS ONE  
10:29:42 ADDITIONAL ISSUE.  
10:29:45 I WORKED IN A HEALTH CENTER FOR MANY, MANY  
10:29:47 YEARS WHERE WE WERE INTERESTED IN

10:29:50 QUALIFYING PEOPLE FOR MEDI CAL WHO WERE  
10:29:54 ALREADY ON MEDICARE AND THE PORTION --  
10:29:56 THERE WAS A MUCH SMALLER PORTION OF LOW  
10:29:59 INCOME OLDER PEOPLE THAT WERE ON MEDI CAL  
10:30:01 THAN WERE ELIGIBLE FOR MEDI CAL.  
10:30:03 I ASSUME THAT'S STILL THE CASE ALTHOUGH I  
10:30:05 HAVEN'T SEEN THE LATEST DATA.  
10:30:09 ONE OF THE BIGGEST MOST PROFOUND IMPACTS  
10:30:12 OF GETTING HICAP TO WORK WITH MEDI CAL IS  
10:30:15 THE INCOME EFFECT ON PEOPLE THAT ARE  
10:30:17 POTENTIALLY DUALS.  
10:30:21 SO OBVIOUSLY YOUR MEDICARE PART B PREMIUM,  
10:30:25 PART B PREMIUM, CO-PAYS AND DEDUCTIBLES,  
10:30:28 THOSE ALL PUT DOLLARS IN YOUR POCKET  
10:30:29 IMMEDIATELY.  
10:30:32 IF YOU HAVEN'T BEEN ON MEDI CAL BUT YOU'RE  
10:30:36 ELIGIBLE AND ELIGIBLE TO BE A DUAL.  
10:30:39 I THINK IT'S WORTH EMPHASIZING THAT ALMOST  
10:30:41 BEFORE WE GET TO THE INTEGRATED MODELS, SO  
10:30:47 YOU CAN HELP PEOPLE, THE HICAP PROGRAM IN  
10:30:50 TERMS OF GETTING PEOPLE ON MEDI CAL AND  
10:30:51 COUNSELING THEM THROUGH THAT PROCESS CAN  
10:30:55 DO AN AMAZING AMOUNT OF GOOD IN THE EQUITY  
10:30:57 REALM, LOW INCOME, BLACK AND BROWN  
10:31:02 COMMUNITIES IN CALIFORNIA.  
10:31:02 THAT'S MY COMMENT.  
10:31:05 I JUST WANT TO CALL THAT SIDE OF THE DUAL  
10:31:06 PROGRAM OUT.  
10:31:08 >> MARTY, THAT'S FANTASTIC AND THANK YOU

10:31:09 FOR THAT.

10:31:09 SORRY.

10:31:12 I SAW YOU GETTING ON, BUT A QUICK REACTION

10:31:15 TO THAT.

10:31:17 I THINK THAT'S TOTALLY RIGHT.

10:31:20 WHEN I THINK OF WHAT THE OTHER DIFFERENT

10:31:21 BUCKETS COULD BE DEPENDING ON THE COHORT

10:31:25 OF DUAL ELIGIBLE BENEFICIARY, YOU HAVE THE

10:31:27 INDIVIDUALS THAT MIGHT BENEFIT THE MOST

10:31:28 FROM SUPPLEMENTAL BENEFITS.

10:31:31 YOU HAVE INDIVIDUALS WHO MIGHT BENEFIT THE

10:31:35 MOST FROM KIND OF ZERO PREMIUM, ZERO

10:31:38 CO-PAY AND ENSURING THEY HAVE THOSE

10:31:39 SUBSIDIES AND ARE MAXIMIZING THEM

10:31:41 DEPENDING UPON THE COVERAGE OPTION THAT

10:31:49 THEY CHOOSE AND THEY ELECT.

10:31:51 ALL OF THOSE SHOULD BE CONSIDERED WHEN

10:31:53 COUNSELING ANYONE WHO IS A DUAL.

10:31:56 >> THANK YOU.

10:31:58 >> THANK YOU, BRIANNA.

10:31:59 THANK YOU, MARTY.

10:32:03 GOING TO CATHERINE.

10:32:04 >> THANKS.

10:32:07 I PUT A LITTLE BIT OF THIS IN THE CHAT AND

10:32:09 THEN BRIANNA COVERED IT AT THE END OF HER

10:32:11 PRESENTATION WHICH I ALSO THOUGHT WAS

10:32:11 REALLY EXCELLENT.

10:32:14 VERY EXCITING WORK TO KIND OF MAKE SYSTEMS

10:32:15 WORK BETTER.

10:32:17 SO TWO COMMENTS.

10:32:21 ONE, THE HEALTH CONSUMER ALLIANCE REALLY

10:32:24 DOES A LOT OF THIS WORK ALREADY AROUND

10:32:28 GETTING PEOPLE ELIGIBLE AND IT SEEMS THAT

10:32:30 I THINK SYSTEMS HAVE TO WORK REALLY --

10:32:33 IT'S SORT OF ALMOST BEYOND COORDINATION,

10:32:36 BUT SORT OF WHO'S BEST SITUATED TO PROVIDE

10:32:39 ADVICE ABOUT WHICH OF THESE THINGS TO MOST

10:32:41 EFFECTIVELY USE THE RESOURCES THAT ARE

10:32:42 AVAILABLE, RIGHT?

10:32:45 AND SO I WOULD ENCOURAGE REALLY TAKING A

10:32:48 DEEPER DIVE INTO WHAT THE CONSUMER HEALTH

10:32:50 ALLIANCE DOES, WHICH IS A STATEWIDE

10:32:53 PROGRAM FUNDED BY THE STATE TO PROVIDE

10:32:55 ADVICE ON KIND OF ANY KIND OF HEALTHCARE

10:32:57 WITHOUT REGARD TO INCOME AND FIGURING OUT

10:33:00 WHAT THEY COULD OFFER THAT MIGHT

10:33:03 SUPPLEMENT HICAP PROGRAMS RATHER THAN

10:33:04 REINVENTING EVERYTHING AT THE HICAP

10:33:04 LEVEL.

10:33:09 AND THEN THE SECOND PIECE, JUST TO LET YOU

10:33:12 KNOW, I AM ON THE CALIFORNIA ACCESS TO

10:33:14 JUSTICE COMMISSION AND WE HAVE A PROJECT

10:33:18 WITH THE STATE BAR TO HELP IDENTIFY LEGAL

10:33:21 PROBLEMS THAT PEOPLE MAY NOT KNOW THAT

10:33:23 THEY HAVE AND ARE GOING TO BE DOING SOME

10:33:26 WORK TO SORT OF FIGURE OUT WHAT THE RIGHT

10:33:29 MESSAGING IS TO GET PEOPLE TO BE ABLE TO

10:33:32 ACCESS ADVOCACY LAWYERS THAT CAN HELP



10:33:34 THEMSELVES, THAT LEGAL PROBLEM, AND ONE OF  
10:33:37 THE STRONG RECOMMENDATIONS IS  
10:33:41 THAT FOCUS ON ACCESS SO PEOPLE CAN HELP  
10:33:43 WITH HEALTHCARE AND TRYING TO FIGURE OUT  
10:33:44 THE MESSAGING OF THAT.  
10:33:47 IT SEEMS LIKE YOUR WORK AROUND MESSAGING  
10:33:49 AND REBRANDING CONNECTS TO THIS PROJECT  
10:33:51 THAT WE'RE DOING, SO I WOULD LOVE TO  
10:33:54 CONNECT YOU WITH THE PEOPLE THAT ARE DOING  
10:33:57 THE WORK AT THE ACCESS TO JUSTICE LEVEL  
10:34:00 AROUND -- WE'RE REALLY GOING TO BE TESTING  
10:34:02 MESSAGES, LIKE WHAT WORDS NEED TO BE USED  
10:34:06 TO HELP PEOPLE UNDERSTAND THEY HAVE A  
10:34:08 HEALTH-RELATED PROBLEM, I MEAN A HEALTH  
10:34:10 INSURANCE RELATED PROBLEM THAT SOMEBODY  
10:34:11 COULD HELP THEM WITH.  
10:34:12 TESTING THOSE MESSAGES.  
10:34:16 SEEING HOW MANY TIMES PEOPLE CAN LINK TO  
10:34:17 CURRENT FORMS OF ASSISTANCE AND SO FORTH.  
10:34:20 I'LL JUST PLANT A SEED WITH THAT AND MAYBE  
10:34:22 WE CAN TALK SEPARATELY ABOUT THAT.  
10:34:27 >> THANK YOU, CATHERINE.  
10:34:32 WE ARE LOOKING AT HOW DO WE  
10:34:32 BRAND.  
10:34:35 BEFORE WE REBAND, SORT OF THE MARKET  
10:34:35 RESEARCH.  
10:34:38 WHAT ARE THE PERCEPTIONS OF CONSUMERS ON  
10:34:40 NAVIGATING TO GET THE RESOURCES,  
10:34:42 NAVIGATING MEDICARE AND MEDICAID AND WHAT

10:34:44 IS SORT OF THE NAMING THE MARKETING THAT

10:34:45 WILL BE REQUIRED TO DO THAT.

10:34:48 SO WE ARE THINKING THROUGH THAT, BUT WOULD

10:34:51 LOVE TO TOUCH WITH YOU ON SORT OF WHAT

10:34:53 YOU'RE DOING AND INFORM OUR WORK AS WELL.

10:34:53 >> PERFECT.

10:34:54 THANK YOU.

10:35:02 >> THANK YOU.

10:35:04 WERE THERE OTHER QUESTIONS?

10:35:07 KEVIN.

10:35:09 >> THANK YOU FOR THIS GREAT INFORMATION

10:35:12 AND EXCITING TO SEE SOME REAL

10:35:13 OPPORTUNITIES HERE.

10:35:15 I WONDER IF YOU CAN SPEAK A LITTLE BIT

10:35:17 MORE TO IN PARTICULAR LOOKING AT HICAP

10:35:21 FROM THE EQUITY PERSPECTIVE, BOTH WHAT

10:35:22 WE'VE LEARNED.

10:35:24 YOU TOUCHED ON SOME OF THE STRATEGIES THAT

10:35:28 HICAPS EMPLOY, BUT WHAT ARE WE LEARNING

10:35:30 ABOUT HOW WELL HICAPS ARE SERVING

10:35:33 COMMUNITIES OF COLOR, LEP COMMUNITIES,

10:35:37 LGBTQ COMMUNITIES, PEOPLE WITH

10:35:37 DISABILITIES.

10:35:40 LIKE, DO WE HAVE DATA ON SOME OF THAT.

10:35:42 AS WE CONSIDER REFORMS, ARE THERE

10:35:44 RECOMMENDATIONS SPECIFICALLY TO THINGS

10:35:47 THAT COULD BE DONE DIFFERENTLY FROM DATA

10:35:49 COLLECTION TO ACTUAL PROGRAM DESIGN AND

10:35:53 SERVICE DELIVERY SO THAT WE REALLY ARE

10:35:55 BUILDING THE SYSTEM WITH EQUITY AT THE  
10:36:03 CENTER OF WHAT WE DO DIFFERENTLY MOVING  
10:36:04 FORWARD.

10:36:22 LOOK ADD WE LOOKED AT THIS ISSUE AND  
10:36:24 IT GOES BACK TO THE OPERATIONAL PIECE OF  
10:36:27 THE SHARP SYSTEM WHICH IS WHAT THEY  
10:36:29 LEVERAGE FOR THE COUNSELORS TO PUT IN  
10:36:31 INFORMATION WHENEVER THEY COUNSEL AWE  
10:36:31 BENEFICIARY.

10:36:36 IT GETS REPORTED BACK TO -- THEN TO CDA,  
10:36:37 THEN TO THE FEDS.

10:36:41 AND THAT DATABASE, THAT SYSTEM NEEDS TO BE  
10:36:46 UPDATED IN ORDER  
10:36:48 FOR INFORMATION TO BE CAPTURED THAT WOULD  
10:36:52 ALLOW THEM TO REALLY INCLUDE MEASURES THAT  
10:36:57 WOULD ALLOW FOR AN EVALUATION OF ANY REAL  
10:36:58 VALUE AROUND EQUITY ISSUES.

10:37:03 SO THAT WAS A KEY PIECE OF THAT  
10:37:04 RECOMMENDATION, THAT THAT INFRASTRUCTURE  
10:37:07 NEEDS TO BE IN PLACE IN ORDER FOR THE  
10:37:09 MEASUREMENT TO OCCUR BECAUSE TODAY IT'S  
10:37:11 VERY HIGH LEVEL IN TERMS OF KIND OF THE  
10:37:13 TOUCHES THAT WERE GIVEN.

10:37:17 I THINK THERE ARE SOME HIGH LEVEL  
10:37:19 DEMOGRAPHIC INFORMATION BEING CAPTURED,  
10:37:22 BUT BEING ABLE TO REPORT THAT BACK AND  
10:37:23 SYNTHESIZE THAT, THAT REPORTING STRUCTURE  
10:37:24 SYSTEM ISN'T IN PLACE YET.

10:37:26 WHEN YOU LOOKED NATIONALLY, IT WAS

10:37:29 SOMETHING THAT I ASKED FOLKS AND OTHER  
10:37:32 STATES AND OTHER PROGRAMS WERE REALLY  
10:37:35 INTERESTED IN HOW THEY COULD BETTER  
10:37:37 CAPTURE ISSUES OF EQUITY IN TERMS OF THEIR  
10:37:39 SHIP PROGRAMS AND HOW THEY WERE  
10:37:43 PERFORMING, BUT ALSO CREATE INFRASTRUCTURE  
10:37:47 WITHIN THEIR CONTRACTS BETWEEN STATE  
10:37:52 AGENCIES AND SHIP SUBCONTRACTORS SO THE  
10:37:53 AAAs ET CETERA.  
10:37:55 AND THERE ARE A COUPLE STATES THAT HAVE  
10:37:58 STARTED TO DEVELOP AND TRY OUT INNOVATIVE  
10:38:00 CONTRACT MEASURES TO INCENTIVIZE MORE  
10:38:02 EQUITABLE APPROACHES, SO THERE'S ONE  
10:38:05 STATE, I BELIEVE IT WAS WASHINGTON, WAS  
10:38:09 STARTING TO PROVIDE PERFORMANCE BASED  
10:38:12 FUNDING BASED ON PERCENTAGE OF INDIVIDUALS  
10:38:14 WHO HAD LIMITED ENGLISH PROFICIENCY.  
10:38:18 I DID NOT IDENTIFY ANY SORT OF APPROACH  
10:38:20 THAT WAS RELATED TO OUTCOMES FROM AN  
10:38:22 EQUITY STANDPOINT, SO IT'S DEFINITELY AN  
10:38:24 AREA THAT NATIONALLY EVERYONE WAS  
10:38:27 INTERESTED IN THAT I SPOKE WITH, BUT NO  
10:38:29 ONE HAD SOLVED IT IN TERMS OF HOW TO  
10:38:32 MEASURE AND HOW TO ADDRESS IT, SO I THINK  
10:38:35 WHAT CALIFORNIA IS DOING NOW, YOU'LL BE  
10:38:39 AMONG THE LEADERS IN THE COUNTRY.  
10:38:42 >> AND I GUESS SORT OF DATA, SINCE WE KNOW  
10:38:48 THE DATA IS HARD IN NOT WANTING TO WAIT ON  
10:38:52 DATA TO IDENTIFY ISSUES WE MIGHT

10:38:54 KNOW ABOUT, I WONDERED IF THERE WAS RED  
10:38:57 FLAGS OR GREEN FLAGS THAT POPPED UP IF  
10:38:59 THERE WERE COMMUNITIES THAT WERE CLEARLY  
10:39:01 NOT BEING REACHED OR EXAMPLES OF COUNTIES  
10:39:04 OR PROGRAMS WHERE THEY HAD DONE A REALLY  
10:39:06 GOOD JOB OF BUILDING RELATIONSHIPS AND  
10:39:08 SERVING THEIR COMMUNITY THAT COULD BE  
10:39:11 MODELED ON LIKE DID ANYTHING KIND OF COME  
10:39:14 UP AS THOSE RED LIGHT OR GREEN LIGHT OF  
10:39:16 LIKE HERE IS AN EQUITY ISSUE THAT WE CAN  
10:39:19 SEE EVEN IF THE DATA ISN'T THERE TO  
10:39:21 SUPPORT IT THAT WE'RE HEARING ABOUT FROM  
10:39:23 THE COMMUNITY.  
10:39:24 >> IT'S A GREAT QUESTION.  
10:39:27 I THINK, AGAIN, IT WAS VERY HIGH LEVEL, A  
10:39:28 LOT OF THESE.  
10:39:31 I THINK THAT MAKES ME WANT TO DO ANOTHER  
10:39:34 SCAN SPECIFICALLY FOR THAT I THINK.  
10:39:39 WE HEARD SOME POCKETS OF MORE THE  
10:39:42 INNOVATION AROUND, YES, WE'RE DOING THESE  
10:39:46 OUTREACHES TO THIS PARTICULAR COMMUNITY,  
10:39:50 BUT I THINK THE SILENCE THAT WE HEARD IN  
10:39:52 THE SURVEYS IS PROBABLY WHAT WE WANT TO  
10:39:55 DIG INTO MORE IN TERMS OF WHAT'S NOT BEING  
10:39:55 DONE.  
10:40:07 AND THAT WASN'T COVERED.  
10:40:09 >> I'LL JUST ADD SOME OF THE THINGS WE ARE  
10:40:13 LOOKING AT IN DOING IN TERMS OF RESOURCES,  
10:40:15 LOOKING AT, YOU KNOW, MAKING WHAT'S

10:40:21 AVAILABLE FOR OUR HICAP SUBGRANTEES AND  
10:40:23 THOSE RESOURCES MORE ACCESSIBLE WITH  
10:40:26 LANGUAGE, INCLUDING LANGUAGE TRANSLATIONS,  
10:40:27 SPANISH, ADDITIONAL LANGUAGES.  
10:40:31 WE ARE ASKING OUR, YOU KNOW, HICAP SIGHTS  
10:40:33 ON WHAT HAVE WE LEARNED DURING THE  
10:40:36 PANDEMIC AS WELL ON, YOU KNOW, ONLINE  
10:40:38 TRAINING TOOLS AND RESOURCES NOW THAT YOU  
10:40:42 HAVE HICAP COUNSELORS WHO DON'T -- ARE NOT  
10:40:44 ABLE TO ATTEND THEIR TRAININGS IN PERSON,  
10:40:47 WHAT ARE THOSE CHALLENGES, HOW CAN WE  
10:40:52 ADDRESS THAT SYSTEMATICALLY.  
10:40:54 AND THEN AS BRIANNA SAID, I THINK THERE IS  
10:40:57 A NEED FOR MORE DATA.  
10:41:00 THE SHARP SYSTEM IS VERY I WOULD SAY DATED  
10:41:03 IN TERMS OF THE DATA COLLECTION AND HOW DO  
10:41:06 WE COLLECT DATA ON A UNIFORM BASIS, SO  
10:41:09 AGAIN, WE CAN MAKE SOME ACTIONABLE, YOU  
10:41:12 KNOW, DATA DRIVEN POLICY DECISIONS IN  
10:41:13 TERMS OF HOW TO BUILD THE SUPPORT, THE  
10:41:21 HICAP PROGRAM.  
10:41:22 >> AND MAYBE I'LL ANSWER.  
10:41:28 I SEE JAX KELLY ASKED A QUESTION AROUND DO  
10:41:31 HICAPS PROVIDE CONSUMER FRIENDLY INFO  
10:41:36 GRAPH I CANS WITH DUAL  
10:41:38 ELIGIBLES OR OTHER SERVICES.  
10:41:39 THAT'S A GREAT POINT, GREAT QUESTION.  
10:41:43 I THINK IT'S HAPPENING, YES.  
10:41:46 THERE ARE, AGAIN, I HATE TO USE THIS, BUT

10:41:48 THERE ARE POCKETS, THERE PROGRAMS THAT

10:41:51 HAVE REALLY ROBUST APPROACHES TO

10:41:54 COMMUNICATING WITH BENEFICIARIES, SO

10:41:56 THERE'S I FORGET EXACTLY WHICH ONE IT IS.

10:41:57 IT'S IN THE REPORT.

10:41:59 THERE'S ONE AREA, THERE'S ONE HICAP THAT

10:42:02 HAS A ROBUST YOUTUBE CHANNEL THAT IT'S

10:42:04 CREATED TO COMMUNICATE WITH BENEFICIARIES

10:42:06 AND TRY TO MAKE INFORMATION AROUND

10:42:10 MEDICARE MORE DIGESTIBLE, AND I DO KNOW

10:42:11 THAT OTHERS ARE CREATING DIFFERENT TYPES

10:42:12 OF MATERIALS.

10:42:17 I THINK THAT INFO GRAPHIC IDEA IS A GREAT

10:42:23 ONE THAT MAYBE CAN BE INCORPORATED MORE

10:42:31 WIDELY.

10:42:31 >> THANK YOU.

10:42:33 I JUST WANT TO INTERJECT TO SEE IF ANY

10:42:35 OTHER COMMITTEE MEMBERS HAVE QUESTIONS?

10:42:41 IF NOT, WE WILL TRANSITION TO OUR NEXT

10:42:44 PRESENTATION TOPIC.

10:42:48 QUICK PAUSE FOR ANY MORE QUESTIONS?

10:42:50 OH, RIGO.

10:42:50 GO AHEAD.

10:42:51 >> THANK YOU.

10:42:54 THANK YOU FOR THIS VERY INFORMATIVE REPORT

10:42:56 AND UPDATE AND ALL THE GREAT WORK THAT

10:42:56 YOU'RE DOING.

10:43:00 I GUESS I HAVE A QUESTION WITH REGARDS TO

10:43:01 WHAT ARE YOUR THOUGHTS?

10:43:04 MAYBE THIS WILL COME SO THAT YOU MIGHT

10:43:04 TALK ABOUT THIS.

10:43:08 IN TERMS OF HOW YOU PLAN TO DIRECTLY

10:43:10 ENGAGE COMMUNITIES THAT YOU'RE TRYING TO

10:43:13 REACH IN THE DEVELOPMENT OF OUTREACH

10:43:13 MESSAGING.

10:43:18 I KNOW THAT YOU'VE DONE SURVEY, BUT THINK

10:43:21 ABOUT FOCUS GROUPS AND REALLY DRILL IN

10:43:23 DEEP TO CERTAIN COMMUNITIES THAT YOU WANT

10:43:30 TO WORK WITH AND SORT OF CO-

10:43:32 CREATING IN THAT PROCESS AND INVOLVING

10:43:33 MEMBERS OF THE COMMUNITY.

10:43:33 THAT'S ONE QUESTION.

10:43:37 THE OTHER IS YOU SHARED THE CHALLENGE OF

10:43:40 ATTRACTING AND RETAINING COUNSELORS.

10:43:43 AND SO PART OF THE FORMULA OBVIOUSLY IS

10:43:47 GETTING THE RIGHT MESSAGE TO EFFECTIVELY

10:43:50 REACH COMMUNITIES THAT ARE OFTEN

10:43:52 UNDERSERVED AND HARD TO GET TO, BUT THEN

10:43:55 THE FLIP SIDE OF THAT IS HAVING THE RIGHT

10:43:57 BALANCING CAPACITY TO SERVE THOSE

10:43:59 INDIVIDUALS ONCE THEY COME IN.

10:44:04 SO CERTAINLY THEY THINK KWRAO\*EUL BE

10:44:10 THEY'LL BE INTERESTED TO HEAR

10:44:14 MORE ABOUT ATTRACTING BILINGUAL

10:44:16 STAFF AS WELL AS BEING ABLE TO RETAIN.

10:44:22 I KNOW THAT YOU DID MENTION OBVIOUSLY

10:44:25 FUNDING TO SUPPORT SALARIES AND SO FORTH,

10:44:30 SO ANYTHING BEYOND THAT WOULD BE GOOD TO



10:44:30 HEAR.

10:44:37 >> SO I THINK I CAN START AND

10:44:38 SUTEP CAN JUMP IN AS WELL.

10:44:40 THE COMPENSATION IS DEFINITELY THE BIG ONE

10:44:41 THAT WE HEARD.

10:44:45 THERE ARE ALSO OTHER PROGRAMS ACROSS THE

10:44:48 COUNTRY, AND I THINK SOME PROGRAMS WITHIN

10:44:52 CALIFORNIA THAT GO ABOVE AND BEYOND IN

10:44:54 TERMS OF VOLUNTEER RECOGNITION AND

10:44:58 COUNSELOR RECOGNITION AND SHIP PROGRAM

10:44:59 MANAGER ENGAGEMENT RECOGNITION.

10:45:02 WHAT I MEAN BY THIS, SO FLORIDA, FOR

10:45:06 INSTANCE, YOU ACCESS THEIR SHIP, I THINK

10:45:07 IT'S SHINE IN FLORIDA.

10:45:08 THEIR SHIP PAGE.

10:45:13 AND THEN THE FIRST THING YOU SEE IS A

10:45:15 VOLUNTEER RECOGNITION OF THE MONTH,

10:45:15 VOLUNTEER OF THE MONTH.

10:45:18 AND THEY SPOTLIGHT THAT INDIVIDUAL AND THE

10:45:20 INCREDIBLE WORK THAT THEY DO RECOGNIZING

10:45:23 SO MUCH OF THIS WORK IS DONE BY

10:45:23 VOLUNTEERS.

10:45:25 NOT JUST SO YOU HAVE THE COMPENSATION

10:45:27 PIECE BUT YOU ALSO HAVE THE VOLUNTEER

10:45:31 PIECE AND RECOGNIZING AND ENGAGING AND

10:45:35 KEEPING THOSE INDIVIDUALS FEELING LIKE

10:45:41 THEY'RE VALUED IS ANOTHER WAY TO

10:45:43 ACCOMPLISH THAT FACTOR AND OTHER PROGRAMS

10:45:46 DO HAVE A VARIETY OF EFFORTS, SO KIND OF

10:45:47 PUBLIC FACING RECOGNITION.

10:45:50 THERE'S ALSO DIFFERENT APPROACHES TO

10:45:53 HAVING ONE-ON-ONES ON A REGULAR BASIS, SO

10:45:55 COUNSELORS AND SHIP PROGRAM MANAGERS AT

10:45:57 DIFFERENT LEVELS, SO COUNSELORS WITHIN

10:46:00 EACH HICAP PROGRAM AND THEN MAYBE FROM THE

10:46:03 CDA LEVEL YOU HAVE ADDITIONAL ENGAGEMENT

10:46:08 OF SHIP PROGRAM MANAGERS TO HELP THEM FEEL

10:46:10 ENGAGED AND HEARD AND JUST OVERALL

10:46:13 SATISFACTION TO KEEP THEM THERE ABOVE AND

10:46:15 BEYOND OR OUTSIDE OF THE COMPENSATION

10:46:15 PIECE.

10:46:19 AND THAT IS SOME OF THAT IS CAPTURED UNDER

10:46:21 ONE OF THE RECOMMENDATIONS WE DIDN'T GET

10:46:24 TO FEATURE TODAY AROUND CREATING A HICAP

10:46:26 TECHNICAL ASSISTANCE CENTER, SO A REALLY

10:46:28 ROBUST INFRASTRUCTURE TO SUPPORT SHIP

10:46:32 PROGRAM MANAGERS AS WELL AS COUNSELORS AND

10:46:34 A PIECE OF THAT IS KEEPING THEM ENGAGED

10:46:39 AND SATISFIED.

10:46:41 >> I WILL JUST ADD TO THAT.

10:46:44 I THINK WHAT BRIANNA TOUCHED UPON IS THERE

10:46:48 IS POCKETS OF INNOVATION ACROSS OUR HICAP

10:46:52 SITE AND THE STATE, BUT I'M NOT SURE IF

10:46:54 WE'VE TAKEN THAT OPPORTUNITY TO REALLY

10:46:56 CAPTURE THOSE INSIGHTS AND BEST PRACTICES

10:47:01 ON TARGETING POPULATIONS OF NEED AND

10:47:02 SHARING THAT WITH THE HICAP NETWORK.

10:47:05 YOU HAVE POCKETS OF HICAP DOING REALLY

10:47:08 GREAT THINGS, BUT WE AT THE STATE HAVE AN  
10:47:10 OPPORTUNITY TO BRING SOME OF THOSE  
10:47:13 LEARNINGS TOGETHER AND SUPPORT AND  
10:47:14 STRENGTHENING THE NETWORK.

10:47:17 WITHOUT HAVING TO RECREATE THE WHEEL OR  
10:47:19 HAVING TO DO OUR OWN RESEARCH ON WHAT  
10:47:23 MIGHT BE DONE ELSEWHERE IN OTHER STATES,  
10:47:32 BUT WHAT WHAT'S BEING DONE IN CALIFORNIA.

10:47:34 >> THANK YOU SO MUCH FOR THAT GREAT  
10:47:34 QUESTION.

10:47:39 I WANT TO THANK SUTEP AND BRIANNA FOR AN  
10:47:41 AMAZING PRESENTATION AND ROBUST DISCUSSION  
10:47:43 AND WE'RE GOING TO TRANSITION INTO OUR  
10:47:51 NEXT TOPIC.

10:47:53 WHILE WE'RE DOING THAT, I'M GOING TO DROP  
10:47:56 THE LINK TO THAT ATI REPORT INTO THE CHAT  
10:47:58 ONE MORE TIME FOR ANYONE INTERESTED IN  
10:48:01 DOING A DEEP DIVE AND LOOKING AT THOSE  
10:48:01 RECOMMENDATIONS.

10:48:02 LET'S TURN TO JULIA.

10:48:03 >> GOOD MORNING, EVERYONE.

10:48:06 CAN YOU HEAR ME?

10:48:07 >> YES, WE CAN HEAR YOU.

10:48:08 >> GREAT.

10:48:09 THANK YOU.

10:48:12 MY NAME IS JULIA.

10:48:15 WITH THE GENEROUS SUPPORT OF BLUE SHIELD  
10:48:17 GENERAL FOUNDATION I'M WORKING WITH THE  
10:48:19 CALIFORNIA LABOR AND WORKFORCE DEVELOPMENT

10:48:21 AGENCY ON DIRECT CARE WORKFORCE ISSUES.

10:48:29 I'M JOINING YOU FROM UTAH

10:48:32 WHICH IS A BEAUTIFUL PLACE BUT MY INTERNET

10:48:34 CONNECTION IS SPOTTY SO I'M GOING TO HAVE

10:48:37 TO BE OFF CAMERA TO RESERVE AUDIO.

10:48:41 I'M JOINING YOU AS I SAID FROM UTAH.

10:48:47 I'M STANDING ON THE ANCESTRAL --

10:48:52 THE PUEBLO, HOPI TRIBE.

10:48:56 I'M OFFERING THIS LAND ACKNOWLEDGEMENT AND

10:48:58 AFFIRM HISTORY.

10:49:05 BEFORE SARAH DELVES INTO

10:49:07 INITIATIVES I'D LIKE TO PROVIDE

10:49:07 BACKGROUND.

10:49:10 A OVERVIEW OF WHERE DIRECT CARE WORK IS

10:49:11 PERFORMED AND WHO PAYS FOR IT.

10:49:14 WE KNOW THAT BY 2030 WE WILL BE FACING A

10:49:17 SHORTAGE OF ANYWHERE FROM 600,000 TO 2

10:49:19 MILLION DIRECT CARE WORKERS IN

10:49:19 CALIFORNIA.

10:49:21 THERE IS OF COURSE A LARGE UNPAID

10:49:24 WORKFORCE OF FAMILY CAREGIVERS THAT IS

10:49:26 FACING THEIR OWN SHORTAGE AND BARRIERS BUT

10:49:28 TODAY'S PRESENTATION FOCUSES ON THE PAY

10:49:30 DIRECT CARE WORKFORCE.

10:49:32 THESE WORKERS PROVIDE CARE TO A VARIETY OF

10:49:32 SETTINGS.

10:49:35 ONE CATEGORY IS HOME CARE.

10:49:38 INCOME ELIGIBLE INDIVIDUALS GENERALLY NEED

10:49:40 PEOPLE WHO QUALIFY FOR MEDI-CAL BUT

10:49:42 RECEIVE CARE AT HOME THROUGH THE IN HOME  
10:49:45 SUPPORTIVE SERVICES PROGRAM, A PROGRAM RUN  
10:49:48 BY THE C DEPARTMENT OF SOCIAL SERVICES IN  
10:49:52 EACH COUNTY'S PUBLIC AUTHORITY.  
10:49:57 WE'RE TALKING ABOUT THE WORKFORCE TO GIVE  
10:50:05 AN OVERVIEW AND MAP OUT THE SECTOR AS A  
10:50:05 HOLE.  
10:50:09 THE SHADING -- DIRECT CARE WORKERS CAN  
10:50:10 ALSO PROVIDE CARE THROUGH PRIVATE HOME  
10:50:11 CARE AGENCIES.  
10:50:14 THERE ARE A LIMITED NUMBER OF MEDI-CAL  
10:50:16 HOME COMMUNITY BASED WAIVERS TO INCOME  
10:50:17 ELIGIBLE INDIVIDUALS TO PAY FOR HOME  
10:50:17 CARE.  
10:50:27 THE MAJORITY OF HOME CARE AGENCIES.  
10:50:37 OFTEN PAYING OFF THE BOOKS.  
10:50:39 AIMED AT ALLOWING INDIVIDUALS TO STAY IN  
10:50:41 THEIR HOMES AND COMMUNITIES AS LONG AS  
10:50:41 POSSIBLE.  
10:50:44 ONE EXAMPLE OF THE PROGRAMS ARE INCLUSIVE  
10:50:46 CARE FOR THE ELDERLY AND THE ADULT DAY  
10:50:48 HOME CARE CENTERS.  
10:50:52 AND THERE IS OF COURSE THE CARE PROVIDED  
10:50:53 IN CONGREGATE RESIDENTIAL SETTING.  
10:50:55 THERE ARE SPECIFICALLY FACILITIES  
10:50:57 INCLUDING BOTH RESIDENTIAL CARE FACILITIES  
10:51:02 FOR THE ELDERLY AND INDIVIDUALS WHO MAY  
10:51:04 NOT NEED 24 HOURS BUT NOT NECESSARILY  
10:51:09 MEDICAL CARE.

10:51:13 THEY RANGE IN SIZE.

10:51:16 THE LARGER SILTS CAN HOUSE OVER 100

10:51:16 PEOPLE.

10:51:19 THESE FACILITIES ARE PRIVATE PAID BUT ARE

10:51:22 A LIMITED NUMBER OF WAIVERS AVAILABLE TO

10:51:24 INCOME ELIGIBLE INDIVIDUALS.

10:51:27 OUR ASK FOR THIS IS ADULT RESIDENTIAL

10:51:32 FACILITIES OF THOSE UNDER 60 THAT CAN BE

10:51:34 SUBSIDIZE THROUGH VARIOUS PROGRAMS.

10:51:37 AND THEN THERE ARE MEDICAL FACILITIES WITH

10:51:39 SKILLED NURSING FACILITIES PROVIDING THE

10:52:00 ARE PUBLICLY FUNDED. TO THE NEXT SLIDE, PLEASE. THE TYPE OF WORK PERFORMED AND HOW THAT WORK IS CATEGORIZED. PERSONAL CARE ASSISTANTS OR PCAs ARE THE LARGEST GROUP.

10:52:15 THEY PROVIDE ASSISTANCE OF DAILY LIVING LIKE EATING, DRESSING, AND ALSO OFTEN WITH INTERMEDIATE ACTIVITIES OF GENERAL LEAVING LIKE HOUSEKEEPING AND MEDICATION MANAGEMENT.

10:53:00 THIS WORKS IN ALL SETTINGS, HOME AND COMMUNITY AND REQUIRED TRAINING AND ASSESS WORKERS AND CATEGORIES, AND THEY ARE REQUIRED TO ATTEND AN ORIENTATION AND CNAs ASSIST WITH ADLs AND IADLs AND ALSO WITH GENERAL PATIENT CARE AND SOME CRITICAL TASKS LIKE BLOOD PRESSURE READINGS AND RANGE OF EXERCISES AND WORK UNDER LICENSED MEDICAL AND NURSING STAFF, PRIMARILY IN HOSPITALS AND SKILLED NURSING FACILITIES AND MUST COMPLETE 60 HOURS OF CLASSROOM TRAININGS AND THEY PERFORM THE SAME BUT IN THEIR HOM

10:53:21 AND THEY ARE REQUIRED TO COMPLETE 120 HOURS OF TRAINING AND THEY DO SIMILAR WORK TO IN ADDITION DEVELOPING MANAGEMENT PLANS AND INDIVIDUAL WITH INTELLECTUAL OR DEVELOPMENTAL DISABILITIES AND MUST COMPLETE 70 HOURS OF TRAINING.

10:53:27 LET'S MOVE TO TALK ABOUT WHO DOES THIS WORK. NEXT SLIDE, PLEASE.

10:54:03 DIRECT CARE WORKERS ARE OVERWHELMING -- 80% IN CALIFORNIA ARE WOMEN AND 47% ARE IMMIGRANTS AND 51% ARE PUBLIC ASSISTANCE AND THEY ARE REPRESENTATIVE AT JUST UNDER TWO TIMES THEIR STATEWIDE POPULATION. I WANT TO HIGHLIGHT THAT IS SO OFTEN THE CASE OF AGGREGATE FEDERAL DATA AND WE DO NOT HAVE ACCURATE DATA AND FOR THE USUAL REASONS FOR LARGE MARGINS OF ERROR AMONG THEM.

10:54:03 .

10:54:14 THESE WERE FROM THE BUREAU OF LABOR STATISTICS AND THE AMERICAN COMMUNITY SURVEY, ALL FEDERAL DATA.

10:54:35 I AM NOT AN EXPERT ON DATA BUT I KNOW THAT IT CAN EFFECTIVELY SOLVE PROBLEMS BY ALLOCATING RESOURCES AND WE WOULD LOVE YOU TO LEARN MORE FROM THIS GROUP AND WHAT KIND OF BEST PRACTICES WOULD BE RECOMMENDED AT THE STATE LEVEL TO ADDRESS THIS ISSUE.

10:54:43 THEY EARN SO LITTLE THAT OVER HALF QUALIFY FOR PUBLIC BENEFITS. NEXT SLIDE, PLEASE.

10:54:57 KEY FACTS AND FIGURES AND FOR THE FIRST QUARTER OF 2021 IN CALIFORNIA. WE SEE THAT DIRECT CARE WORKERS ARE SIGNIFICANTLY GARDENERS, HOUSE KEEPERS AND SHORT ORDER COOKS. NEXT SLIDE, PLEASE.

10:55:30 WE SEE THAT WAGES FOR DIRECT CARE WORK HAS NOT KEPT PACE WITH THE DEMAND FOR THE CARE AND IN THE LAST DECADE IN CALIFORNIA THE NUMBER OF PERSONAL AND HOME HEALTH AIDES HAS RISEN AND THE GROWTH HAS BEEN SLOW GROWTH MOST LIKELY DUE TO ACCESSIBLE OF TRAINING AND CERTIFICATION AND OVERALL GROWTH RATE FOR ALL DIRECT CARE JOBS WERE OVER A HUNDRED AND 30 PERCENT AND WAGES HAS BARELY RISEN.

10:55:42 AND WAGES FOR PCAs AND HHAs ROSE A DOLLAR AND 40 CENTS FOR ALL DIRECT CARE WORKERS ONLY 35 CENTS. NEXT SLIDE, PLEASE.

10:55:51 LOOKING TOWARDS THE FUTURE IN CALIFORNIA, WHAT WOULD BE THE IMPACT ON BOTH OUR ECONOMY AND OUR HEALTH OF IMPROVING WAGES AND WORKING CONDITIONS.

10:56:25 ESTIMATES OF A LIVING WAGE IN CALIFORNIA VARY DEPENDING ON A VARIETY OF FACTORS. THE PAY OF THE LIVING WAGE WOULD RESULT IN 2030 IN AN ADDITIONAL 3.6 BILLION IN ECONOMIC OUTPUT, 165 MILLION IN PUBLIC ASSISTANCE SAVINGS AND 1.3 BILLION SAVED TURNOVER COSTS AND 1.9 PERCENT IN STAFFING AND 17 TO 21% INCREASE IN RETENTION AND FEWER ER VISITS AND HOSPITALIZATIONS.

10:56:52 OVERALL, SIGNIFICANTLY IMPROVED PATIENT SAFETY AND HOW OVER 50,000 NEEDED DIRECT CARE JOBS. THE QUESTION OF HOW TO INCREASE WAGES FOR DIRECT CARE WORKERS IS A COMPLICATED ONE. AS WE WILL HEAR MORE ABOUT FROM SARAH IN A MINUTE THE CURRENT BUDGET INCLUDES SIGNIFICANT INVESTMENTS IN THE WORKFORCE AND TIERS FOR CERTAIN DIRECT SUPPORT PROFESSIONALS DOES NOT PROVIDE FOR PERMANENT WAGE INCREASES.

10:57:30 THIS IS IN PART DUE TO THE NATURE OF THE FUNDS, THE MAJORITY OF WHICH COME FROM THE AMERICAN RESCUE PLAN, TEMPORARY INFUSION OF CASH CANNOT SUSTAIN THE PERMANENT WAGE HIKE AND ADVOCACY AROUND THE NATIONAL LEVEL PASSING PORTIONS OF THE BUILD BACK BETTER ACT AND STATE LEVEL IMPLEMENT CORPORATE ACT AND RE-AUTHORIZATION OF AB 81 IS KRURNL.

10:57:50 CRUCIAL. FOR THE CURRENT FISCAL YEAR [BACKGROUND NOISE] TOTAL OF 4 BILLION INVESTED IN DIRECT CARE WORKFORCE. OVER 400 MILLION INVESTED IN PERSONAL CARE ASSISTANTS, 120 MILLION IN CNAs AND HOME HEALTH AIDES AND 100 MILLION OR PATH.

10:58:16 WE HAVE OVER JUST -- [PHONE RINGING] -- AND PROFESSIONALS AND THESE INVESTMENTS ARE PRIMARILY 83% IN HOME AND COMMUNITY-BASED CARE WITH 7% ALLOCATED FOR RESIDENTIAL CARE AND 10% PROGRAM BOTH SETTINGS. AND I WILL TURN IT OVER TO SARAH STEENHAUSEN FOR THE DEPARTMENT OF AGING.

10:58:37 >> GREAT. THANK YOU SO MUCH, JULIA, FOR THAT EXCELLENT FRAMING OF TODAY'S DISCUSSION. IT'S SO WONDERFUL TO BE HERE. I APPRECIATE THE OPPORTUNITY TO GIVE YOU A LITTLE BIT OF AN OVERVIEW OF CALIFORNIA'S DIRECT CARE WORKFORCE INITIATIVE, KIND OF WHAT THE FRAMEWORK IS AND THEN A LITTLE BIT OF THE FOCUS ON WHAT CDA IS LEADING.

10:58:46 WE ARE REALLY EXCITED TO HEAR YOUR INPUT, QUESTIONS, FEEDBACK AS WE ARE JUST STARTING TO LAUNCH OUR STAKEHOLDER ENGAGEMENT ON THIS INITIATIVE.

10:59:19 SO THIS SLIDE REALLY I THINK IS IMPORTANT BECAUSE IT RECOGNIZES A LOT OF WHAT JULIA WAS TOUCHING ON IS THAT THIS WORKFORCE CRISIS IS REALLY COMPLEX AND SOLVING IT INCLUDES ADDRESSING A NUMBER OF DIFFERENT FRONTS, INCLUDING ENSURING CULTURAL COMPETENCY OF THE WORKFORCE, ENSURING A LIVING WAGE, ENSURING ACCESS TO CAREER LADDERS AND CAREER LATTICES, ENSURING LANGUAGE ACCESS FOR THE TRAINING

10:59:46 AND FOR THE WORKFORCE IN GENERAL AND THEN PROVIDING INCENTIVES FOR THE WORKERS. SO RECOGNIZING ALL OF THAT I JUST THINK IT'S IMPORTANT TO POINT OUT WE WILL FOCUS ON OUR CURRENT INITIATIVES BUT WE ALSO KNOW THAT WE ARE SUPER EXCITED AND PROUD OF THESE INVESTMENTS AND WE KNOW THAT THIS IS JUST THE FIRST STEP. BY NO MEANS DO WE SEE THIS AS A ONE AND DONE. THIS IS GOING TO BE A PROCESS THAT WE WILL RELY ON

11:00:30 PARTNERSHIP AND ADVOCACY FOR THE YEARS TO COME. NEXT SLIDE. SO WHAT I WANTED TO DO IS BUILD OFF OF WHAT JULIA JUST PROVIDED AN OVERVIEW OF THE 2021-22 INVESTMENTS APPROXIMATELY \$946 MILLION BUT I, ALSO, WANTED TO HIGHLIGHT SOME OF THE REALLY IMPORTANT INITIATIVES THAT HAVE BEEN PROPOSED IN OUR PROPOSED BUDGET OF 22-23 OF \$1.7 BILLION TO REALLY MOVE THE CURRENT YEAR INVESTMENTS THAT ARE FOCUSING A LOT ON DEVELOPING TRAINING AND STIPENDS AS WELL AS THE OPPORTUNITIES FOR

11:01:04 TRAINING AND STIPENDS FOR OUR NURSING HOME AND CONGREGATE FACILITIES BUT THIS YEAR THE GOVERNOR IS PROPOSING \$1.7 BILLION TO EXPAND AND BUILD THE PIPELINE. SO THERE IS AN INITIATIVE TO DEVELOP A POOL OF 25,000 COMMUNITY CARE WORKERS TO BUILD THE PIPELINE OF SOCIAL WORKERS AS WELL AS NURSES, MULTILINGUAL HEALTH INITIATIVE AND PSYCHIATRIC INITIATIVE AS WELL TO REALLY BUILD OUT THE WORKFORCE WITH AN EMPHASIS ON EQUITY

11:01:31 AND LANGUAGE ACCESS AND CULTURALLY COMPETENCIES THROUGHOUT. SOMETHING IMPORTANT FOR THE ISSUE AND HOW IT INTERSECTS WITH THE MASTER PLAN OF AGING WITH ALL OF THESE INITIATIVES, WE REALLY NEED TO ENSURE THAT THERE IS THE AGING LENS APPLIED THROUGHOUT. SO I ENCOURAGE ALL OF YOU TO BE ENGAGED ON THIS AND TO PROVIDE INPUT AS TO HOW YOU SEE THESE VARIOUS OPPORTUNITIES

11:02:01 WHERE THEY INTERSECT WITH THE AGING SECTOR BECAUSE WE KNOW THAT OLDER ADULTS, PEOPLE WITH DISABILITIES ARE REALLY IN NEED OF THE SPECIALIZED SERVICES AND SUPPORTS ACROSS THE CONTINUUM. AND ENSURING THAT OUR WORKFORCE HAS THE CAPACITY TO MEET THEIR NEEDS. WHAT CAN WE DO WITHIN THESE INITIATIVES TO ENSURE THOSE NEEDS ARE MET. SO AS THE PROCESS MOVES FORWARD, WE ALWAYS APPRECIATE HEARING THAT INPUT. NEXT SLIDE.

11:02:26 SO NOW WHAT I AM GOING TO DO WITH THAT KIND OF BROADER PERSPECTIVE ON THE STATE'S LARGER WORKFORCE INITIATIVE. I AM GOING TO TALK A BIT ABOUT WHAT WE ARE DOING AT CDA WITH THE WORKFORCE INITIATIVE THAT WAS AWARDED TO US THROUGH THE HOME AND



COMMUNITY-BASED SERVICES SPENDING PLAN. ONE THING BEFORE I TALK ABOUT THAT, I DO WANT TO NOTE THE IMPORTANCE OF PARTNERSHIP IN DEVELOPING THESE INITIATIVES.

11:02:56 WHILE DEPARTMENTS ACROSS THE HEALTH AND HUMAN SERVICES AGENCIES ARE LEADING DIFFERENT ASPECTS OF THE BROADER WORKFORCE INITIATIVE, THE SUCCESS OF THIS INITIATIVE RELIES ON CROSS DEPARTMENT AND CROSS SECTOR COLLABORATION. SOMETHING THAT IS REALLY EXCITING THAT CDA IS LEADING THIS INITIATIVE WE ARE WORKING CLOSELY WITH OUR COLLEAGUES TO THE DEPARTMENT OF HEALTHCARE SERVICES, DEPARTMENT OF SOCIAL SERVICES, HEALTH AND HUMAN SERVICES AGENCY.

11:03:13 AS WELL AS THE LABOR AND WORKFORCE DEVELOPMENT AGENCY BECAUSE ULTIMATELY ALL OF THIS WILL NOT BE SUCCESSFUL -- SORRY FOR THE SOUND OF MY CELL PHONE. IT'S RINGING SOMEWHERE. BUT I CAN'T FIND IT. IT WON'T BE SUCCESSFUL WITHOUT THESE PARTNERSHIPS IN PLACE. NEXT SLIDE.

11:03:45 SO I WANTED TO FOCUS ON WHAT IS INCLUDED IN CALIFORNIA'S HOME AND COMMUNITY-BASED SERVICES SPENDING PLAN FOR THIS INITIATIVE. YOU WILL RECALL THAT THE SPENDING PLAN WAS APPROVED EARLIER I THINK IN FINALLY SIGNED OFF ON BY THE FEDERAL GOVERNMENT BY CMS IN JANUARY OF THIS YEAR. ESSENTIALLY, THE SPENDING PLAN WAS AUTHORIZED THROUGH FUNDS TO FUND THE AMERICAN RESCUE PLAN ACT, WHICH PROVIDED A 10% INCREASE IN THE STATE MATCHED FOR MEDICAID DOLLARS.

11:04:12 SO ESSENTIALLY, IT PROVIDED APPROXIMATELY AN ADDITIONAL \$4.5 BILLION TO IMPROVE ACCESS TO AND THE SERVICES DELIVERY WITHIN OUR HOME AND COMMUNITY-BASED SERVICES NETWORK. A KEY COMPONENT OF THAT BROADER HCBS SPENDING PLAN INITIATIVE IS THE WORKFORCE ISSUE AND ADDRESSING THE WORKFORCE CRISIS. SO IN PARTICULAR, THE DEPARTMENT OF AGING IS

11:04:37 CARRYING OUT AN INITIATIVE THAT IS KIND OF GOING HAND IN HAND WITH THE IHSS CAREER PATHWAYS INITIATIVE. WHERE WE ARE TRYING TO BUILD OFF THE WORK THEY ARE DOING FOR THAT IHSS PROGRAM BY DEVELOPING A DIRECT CARE WORKFORCE TRAINING AND STIPEND PROGRAM FOR THE HOME AND COMMUNITY-BASED DIRECT CARE WORKERS WHO ARE NOT IHSS WORKERS.

11:04:56 SO THAT'S QUITE A MOUTHFUL BUT IT'S BASICALLY THE WORKFORCE THAT IS NOT CAPTURED BY IHSS. WE KNOW THAT IHH IS A CRITICAL COMPONENT OF OUR INFRASTRUCTURE BUT WE KNOW THERE IS MANY OTHER DIRECT CARE WORKERS WHO PROVIDE SERVICES AND SUPPORTS TO MEDICAID RECIPIENTS.

11:05:31 SO ESSENTIALLY, WHAT YOU SEE HERE IS WHAT IS AUTHORIZED IN THE SPENDING PLAN TO PROVIDE SERVICES OR TRAINING AND STIPENDS TO IMPROVE THE SKILLS, COMPENSATION OF THE WORKFORCE SECTOR. IT'S A BROAD RANGE OF WORKERS THAT CAN FALL WITHIN THIS CATEGORY AND I WILL TALK ABOUT WHAT THAT MEANS BUT THE PURPOSE IS TO FOCUS ON DEVELOPING TRAINING AND STIPENDS TO IMPROVE THE SKILLS AND CULTURALLY COMPETENCY OF THIS PLACE WORKFORCE.

11:05:54 NEXT SLIDE, PLEASE. SO THE WAY THAT WE ARE FRAMING THIS INITIATIVE AT THE DEPARTMENT OF AGING IS KIND OF THROUGH THIS FIVE COMPONENT PROCESS. FIRST WE WANT TO REALLY FOCUS ON DELIVERING AND MAKING HIGH QUALITY TRAINING AVAILABLE AND ACCESSIBLE TO

ALL WORKERS IN THIS CATEGORY AND THAT INCLUDES CULTURAL COMPETENCY AND LANGUAGE ACCESS AS WELL.

11:06:18 THE SECOND COMPONENT IS ENSURING ACCESS TO THESE STIPENDS AND INCENTIVES FOR THE WORKERS SO NOT ONLY WILL THESE TRAININGS BE AVAILABLE FREE OF CHARGE BUT WE ARE ACTUALLY GOING TO PAY THE WORKERS TO TAKE THE TRAININGS AND DEVELOP AN INCENTIVE STRUCTURE FOR STAYING IN THOSE JOBS FOR A NUMBER OF MONTHS AND GETTING AN INCENTIVE FOR THAT.

11:06:37 WE REALLY WANT TO LOOK AT FOCUSING ON CAREER LADDERS AND LATTICES AND PROVIDING OPPORTUNITIES FOR ADVANCEMENT SO THAT THESE JOBS ARE VALUED AND SEEN AS REALLY A KEY STEP IN A CAREER THAT IS MEANINGFUL ACROSS THE CONTINUUM OF CARE.

11:06:59 FOURTH, WE WANT TO FOCUS ON EVALUATION. THIS IS EVALUATION NOT AT THE PERSONAL LEVEL AND ENSURING THAT THE ACTUAL TRAININGS ARE HELPING IMPROVE THE SKILLS AND COMPETENCY OF THE WORKFORCE BUT, ALSO, EVALUATING THE BROADER INITIATIVE SO THAT WE CAN UNDERSTAND WHAT WORKS, WHAT DOESN'T WORK, WHAT ARE SOME OF THE PROMISING PRACTICES AND LESSONS LEARNED AND FINALLY

11:07:26 I THINK SOMETHING SO EXCITE BIG THIS IS WE ARE TRYING TO THINK ABOUT HOW WE INVEST IN THE SYSTEM INFRASTRUCTURE WITH THE GOAL OF DEVELOPING LEARNING AND -- LEADERSHIP AND LEARNING AND INNOVATION INSTITUTE. SO THIS IS KIND OF DEVELOPING A BROADER PLATFORM, WHICH IS CONSIDERED CALLED A LEARNING MANAGEMENT SYSTEM THAT LOOKS AT HOW WE CAN INVEST IN THESE SERVICES, THESE TRAININGS ONGOING.

11:07:51 SO WHILE WE ONLY HAVE UNTIL THE END OF ESSENTIALLY THE END OF 2023 TO SPEND THE \$150 MILLION THAT HAS BEEN DEDICATED FOR THIS PURPOSE, WE REALLY WANT TO ENSURE THAT THAT FUNDING CAN BE UTILIZED AS AN INVESTMENT INTO THE INFRASTRUCTURE WITH SOME SORT OF INSTITUTE THAT PROVIDES A FRAMEWORK FOR LEADERSHIP, LEARNING, AND INNOVATION.

11:08:07 THROUGHOUT ALL OF THIS, WHAT IS REALLY IMPORTANT IS TO RECOGNIZE THE CROSS-CUTTING ISSUES OF LANGUAGE ACCESS, CULTURAL COMPETENCY AND UTILIZING TO ADVANCE OUR EFFORTS AND BUILDING ON CROSS SECTOR PARTNERSHIPS. NEXT SLIDE.

11:08:31 SO I WANT TO TALK A BIT ABOUT THE TARGET POPULATION AND I NOTED HOW THE SPENDING PLAN WAS BROAD IN TERMS OF WHAT POTENTIAL DIRECT CARE WORKERS WOULD BE ELIGIBLE TO RECEIVE TRAINING UNDER THE INITIATIVE AND WE ARE TRYING TO CAST AS WIDE A NET AS POSSIBLE BECAUSE WE HAVE THE RESOURCES TO DO SO AND BECAUSE WE KNOW THERE IS A NEED.

11:08:56 WE ARE WORKING CLOSELY WITH OUR DEPARTMENT PARTNERS, HEALTHCARE ACCESS AND INFORMATION AS WELL AS DEPARTMENT OF SOCIAL SERVICES AND HEALTHCARE SERVICES TO ENSURE THAT WE ARE READY CAPTURING THE WHOLE POPULATION THAT COULD BE ELIGIBLE FOR THIS AND WE ARE NOT DUPLICATING AT THE SAME TIME WHAT SOME OF THE OTHER SERVICES AND TRAININGS ARE THAT ARE BEING ADMINISTERED BY THE OH DEPARTMENTS.

11:09:24 OTHER DEPARTMENTS. WE ARE EXAMINING HOW TO REACH OUT TO THE DIRECT CARE WORKERS THAT ARE HOME HEALTH AIDES, SOCIAL WORKERS, THE PERSONAL CARE ASSISTANTS IN THE COMMUNITY THAT PROVIDE SERVICES SAY THROUGH THE COMMUNITY-BASED ADULT SERVICES

PROGRAM OR THROUGH THE MSSP PROGRAM THAT ARE NOT IHSS PROGRAMS AND OTHER WORKERS. IT COULD BE DIETICIANS OR TRANSPORTATION PROVIDERS

11:09:55 OR ACTIVITIES PLANNERS. ANYBODY PROVIDING DIRECT CARE SERVICES TO MEDICAID RECIPIENTS IN THE COMMUNITY THAT ARE NOT IHSS PROVIDERS. SO THESE WORKERS IN TERMS OF THE PROGRAMS THAT THEY ARE ALIGNED WITH WE WANT TO TARGET THE COMMUNITY-BASED ASSAULT SERVICES AS WELL AS MULTI-PURPOSING YOUR SERVICES PROGRAM, ALZHEIMER'S DAY CARE CENTERS AS WELL AS THE PACE PROGRAM, WHICH IS PROGRAM FOR ALL INCLUSIVE CARE FOR THE ELDERLY.

11:10:30 THE ASSISTIVE LIVING PROVIDERS AND THE COMMUNITY BASED PROVIDE ERGS AS WELL AS THE SMALLER ASSISTIVE LIVING FACILITY, THE 6 BED FACILITIES THAT ARE LICENSED AND THEY HAVE A LOT OF THE SSI, SSP AND MEDICAL POPULATION SO WE BELIEVE WE CAN CAPTURE A LOT OF THE WORKFORCE BY TARGETING THESE FACILITIES AND PROVIDING ACCESS TO THESE TRAININGS AS WELL.

11:10:50 WE ARE GOING TO BE WORKING CLOSELY OVER THESE NEXT FEW MONTHS TO DEFINE THIS TARGET POPULATION AND WE WILL ENGAGE OUR STAKEHOLDERS AS WELL TO BE SURE THAT WE ARE BEING COMPREHENSIVE IN OUR EFFORTS. NEXT SLIDE.

11:11:11 SO HERE IS THE FRAMEWORK FOR WHAT KIND OF HOW WE ARE OPERATIONALIZING THIS INITIATIVE AND AGAIN, THIS IS JUST THE FRAMEWORK OF WHERE WE ARE NOW AND WE RECOGNIZE AS WE GET MORE STAKEHOLDER INPUT IT'S LIKELY TO EVOLVE BUT ONE IMPORTANT PRINCIPLE THAT I WANT TO NOTE IS BUILDING OFF THIS CONCEPT OF PARTNERSHIP.

11:11:34 WE DO NOT WANT TO REINVENT THE WHEEL AND SO THAT IS WHY WE ARE WORKING SO CLOSELY WITH OUR COLLEAGUES AT THE DEPARTMENT OF SOCIAL SERVICES TO LEVERAGE A LOT OF THE REALLY GOOD WORK THEY HAVE DONE ALREADY IN BUILDING THEIR CAREER PATHWAYS PROGRAM. SO THAT STARTS WITH THIS FIVE TRAINING PATHWAY, WE WILL LEVERAGE THE WORK THAT THE DEPARTMENT OF SOCIAL SERVICES IS DOING

11:11:59 AND MAKE THEIR CURRICULUM AND PORTAL AVAILABLE TO ALL THE WORKFORCE THAT I JUST OUTLINED. SO THEY HAVE A FIVE TRAINING PATHWAYS PROGRAM THAT WILL BE LAUNCHED LATER THIS YEAR THAT HAS TWO GENERAL PATHWAYS AND THEN THREE SPECIALIZED PATHWAYS PROVIDING CURRICULUM AND ADVANCEMENT OPPORTUNITIES FOR THE WORKFORCE.

11:12:36 SO WHAT IS SUPER EXCITING ABOUT THIS IS THAT THEY ARE BUILDING THE SYSTEM, WE ARE GOING TO BE ABLE TO LEVERAGE IT, AND PLUG INTO IT AND EXPANDS OFF OF IT WHERE WE CAN FOR OUR POPULATION AND THAT'S WHERE WE GET INTO THIS KIND OF SPECIALIZED CURRICULUM GRANT PROGRAM WHERE WE ARE GOING TO ADMINISTER SOME SORT OF GRANT PROGRAM THAT TARGETS THE PROVIDERS OR THE ASSOCIATIONS NON-PROFIT ASSOCIATIONS TO DEVELOP SPECIALIZED CURRICULUM FOR THE HOME AND COMMUNITY DIRECT CARE WORKFORCE.

11:13:00 AND IT WOULD PROVIDE THE FUNDING TO DEVELOP THE CURRICULUM AND TO ADMINISTER THE TRAININGS AS NEEDED AND TO, ALSO, PAY THE RECIPIENTS FOR THE TRAINING. WE ARE DEVELOPING THE SYSTEMS SO THAT WE HAVE THE PROCESSES IN PLACE TO TRACK HOW WE ARE GOING TO PAY THE DIRECT CARE WORKERS AND HOW WE ARE GOING TO TRACK THE INCENTIVES AS WELL.

11:13:26 I DO WANT TO, ALSO, NOTE THAT IN TERMS OF THE INCENTIVES AND THE STIPENDS. WE ARE GOING TO BE MODELLING THE SAME STRUCTURE OFF OF HOW THE IHSS PROGRAM IS CARRYING OUT THEIR CAREER INCENTIVES -- SORRY -- THEIR WORKFORCE TRAINING PROGRAM SO THAT WE DON'T HAVE A DIFFERENT SET OF INCENTIVES THAT KIND OF CREATES AN UNEQUAL PLAYING FIELD FOR THE DIRECT CARE WORKFORCE.

11:13:56 SO WE WILL MODEL IT OFF OF HOW THEY ARE DOING IT, THEIRS AS WELL. THIRD, WE ARE GOING TO BE INVESTING IN THIS BROADER LEARNING AND INNOVATIONS INSTITUTE. THE CONCEPT NOW IS THAT IT CAN PROVIDE A STANDARDIZED PLATFORM, LEARNING MANAGEMENT SYSTEM FOR NOT ONLY THE WORKFORCE AND WORKERS BUT, ALSO, PROVIDERS AND THE NETWORK LEADERS. SO THAT ACROSS THE AGING AND DISABILITY SERVICES SYSTEM, WE WOULD HAVE A REALLY

11:14:09 BUILD AN INSTITUTE THAT ALLOWS FOR EXCHANGE OF IDEAS, BEST PRACTICES, LEADERSHIP DEVELOPMENT AS WELL AS TRAINING FOR THE WORKFORCE AND OTHER TRAININGS AS WELL AND TECHNICAL ASSISTANCE OPPORTUNITIES.

11:14:39 SO THAT'S SOMETHING THAT IS KIND OF A BROADER SYSTEMS GOAL AND WE WILL NOT BE ABLE TO LEVERAGE THIS FUNDING FOR THE ENTIRETY OF THE INSTITUTE BUT WE ARE CERTAINLY LOOKING HOW WE CAN LEVERAGE AND WE ARE LOOKING AT THIS PROGRAM SO WE ARE LEARNING FROM WHAT WORKS AND WHERE WE CAN MAKE SOME CHANGES ALONG THE WAY.

11:15:11 SO HOPEFULLY IT WILL BE A REALTIME EVALUATION SO IS THAT WE CAN HAVE COURSE CORRECTIONS AS WE ARE BUILDING IT OUT. AGAIN, I JUST WANT TO REINFORCE THIS IS THE VERY EARLY STAGES OF THE FRAMEWORK THAT IS GETTING DEVELOPED THROUGH THE PAST SEVERAL WEEKS BUT OUR STAKEHOLDER ENGAGEMENT THAT WE WILL BE LAUNCHING SOON WILL BE REALLY INFORMING HOW WE OPERATIONALIZE THIS.

11:15:35 INTERNALLY, WE ARE IN THE PROCESS OF HIRING AN ASSISTANT DIRECTOR OF THE DIRECT CARE WORKFORCE INITIATIVE. SO THAT INDIVIDUAL WILL BE RESPONSIBLE FOR KIND OF LEADING THIS INITIATIVE AND WORKING IN PARTNERSHIP WITH OUR OTHER STATE DEPARTMENTS. WE WILL BE BUILDING OFF THE TEAM TO GET THIS OFF AND RUNNING BUT REALLY LOOKING FORWARD TO HEARING INPUT AND FEEDBACK ON IT.

11:15:57 SO OUR NEXT STEPS ARE REALLY TO HEAR FROM ALL OF YOU. WE ARE GOING TO BE ENGAGING A WIDE RANGE OF STAKEHOLDERS WHICH INCLUDES THE WORKERS THEMSELVES. WE WANT TO HEAR FROM WORKERS AND UNDERSTAND WHAT WOULD BE MEANINGFUL TO IN PROCESS. WE, ALSO, WANT TO HEAR FROM PROVIDERS AND WE ALSO WANT TO HEAR FROM CONSUMERS AND ADVOCATES AS WELL.

11:16:07 ALL OF THE STAKEHOLDER ENGAGEMENT WILL HELP INFORM THE FRAMEWORK DEVELOPMENT. THE GOAL IS TO LAUNCH AN PARTNERSHIP WITH THE DEPARTMENT OF SOCIAL SERVICES LATER THIS YEAR.

11:16:25 SO AGAIN, WE HAVE TO HAVE THESE FUNDS EXPENDED BY THE END OF 2023, BUT WE ARE REALLY HOPING THAT WE CAN MAKE SOME LONGER TERM INVESTMENTS THAT KIND OF SET THE INFRASTRUCTURE FOR THE STATE FOR TODAY AND MOVING FORWARD.

11:16:41 SO THAT IS THE OVERVIEW AND I AM HAPPY TO TAKE ANY QUESTIONS OR COMMENTS THAT YOU MAY HAVE.

11:16:43 >> I HAVE A COUPLE OF HANDS.

11:16:49 >> SORRY.

11:16:51 >> BETSY HAS QUESTIONS.

11:16:56 >> AND DONNA, TOO, I GUESS. DONNA, YOU GO FIRST.

11:17:03 >> OKAY. I WAS NOT SURE, I THOUGHT MICHAEL HAD HIS HAND UP FIRST.

11:17:04 >> SORRY. I DIDN'T SEE.

11:17:36 >> ANYWAY, FIRST OF ALL, I WANT TO THANK YOU, SARAH, FOR THIS WHOLE CONCEPT AND MOVING TOWARDS THIS INSTITUTE. I THINK THIS IS GOING TO BE A WONDERFUL WAY TO NOT FRAGMENT OUR SYSTEM AND GET THE SAME TYPE OF INFORMATION OUT FOR EVERY ONE. SO I AM LOOKING FORWARD TO THE STAKEHOLDER PROCESS AND BEING ABLE TO HELP INCORPORATE WHERE WE CAN, THE INFORMATION THAT HAS TO DO WITH FAMILY CARE GIVING AND ACROSS THE POPULATION.

11:17:47 I PARTICULARLY LIKE THAT THERE ARE INCENTIVES FOR PEOPLE SO THAT CAN TAKE THESE COURSES BECAUSE SOMETIMES THAT CAN SERVE AS A BARRIER TO EDUCATION.

11:18:11 >> THANK YOU, DONNA, AND I JUST WANT TO NOTE THAT REALLY CRITICAL IMPORTANCE WHILE WE ARE TALKING ABOUT THE INITIATIVE AND WE RECOGNIZE HOW CRITICAL IT IS TO ADDRESS THE NEEDS OF OUR FAMILY CAREGIVERERS. IN PARTNERSHIP WITH THE CAREGIVER RESOURCE CENTERS: SO REALLY LOOK FORWARD TO ENGAGING ON THAT. ONE OF THE THINGS WE HAVE TALKED ABOUT INTERNALLY IS WITH THESE TRAININGS BECOMING AVAILABLE

11:18:28 THEY WILL BE FREE. THERE IS NOTHING THAT WOULD STOP FAMILY CARE GIVERS AND WORKING WITH ALL OF YOU TO MAKE THEM AVAILABLE TO THE WHOLE NETWORK. SO I THINK THAT THAT IS SOMETHING REALLY IMPORTANT TO LOOK INTO AND TO DISCUSS FURTHER. SO THANK YOU.

11:18:38 >> LET'S GO OUT TO BETSY AND THEN MICHAEL AND JEFFREY. SO BETSY, JUMP IN WHEN YOU ARE READY.

11:19:06 >> THANK YOU EVERYONE AND THANK YOU, SARAH FOR THIS, IT'S REALLY GREAT. CONSIDERING YESTERDAY WAS EQUAL PAY DAY FOR WOMEN, FOR WHITE WOMEN, FOR THE PEOPLE THAT WHO ARE DOING THE CAREGIVING OBVIOUSLY NOT A LOT OF WHITE WOMEN BUT A LOT OF WOMEN, WHICH BRINGS ME TO CONCERN ABOUT THE TERM "LIVING WAGE" IN THAT A LIVING WAGE IN CALIFORNIA IS MUCH DIFFERENT THAN A LIVING WAGE IN A LOT OF OTHER PLACES.

11:19:36 THIS NEED IS SO TREMENDOUSLY GREAT THAT WHAT IS THE DEFINITION OF A LIVING WAGE? IS IT 15 OR MORE THAN THAT. ANOTHER QUESTION THAT I HAVE IS I WAS GLAD TO SEE THE EVALUATION PART IN ALL OF THAT BUT THEN I WANTED TO SEE HOW YOU ARE GOING OUT, WHEN YOU SAY YOU WANT TO EXPAND THIS, WHERE ARE YOU GOING? WHO ARE YOU GOING TO? HOW ARE YOU -- I GET THE WHOLE PROGRAM IS AN INCENTIVE PACKAGE HOPEFULLY BUT ARE YOU GOING TO -- WHERE ARE YOU GOING?

11:19:42 HOW ARE WE GETTING THIS? HOW ARE WE GETTING THE HUGE NUMBER OFS PEOPLE WE NEED INVOLVED INVOLVED.

11:19:43 .

11:20:08 >> FIRST OF ALL, THANK YOU, BETSY. IT'S GREAT TO SEE YOU AND SUCH AN IMPORTANT QUESTION. I WILL ANSWER THAT OPERATIONAL QUESTION THAT YOU JUST ASKED AND THEN I WILL TURN TO JULIA BECAUSE I THINK, IF SHE IS STILL ON, IT WOULD BE GREAT TO GET HER INPUT ON THE CONCEPT OF THE LIVING WAGE BECAUSE IT IS REALLY CRITICAL AND I THINK IT RAISES A GREAT POINT ABOUT HOW WE CONCEPTUALIZE THAT HERE IN CALIFORNIA.

11:20:37 IN TERMS OF HOW WHAT I AM HEARING YOU ASK IS HOW WE ARE ACTUALLY GOING TO OUTREACH AND GET THE WORD OUT FOR THIS, FIRST WE HAVE TO DEFINE THE DENOMINATOR FOR THE WORKERS TO GET THE INSENSESTIVES AND WHEN WE DO THAT'S HALF THE CHALLENGE. THE REAL ISSUE WILL BE HOW WE MAKE SURE THEY KNOW ABOUT IT. THIS IS WHERE WE ARE WORKING WITH CLOSELY WITH DSS AND DHCS AND TO USE THEIR CHANNELS OF

11:21:01 COMMUNICATION BECAUSE, FOR EXAMPLE, CDA DOES NOT PAY -- WE DON'T HAVE A RELATIONSHIP, A PAYMENT RELATIONSHIP WITH THESE WORKERS. SO WE ARE NOT ABLE TO REACH OUT TO THEM, RIGHT? SO WE ARE GOING TO USE THE NETWORK AND CONNECTIONS THROUGH DHCS AND THROUGH DSS AND I WILL GIVE ONE EXAMPLE OF THAT.

11:21:33 DSS LICENSES THE HOME HEALTH AIDES. SO THEY HAVE A LIST OF ALL OF CALIFORNIA'S HOME HEALTH AIDES. THE CHALLENGE IS WE GET INTO THAT GRAY AREA. SOME OF HOME HEALTH AIDES DON'T PROVIDE SERVICES TO MEDI-CAL RECIPIENTS, SOME DO. WE ARE TRYING TO FIGURE OUT HOW WE CAN IDENTIFY THOSE IN THE MEDI-CAL SYSTEM. WE CAN IDENTIFY WHETHER IT HAS TO BE, IF THEY HAVE -- WHAT THE REQUIREMENTS WILL BE THERE AND THEN

11:21:56 UTILIZE THAT LIST AS A WAY TO OUTREACH TO THEM AND WHETHER IT'S THROUGH DIRECT TARGETED MAILING, OUTREACH THROUGH PUBLIC AWARENESS CAMPAIGNS. WE ARE GOING TO HAVE TO INVEST NOT ONLY THOUGHT LEADERSHIP BUT, ALSO, RESOURCES INTO GETTING THE WORD OUT BECAUSE IF WE ARE BUILDING ALL OF THIS AND PEOPLE DON'T COME, IT JUST WILL NOT ACHIEVE OUR GOAL.

11:22:10 SO I APPRECIATE THAT. THAT'S ANOTHER AREA WE ARE GOING TO BE REALLY LOOKING TO STAKEHOLDERS FOR INPUT ON. SUSAN, DID YOU WANT TO ADD ANYTHING TO THAT IN TERMS OF THE OUTREACH ISSUE?

11:22:11 >> NOPE. YOU COVERED IT VERY WELL.

11:22:19 >> OKAY. THANKS! SO I NOTE THAT JULIA WAS NOT ABLE TO STAY ON. SO --

11:22:20 >> I AM HERE. I AM HERE.

11:22:22 >> WHOA! YOU ARE.

11:22:22 >> UH-HUH.

11:22:28 >> AWESOME. JULIA, DID YOU WANT TO PROVIDE SOME COMMENTS ON THE LIVING WAGE.

11:22:55 >> IT'S A GREAT QUESTION. I DID MENTION WHEN WE WERE COVERING THE SLIDES, I THINK THE LOWEST ESTIMATION OF MINIMUM WAGE FOR CALIFORNIA FOR PROBABLY THE BETTER PART OF CALIFORNIA WHERE THE COST OF LIVING IS LOWER THAN \$18 AN HOUR AND THAT'S REALLY LOW. I THINK A BIG ISSUE FOR THESE WORKERS, I THINK WE, ALSO, MENTIONED THAT

11:23:34 HIGH PERCENTAGE, RIGHT, OF THE WORKERS ARE OVER HALF OF ELIGIBLE AND DEPEND ON PUBLIC [OFF MIC] AND THERE IS BENEFITS AND WHAT I LEARNED FROM MY CONVERSATIONS WITH THE UNITED DOMESTIC WORKERS AND SSI 2015, THE UNIONS WHO REPRESENT THE IHSS WORKERS AND A SMALL NUMBER OF NURSING HOMEWORKERS, IS THEY ESTIMATE THAT A LIVING WAGE WOULD HAVE TO BE AT A MINIMUM OF 24-\$26 TO COST FOR THAT, FOR THE RAISE TO MEAN SOMETHING IN CALIFORNIA.

11:23:57 AND TO ACCOUNT FOR THE GEOGRAPHICAL DIFFERENCES, RIGHT, SO IS THAT PEOPLE WHO ARE LIVING IN THE LARGER AREAS ALSO BENEFIT FROM THAT. IF YOU LOOK AT SOME OF THE OTHER MIT HAS A WAGE CALCULATOR AND IF YOU LOOK AT THAT FOR CALIFORNIA, THEY SAY THAT THE LIVING WAGE FOR A FAMILY WITH I THINK IT'S FOR A SINGLE PROVIDER WITH TWO CHILDREN IS \$40 AN HOUR.

11:23:59 >> SORRY. WHAT WAS THAT ORGANIZATION YOU JUST SAID?

11:24:01 >> IT'S THE MIT.

11:24:01 >> OKAY.

11:24:06 >> THEY HAVE A LIVING WAGE CALCULATOR.

11:24:07 >> OKAY. THANK YOU.

11:24:14 >> I THINK IT'S JUST STATE SPECIFIC SO IT DOES NOT ACCOUNT FOR THE DIFFERENCES IN STATE BUT IT'S EVEN HIGHER.

11:24:23 >> FABULOUS. AND THEN SO ONE LAST QUESTION. THE SLIDE PRODUCTION OR SLIDES THAT YOU JUST SHOWED, WE ARE GOING TO HAVE ACCESS TO THOSE, YEAH? YES?

11:24:24 >> YES. YES.

11:24:25 >> OKAY. THANK YOU.

11:24:30 >> THANK YOU, BETSY. MICHAEL, I KNOW YOU HAD YOUR HAND UP.

11:25:00 >> YES. ACTUALLY, THANK YOU FOR THE QUESTION, SOMETHING I WAS THINKING ABOUT BUT IN ADDITION TO THAT I WONDER AND THIS MAY COME DOWN THE ROAD WITH THE STAKEHOLDERS, HOW WE TALK ABOUT THIS WORK. NOT ONLY IDENTIFYING WHO THE FOLKS ARE, BUT HOW THIS IS EXPLAINED TO FOLKS, THE LANGUAGE THAT IS USED, TO UNDERSTAND WHAT A CAREER PATHWAY PIPELINE COULD LOOK LIKE FOR INDIVIDUALS. THAT WILL BE IMPORTANT AS WELL

11:25:20 THAT FOLKS KNOW THAT AGE IS AN ISSUE OF COURSE BUT AS YOU MOVE THROUGH THIS PIPELINE, DOES THAT COME ACROSS AS THESE ARE PROMOTIONAL OPPORTUNITIES, IF YOU WILL, LOOKING TO DO THESE STEPS BEFORE I GO TO A COMMUNITY COLLEGE OR WHATSOEVER THOSE STEPS ARE I THINK IS IMPORTANT TO CONSIDER IN THE PROCESS.

11:25:44 >> THANK YOU, MICHAEL. THAT'S A REALLY IMPORTANT POINT OF HOW WE ACTUALLY EXPLAIN WHAT IT IS THAT WE ARE TRYING TO PROMOTE AND THE WORD CAREER LADDER CAREER LATTICES CAN MEAN DIFFERENT THINGS TO MANY DIFFERENT PEOPLE SO WE WILL HAVE TO THINK CAREFULLY ABOUT HOW TO COMMUNICATE IT AND HOW TO ENSURE THAT PEOPLE ARE TAKING ADVANTAGE OF THE OPPORTUNITIES AS THEY WISH TO DO SO.

11:25:47 SO THANK YOU FOR THAT FEEDBACK.

11:25:50 >> THANK YOU. LET'S GO TO JEFFREY.

11:26:27 >> SURE. GOOD MORNING, EVERYONE. MY QUESTION IS RELATED TO THE INTERSECTION OF DISABILITY AND IMMIGRATION STATUS. WE HAVE BEEN WORKING WITH DHCSS GEARING UP. REALLY EXCITING THAT MEDI-CAL WILL BE EXPANDED 0 THOSE AGES 50 AND UP AND AS PART OF THAT WE ARE LEARNING THERE WILL BE A SUB SET OF THAT POPULATION THAT WILL BE ELIGIBLE FOR IHSS AND WE HAVE NOT GOTTEN A NUMBER OF THAT. SOMEWHERE FROM THE STATE LEO, I THINK WE HAVE 2,500.

11:26:54 WE THINK IT'S AN UNDER ESTIMATION, AS WE THINK WHO IS ELIGIBLE TO TAKE CARE OF THIS NEWLY POPULATION, THE FIRST FOLKS THAT COME TO MIND ARE FAMILY CAREGIVERERS WHO MAY BE UNDOCUMENTED, SO CURIOUS, A, DOES THE DEPARTMENT HAVE GOOD ESTIMATES ON THIS EXPANDED PLACE AND THEN B, ON THE CARETAKER PIECE, AS YOU ARE THINKING THROUGH KIND OF THE FRAMEWORK

11:27:18 OF THESE DIFFERENT CATEGORIES OF WORKERS, PARTICULARLY THOSE IN THE GRAY MARKET AREA, JUST A RECOGNITION THAT MANY OF THEM ARE UNDOCUMENTED IMMIGRANT WOMEN AND WHAT RESOURCES ARE WE PROVIDING. IT MAY NOT THROUGH IHSS BUT RESOURCES ARE WE PROVIDING FOR THEM TO HAVE ACCESS TO SOME OF THESE TRAININGS BUT, ALSO, A LIVING WAGE AND

11:27:21 CONTRACTS.

11:27:39 HIGHEST LEVEL OF CARE AND

11:27:41 >> AND WHAT DOES THAT LOOK LIKE?

11:27:43 THAT'S CERTAINLY SOMETHING WE'RE LOOKING

11:27:43 TO RIGHT NOW.

11:27:45 I APPRECIATE YOU BRINGING UP THE QUESTION

11:27:49 OR THE POINT ABOUT THE EXPANSION TO

11:27:51 UNDOCUMENTED INDIVIDUALS OVER THE AGE OF

11:27:51 50.

11:27:57 IT'S REALLY EXCITING AND I THINK AS YOU

11:27:58 ABSOLUTELY SAID, WE HAVE TO THINK ABOUT

11:28:01 WHAT THAT MEANS FOR SERVICE DELIVERY AND



11:28:03 TRYING TO KIND OF ESTIMATE WHAT IMPACT IT  
11:28:07 WILL HAVE AND ENSURING, AGAIN, CULTURAL  
11:28:09 COMPETENCY AND LANGUAGE ACCESS.  
11:28:10 THAT'S SOMETHING THAT IS SO CRITICAL IN  
11:28:13 ALL OF THIS THAT ONE OF THE POTENTIAL  
11:28:18 PARTNERS IN THIS, WHAT'S SUPER EXCITING IS  
11:28:21 THERE'S TECHNOLOGIES THAT ENABLE THEM TO  
11:28:24 PROVIDE -- DEVELOP TRAININGS IN UP TO SAY  
11:28:25 15 LANGUAGES.  
11:28:27 THAT'S SOMETHING THAT WE'RE REALLY LOOKING  
11:28:29 CLOSELY AT, BUT I APPRECIATE THE COMMENT  
11:28:31 AND QUESTION ABOUT UNDOCUMENTED  
11:28:34 INDIVIDUALS AND I DON'T KNOW IF -- I DON'T  
11:28:36 HAVE ANY SPECIFIC NUMBERS RIGHT NOW, BUT  
11:28:40 CERTAINLY WE'LL BE WORKING WITH DHCS TO  
11:28:49 INCLUDE THAT INTO OUR ESTIMATES.  
11:28:55 >> I AGREE THAT'S AN EXCELLENT QUESTION.  
11:28:58 IN THE FRAMEWORK OR CONTEXT, THERE ARE  
11:29:02 SOME EXISTING COOPERATIVES THAT -- AND IF  
11:29:05 YOU'RE FAMILIAR WITH THAT STRUCTURE, IT  
11:29:07 ALLOWS MEMBERSHIP IN THE COOPERATIVE.  
11:29:09 IT'S NOT TECHNICALLY EMPLOYMENT.  
11:29:13 AND SO THAT IS REGARDLESS OF IMMIGRATION  
11:29:13 STATUS.  
11:29:18 THERE IS A COOPERATIVE IN THE L.A. AREA  
11:29:21 BASED OUT OF THE WORKING CENTER CALLED  
11:29:24 COURAGE LLC AND THEY ARE SEEKING TO EXPAND  
11:29:28 THEIR NETWORK AND TO GROW IN LOS ANGELES  
11:29:31 AND OTHER AREAS WITHIN THE STATE.

11:29:35 AND THEY ARE DOING THAT IN PART WITH  
11:29:40 FUNDING THROUGH THE EMPLOYMENT TRAINING  
11:29:45 PANEL, A SPECIAL PROGRAM WHICH -- I CANNOT  
11:29:46 REMEMBER -- I CAN NEVER REMEMBER WHAT IT  
11:29:50 STANDS FOR, BUT IT'S SPECIFICALLY FOR  
11:29:52 IMMIGRANT ENTREPRENEURSHIP.  
11:29:57 AND THERE IS ONE OF THE SORT OF OVERLAP  
11:30:02 BETWEEN THE GRAY MARKET AND POTENTIALLY  
11:30:04 IHSS IS THAT THEY -- ONE OF THE QUESTIONS  
11:30:06 THEY'RE EXPLORING IN THEIR EFFORT TO  
11:30:08 EXPAND IS WHETHER THE COUNTY OR THE AGENCY  
11:30:11 MODEL EXISTS AND AS FAR AS I KNOW THAT'S  
11:30:15 ONLY TWO COUNTIES CURRENTLY, BUT WHETHER  
11:30:17 THOSE PUBLIC AUTHORITIES COULD CONTRACT  
11:30:20 WITH THE COOPERATIVE AS THE AGENCY THERE  
11:30:24 BY ALLOWING UNDOCUMENTED FAMILY MEMBERS TO  
11:30:30 BECOME IHSS PROVIDERS.  
11:30:37 THAT'S STILL VERY MUCH AN EXPLORATION.  
11:30:40 >> I KNOW WE'RE RUNNING A LITTLE BEHIND  
11:30:42 SCHEDULE, SO I WOULD ENCOURAGE US TO MOVE  
11:30:45 ON TO THE NEXT AGENDA ITEM AND OF COURSE  
11:30:47 COMMITTEE MEMBERS, IF YOU WANT TO CONTINUE  
11:30:49 TO ENGAGE ON THE WORKFORCE TOPIC, YOU ARE  
11:30:51 WELCOME TO USE THE CHAT FEATURE TO DO SO.  
11:30:54 AND WITH THAT, I WOULD LIKE TO WELCOME  
11:31:03 CONNIE NAKANO.  
11:31:05 OR MAYBE IT'S JILLIAN THAT GOES NEXT.  
11:31:07 >> I'M HERE.  
11:31:09 GOOD MORNING, EVERYONE.

11:31:13 MY NAME IS CONNIE NAKANO AND I AM THE  
11:31:14 COMMUNICATIONS DIRECTOR FOR THE DEPARTMENT  
11:31:14 OF AGING.

11:31:16 WE'LL BE DISCUSSING A LITTLE BIT ABOUT THE  
11:31:20 MASTER PLAN FOR AGING'S OUTREACH INCLUDING  
11:31:21 TOGETHER WE ENGAGE CAMPAIGN.

11:31:24 WE'RE EXCITED TO BUILD UPON CURRENT WORK  
11:31:26 THAT HAS ALREADY BEEN AND WE RECOGNIZE  
11:31:29 THERE'S MUCH MORE TO DO TO MAKE SURE THE  
11:31:31 OUTREACH IS EQUITABLE AND ALSO REACHING  
11:31:33 THE CONSUMERS THAT ARE REPRESENTATIVE OF  
11:31:35 CALIFORNIA'S AGING POPULATION.

11:31:38 WE ARE LOOKING FORWARD TO WORKING WITH OUR  
11:31:41 NEW COMMUNICATIONS FIRM, RSE, WHICH WILL  
11:31:43 HELP DEVELOP AND LEAD US THROUGH A  
11:31:44 STRATEGIC COMMUNICATIONS STRATEGY.

11:31:47 SO I'D LIKE TO INTRODUCE JILLIAN RICE FROM  
11:31:50 RSE TO GIVE US A BRIEF OVERVIEW BUT WE'LL  
11:31:52 BE LOOKING AT OVER THE NEXT COMING  
11:31:52 MONTHS.

11:31:53 JILLIAN.

11:31:54 >> HI.

11:31:55 THANK YOU, CONNIE.

11:31:56 GOOD MORNING, EVERYONE.

11:31:58 THANKS FOR LETTING ME JOIN YOU TODAY AND  
11:32:00 TAKE SOME TIME TO TALK ABOUT THIS.

11:32:03 WE'RE REALLY EXCITED TO COME ON BOARD AND  
11:32:06 SUPPORT THE COMMUNICATIONS EFFORTS, SO I  
11:32:08 KNOW WE'RE A LITTLE PWRAO\*EUPBD.

11:32:10 BEHIND.

11:32:14 I WILL INTRODUCE RSE AND MYSELF AND TALK

11:32:16 ABOUT THE SCOPE AND WHAT YOU CAN EXPECT TO

11:32:16 SEE.

11:32:19 FOR THOSE OF YOU WHO AREN'T FAMILIAR, WE

11:32:20 ARE A SACRAMENTO BASED FULL SERVICE

11:32:20 AGENCY.

11:32:24 WE'VE BEEN AROUND FOR JUST OVER 60 YEARS.

11:32:28 WE HAVE IN-HOUSE CREATIVE, MEDIA,

11:32:28 DIGITAL.

11:32:32 WE DO BOTH PUBLIC MEDIA, PAID

11:32:33 ADVERTISEMENTS AS WELL AS PUBLIC RELATIONS

11:32:35 FOR OUR CLIENTS.

11:32:38 WE PRIMARILY WORK ON SOCIAL IMPACT

11:32:40 MARKETING, SO MOSTLY WE DO BEHAVIOR

11:32:44 CHANGE, PUBLIC AWARENESS CAMPAIGNS RATHER

11:32:46 THAN PROMOTING SALES FOR PRIVATE

11:32:46 COMPANIES.

11:32:48 SO WE HAVE A LOT OF GOVERNMENT

11:32:52 FOUNDATIONAL CLIENTS RECENTLY SUPPORTING A

11:32:54 LOT OF THE COVID EFFORTS OUT OF THE

11:32:59 GOVERNOR'S OFFICE, YOU KNOW

11:33:01 CAL FRESH, THINGS LIKE THAT.

11:33:03 MY NAME IS JILLIAN.

11:33:05 MY PRONOUNS ARE SHE AND HER.

11:33:07 I AM AN ACCOUNT SUPERVISOR AND I'LL BE THE

11:33:10 MAIN LEAD FOR OUR TEAM THAT'S WORKING ON

11:33:11 SUPPORTING MPA COMMUNICATIONS.

11:33:13 A BIT ABOUT MY BACKGROUND.

11:33:15 FOR THE LAST DECADE I'VE WORKED IN  
11:33:17 COMMUNICATIONS RELATED TO PUBLIC POLICY.  
11:33:20 MOST OF THAT HAS BEEN IN THE HEALTHCARE  
11:33:20 SPACE.  
11:33:22 IN PUBLIC PRIVATE NONPROFIT.  
11:33:25 SO I HAVE A BIT OF A TASTE ALL AROUND  
11:33:28 CARRYING POLICY IDEAS FROM DEVELOPMENT TO  
11:33:28 IMPLEMENTATION.  
11:33:31 AND A LOT OF WORK IN THE OUTREACH SPACE  
11:33:34 RELATED TO HEALTHCARE PROGRAMS, SO I  
11:33:36 WORKED WITH A LOT OF DIVERSE COMMUNITIES  
11:33:39 AROUND DIFFERENT HEALTH TOPICS, YOU KNOW,  
11:33:43 ORAL HEALTH, BEHAVIORAL HEALTH, CULTURALLY  
11:33:46 COMPETENT, WORKING ON ACCESS AND QUALITY  
11:33:48 ISSUES, HEALTH DISPARITIES AND DELIVERY  
11:33:53 SYSTEM INTEGRATION PROJECTS.  
11:33:56 SO A LOT OF FAMILIAR ACRONYMS AND FAMILIAR  
11:33:57 FACES ON THE CALL.  
11:33:58 EXCITED TO DIVE INTO THIS.  
11:34:01 SO AS YOU'RE ALL PRETTY AWARE, THERE'S A  
11:34:05 LOT OF MOVING PIECES IN THE MASTER PLAN.  
11:34:07 SO WHEN WE'RE LOOKING AT OUR  
11:34:10 COMMUNICATIONS CONSULTING AND WHAT ARE  
11:34:12 PROJECT DELIVERABLES AND SCOPE, WE WANT TO  
11:34:14 KIND OF GIVE A FRAMEWORK.  
11:34:16 WE JUST HAD OUR KICKOFF A WEEK AGO, SO  
11:34:17 FAIRLY DIVING INTO THE WORK.  
11:34:19 WE WILL BE SUPPORTING THIS THROUGH AT  
11:34:20 LEAST THE END OF THE YEAR.

11:34:25 OUR MAJOR TASK IS REALLY HELPING WITH THE  
11:34:29 FPA BRAND COMMUNICATIONS, SO WORKING ON  
11:34:31 COMMUNICATIONS PLAN, AUDITING KIND OF THE  
11:34:33 EXISTING MATERIALS, THE EXISTING  
11:34:34 COMMUNICATIONS CHANNELS, AND REALLY  
11:34:37 WORKING ON HOW WE CAN IMPROVE MESSAGING  
11:34:40 AND TELL THAT STORY BETTER.  
11:34:45 WE WILL ALSO BE ENGAGING IN  
11:34:47 MEDIA RELATIONS WORK AS WELL AS SOME  
11:34:49 PARTNERSHIP OUTREACH RELATED TO SOME OF  
11:34:53 THE GOALS AND EVENTS THAT CDA HAS PLANNED  
11:34:57 THROUGHOUT THE END OF THE YEAR AS WELL.  
11:35:01 SO IN OUR COMMUNICATIONS PLAN, AS I  
11:35:03 MENTIONED, OUR GOAL REALLY IS TO INCREASE  
11:35:06 THE AWARENESS AND PARTICIPATION IN THE  
11:35:08 MASTER PLAN.  
11:35:11 SO TELLING THE STORY OF THE MPA IN A MORE  
11:35:14 HUMAN AND ACCESSIBLE WAY, WHICH IS ALWAYS  
11:35:18 A KEY THING I THINK FOR HEALTHCARE  
11:35:18 INITIATIVES.  
11:35:21 TELLING WHY THIS IS IMPORTANT FOR ALL  
11:35:24 CALIFORNIANS, NOT JUST OLDER ADULTS.  
11:35:26 AND THEN WHEN WE LOOK AT WHEN WE'RE  
11:35:29 GATHERING INPUT, WHO ARE WE GATHERING IT  
11:35:29 FROM?  
11:35:32 HOW ARE WE GATHERING IT?  
11:35:35 MAKING SURE WE CAN MAKE ANY IMPROVEMENTS  
11:35:35 THERE.  
11:35:38 SOME OF THE DIFFERENT TARGET AUDIENCE

11:35:45 BUCKETS WE'RE LOOKING AT ARE THE PUBLIC,  
11:35:47 STAKEHOLDERS, PHILANTHROPY AND THE  
11:35:49 LEGISLATURE, SO A LOT OF AUDIENCES TO WORK  
11:35:49 WITH.  
11:35:52 I THINK ONE OF THE MAIN THINGS THAT I'D  
11:35:55 LOVE TO HEAR FROM THIS GROUP IS JUST, YOU  
11:35:58 KNOW, AN INVITATION FOR YOUR FEEDBACK.  
11:36:00 SOME OF THE THINGS THAT WE'RE ALREADY  
11:36:03 LOOKING FOR IN TERMS OF REACHING  
11:36:05 UNDERSERVED DIVERSE COMMUNITIES, YOU KNOW,  
11:36:07 I NOTICE THAT THERE HAS NOT BEEN A LOT OF  
11:36:09 DIFFERENT LANGUAGES THAT COMMUNICATIONS  
11:36:10 HAVE GONE OUT IN.  
11:36:13 THERE'S MULTIPLE WEBSITES.  
11:36:16 THE COLLATERAL HAS BEEN VERY STAKEHOLDER  
11:36:20 FOCUSED RATHER THAN PUBLIC FOCUSED.  
11:36:22 AND SO THOSE ARE THINGS THAT WE'RE ALREADY  
11:36:23 KIND OF LOOKING AT.  
11:36:24 WHO IS AT THE TABLE.  
11:36:28 WHO NEEDS TO BE AT THE TABLE THAT'S  
11:36:28 MISSING.  
11:36:30 ARE WE LEVERAGING THE COMMUNICATIONS  
11:36:34 CHANNELS THAT WE ALREADY HAVE ACCESS TO.  
11:36:38 AND ARE WE SIMPLE ENOUGH IN OUR MESSAGING,  
11:36:40 YOU KNOW, FOR IT TO BE DIGESTIBLE.  
11:36:43 AGAIN, THOSE ARE A FEW THINGS WE'RE  
11:36:45 STARTING TO WORK ON A BROAD PICTURE OF OUR  
11:36:49 PROJECT AND TASK TO DATE.  
11:36:51 BUT WOULD LOVE TO HEAR FROM YOU GUYS IF

11:36:54 YOU HAVE INPUT ON HOW WE CAN IMPROVE THESE

11:36:56 AREAS, YOU KNOW, CHALLENGES OR SUCCESSES

11:37:00 TO DATE TO BUILD UPON WOULD WELCOME THAT

11:37:12 FEEDBACK AS WELL.

11:37:14 >> WE'VE GOT A COUPLE OF HANDS RAISED.

11:37:17 I'M WONDERING IF WE CAN GO INTO GALLERY

11:37:20 MODE, NANCY.

11:37:22 WE'VE GOT DONNA AND THEN MICHAEL.

11:37:23 GO AHEAD, DONNA.

11:37:26 >> ONE OF THE QUESTIONS WAS WHAT ELSE

11:37:28 COULD WE ADD, AND I DON'T KNOW IF IT

11:37:30 WOULD -- IF THIS IS SOMETHING WE CAN DO,

11:37:36 BUT IT WOULD BE NICE TO HAVE THE DAY -- OF

11:37:39 WHERE PRESENTATIONS ARE OR WHERE WE'VE

11:37:41 DONE THINGS ABOUT THE MASTER PLAN ON AGING

11:37:45 SO THAT MAYBE IF SOMEBODY IS TALKING ABOUT

11:37:47 IT, LIKE WHENEVER -- OTHER PEOPLE COULD

11:37:51 JUST JOIN BECAUSE THERE WOULD BE A LINK IF

11:37:52 IT'S A PUBLIC FORUM.

11:37:55 MANY TIMES I'M DOING THINGS AND IT IS A

11:37:57 PUBLIC FORUM AND ANYONE CAN JOIN BUT IT'S

11:38:02 NOT DIRECTLY WITH CDA.

11:38:02 >> GREAT.

11:38:03 THANK YOU.

11:38:05 MICHAEL?

11:38:10 >> HI, JILLIAN.

11:38:13 BASED ON WORK THAT ARP HAS BEEN DOING WITH

11:38:18 DONNA AND WITH 211, ON A LATINO CAREGIVER

11:38:19 PROGRAM, ONE OF THE THINGS WE FOUND THAT'S



11:38:23 REALLY IMPORTANT IS WHICH WORDS DO OR DO  
11:38:24 NOT TRANSLATE?  
11:38:28 AND HOW YOU TALKED ABOUT THE WHOLE RANGE  
11:38:31 OF THE MPA COVERS AND THAT LEVEL OF  
11:38:33 SENSITIVITY WHEN IT COMES TO MESSAGING FOR  
11:38:40 WHAT MAY BE MEANINGFUL OR NOT TO CERTAIN  
11:38:43 POPULATIONS.  
11:38:48 >> MICHAEL, ANYBODY ELSE?  
11:38:51 I JUST WANT TO HIGHLIGHT, JILLIAN, THAT  
11:38:53 THERE'S SOME REQUESTS FOR CONTACT  
11:38:56 INFORMATION IN THE CHAT IF YOU'RE WILLING  
11:38:57 TO SHARE.  
11:38:58 >> DEFINITELY.  
11:39:00 >> GREAT.  
11:39:03 NOT SEEING ANY ADDITIONAL HANDS.  
11:39:07 SO WE WILL MOVE ON TO I BELIEVE OUR NEXT  
11:39:08 SEGMENT IS PUBLIC COMMENT.  
11:39:11 THANK YOU SO MUCH, JILLIAN AND CONNIE FOR  
11:39:15 THAT GREAT PRESENTATION.  
11:39:17 WONDERFUL.  
11:39:18 THANK YOU.  
11:39:21 SO JUST A REMINDER FOR THOSE WHO ARE  
11:39:24 JOINING US TODAY, PUBLIC COMMENT, IF YOU  
11:39:27 ARE USING YOUR COMPUTER, YOU CAN USE THE  
11:39:30 RAISE HAND ICON ON YOUR ZOOM TOOL BAR AND  
11:39:32 THAT WILL PUT YOU INTO THE QUEUE FOR  
11:39:33 VERBAL COMMENT.  
11:39:36 THOSE JOINING US BY PHONE ONLY, YOU CAN  
11:39:39 PRESS \*9 AND THAT WILL ADD YOU TO THE

11:39:39 QUEUE.

11:39:43 I'VE SEEN A COUPLE OF HANDS UP.

11:39:50 MONTY, I APOLOGIZE IF I'M MISPRONOUNCING.

11:39:58 YOUR LINE IS OPEN.

11:40:00 WE'LL SWING BACK AROUND.

11:40:11 MAYBE THAT HAND WAS UP ON ACCIDENT.

11:40:13 AND I'M NOT SEEING ANY ADDITIONAL

11:40:15 QUESTIONS OR COMMENTS, SO MAYBE WHAT I CAN

11:40:18 DO IS TURN IT BACK TO SUSAN AND SORT OF

11:40:21 PUT SUSAN ON THE SPOT TO EITHER CLOSE OUT

11:40:22 OR TO DIRECT US TO HAVE A LITTLE BIT MORE

11:40:28 TIME WITH THE COMMITTEE.

11:40:30 >> THANK YOU, MARIYA.

11:40:32 THANK YOU TO OUR PRESENTERS.

11:40:34 THOSE WERE TWO GREAT OVERVIEWS.

11:40:37 AND TO THE COMMITTEE MEMBERS, THANK YOU

11:40:40 FOR YOUR -- ACTUALLY, THREE GREAT

11:40:40 OVERVIEWS.

11:40:42 WE HAVE THREE PRESENTATIONS.

11:40:44 THANKS TO ALL OF OUR PRESENTERS AND TO

11:40:47 YOUR THOUGHTFUL QUESTIONS.

11:40:49 I'M GLAD THAT WE HAVE A FEW EXTRA MINUTES

11:40:50 BEFORE WE WRAP UP HERE.

11:40:52 THERE ARE A COUPLE OF THINGS THAT I WANTED

11:40:54 TO CIRCLE BACK AROUND ON AT THE CLOSE OF

11:40:57 THE MEETING.

11:41:02 SO THE FIRST IS IN THE MASTER PLAN FOR

11:41:05 AGING ORG CHART, SO TO SPEAK, WE HAVE THE

11:41:08 IMPACT COMMITTEE THAT KEVIN SERVES ON.

11:41:11 KEVIN IS WITH US TODAY.

11:41:15 SO IMPACT IS THE GROUP THAT HAS BEEN  
11:41:19 CHARGED WITH SORT OF MONITORING AND  
11:41:20 OVERSIGHT AND STEWARDING THE MASTER PLAN  
11:41:22 FOR AGING.

11:41:24 AND WE HAVE MADE A COMMITMENT TO THE  
11:41:29 IMPACT COMMITTEE THAT WE WILL BRING -- WE  
11:41:31 WILL SUMMARIZE EACH OF OUR MEETINGS FOR  
11:41:33 THE IMPACT COMMITTEE SO THEY KNOW WHAT WAS  
11:41:38 TALKED ABOUT AND WHAT'S IMPORTANT TO CARRY  
11:41:38 FORWARD.

11:41:40 SO WE'VE TAKEN NOTES TODAY THAT I WANTED  
11:41:42 TO HEAR FROM YOU IF THERE'S ANYTHING THAT  
11:41:45 ANY OF YOU ON THIS ADVISORY COMMITTEE  
11:41:48 WOULD LIKE TO SHARE WITH THE IMPACT  
11:41:51 COMMITTEE AT THEIR NEXT MEETING THAT YOU  
11:41:54 THINK IS IMPORTANT TO CARRY FORWARD TO  
11:41:54 THAT GROUP.

11:41:56 OF COURSE, KEVIN IS HERE.

11:41:59 SO HE'S LISTENING AS WELL.

11:42:02 AND -- BUT IF THERE ARE ANY THOUGHTS FOR  
11:42:04 THE IMPACT COMMITTEE THAT YOU'D LIKE US TO  
11:42:07 CONVEY, WE'RE TRYING -- THERE WAS A LITTLE  
11:42:10 BIT OF A CART BEFORE THE HORSE, BUT NOW  
11:42:15 WE'RE SYNCING UP FOR THESE  
11:42:18 MEETINGS TO MEET INTO THE IMPACT COMMITTEE  
11:42:20 SO WE'RE NOT IN ARREARS ANY LONGER.

11:42:21 ANY THOUGHTS FROM THE GROUP?

11:42:23 YOU CAN FOLLOW-UP AFTER THE MEETING WITH

11:42:24 ME AS WELL.

11:42:28 OR WITH KEVIN AS YOUR LIAISON TO THAT

11:42:28 GROUP.

11:42:36 NOT SEEING ANY HANDS RAISED.

11:42:38 OKAY.

11:42:42 AND THEN I DID WANT TO JUST GO BACK TO

11:42:45 WHAT I SHARED ABOUT NURSING HOME ISSUES.

11:42:49 I'M GOING TO PUT IN THE CHAT, I HOPE MANY

11:42:51 OF YOU ARE FAMILIAR WITH WHAT WAS RELEASED

11:42:55 BY THE WHITE HOUSE IN FEBRUARY.

11:42:58 AND I'M GOING TO SHARE WITH YOU THE

11:43:02 FULLEST OF RECOMMENDATIONS THAT CAME OUT

11:43:05 AND I WANTED TO CALL YOUR ATTENTION, YOU

11:43:07 KNOW, I OFTEN DO A WORD SEARCH FOR EQUITY

11:43:11 ON DOCUMENTS TO SEE, AND I WAS THRILLED

11:43:13 WHEN I DID THE CONTROL F ON THIS DOCUMENT

11:43:16 AND SAW THAT EQUITY WAS MENTIONED 16 TIMES

11:43:20 AND THEN I REALIZED 15 OF THE TIMES IT WAS

11:43:24 EQUITY PARTNERS FOR NURSING HOME

11:43:24 PURCHASES.

11:43:28 AND THE WORD EQUITY AS WE USE THE WORD

11:43:30 EQUITYs ONLY MENTIONED IN THE FINAL

11:43:35 BULLET IN THIS DOCUMENT.

11:43:38 AND IF YOU TAKE A LOOK IT SAYS AN EQUITY

11:43:38 LENS.

11:43:44 SO IN THE STAGING OF THINGS WITH THE MAY

11:43:48 REVISE AND THE NURSING HOME GREAT REFORM

11:43:51 EFFORTS TAKING PLACE BEFORE THE END OF

11:43:54 JUNE IN CALIFORNIA, I WANT TO UNDERSCORE

11:43:58 HOW IMPORTANT THE VOICE OF THIS COMMITTEE  
11:44:00 IS AND WHETHER YOU USE YOUR VOICES  
11:44:04 INDIVIDUALLY FOR YOUR ORGANIZATIONS OR  
11:44:07 COLLECTIVELY IF IT WERE AS SIMPLE AS SOME  
11:44:09 PRINCIPLES AND VALUES OF THIS ADVISORY  
11:44:13 COMMITTEE THAT YOU WANTED TO SHARE AND BE  
11:44:16 ON RECORD.

11:44:19 IF YOU WOULD CONSIDER THAT IN BETWEEN, YOU  
11:44:22 KNOW, BY THE TIME THIS GROUP MEETS AGAIN  
11:44:25 IN JUNE, THE BUDGET WILL BE FINAL OR CLOSE  
11:44:27 TO FINAL AND THE LEGISLATIVE SESSION WILL  
11:44:29 BE WRAPPING UP.

11:44:31 SO IF THAT'S SOMETHING THAT THIS GROUP  
11:44:36 WANTED TO PURSUE INDEPENDENTLY AND PUT  
11:44:38 TOGETHER SOME THOUGHTS, A SIMPLE LETTER  
11:44:43 AND COMMENTS BUILDING OFF OF THAT FINAL  
11:44:48 BULLET IN THE WHITE HOUSE PRESS -- I'LL  
11:44:50 PULL IT UP.

11:44:53 AT THE VERY, VERY END IT SAYS INTEGRATE  
11:44:55 PANDEMIC LESSONS INTO NURSING HOME  
11:45:01 REQUIREMENTS AND IT SAYS USING AN EQUITY  
11:45:01 LENS.

11:45:06 SO KNOWING THE DEMOGRAPHIC PROFILE AND WHO  
11:45:08 IS ON MEDI-CAL IN OUR STATE AND WHO IS  
11:45:11 LIVING IN CALIFORNIA'S NURSING HOMES, WE  
11:45:18 WOULD REALLY WELCOME YOUR INPUT ON THAT  
11:45:18 TOPIC.

11:45:23 AND THEN FROM THE CDA PERSPECTIVE, WE'D  
11:45:26 LOVE TO HEAR NOW PUT YOU ON THE SPOT OR IN

11:45:33 BETWEEN MEETINGS WHAT  
11:45:34 TOPICS ARE OF GREATEST INTEREST.  
11:45:36 ONE SUGGESTION AND IT RELATES A BIT TO  
11:45:41 NURSING HOME REFORM, BUT CDA NOW HAS THE  
11:45:43 OFFICE -- HAS NOW ESTABLISHED THE OFFICE  
11:45:45 OF THE PATIENT REPRESENTATIVE AND SUSAN  
11:45:47 RODRIGUEZ IS LEADING THAT EFFORT AND  
11:45:51 BUILDING A TEAM AROUND HER.  
11:45:53 THIS OFFICE IS FOCUSED ON INDIVIDUALS AND  
11:45:56 NURSING HOMES WHO DO NOT HAVE FAMILY, WHO  
11:46:00 ARE NOT REPRESENTED, AND THIS IS WELL  
11:46:03 BEYOND THE ROLE OF THE STATE LONG-TERM  
11:46:06 CARE OMBUDSMAN THAT WE INCREASINGLY ARE  
11:46:08 SEEING NURSING HOME RESIDENTS IN OUR STATE  
11:46:10 WHO ARE UNREPRESENTED.  
11:46:15 THIS TIES TO THE -- A LITTLE BIT OF WHAT  
11:46:18 KATHERINE MENTIONED IN THE ELDER  
11:46:20 JUSTICE -- ELDER AND DISABILITY JUSTICE  
11:46:23 SPACE AND IT'S A TOPIC THAT'S BEING  
11:46:25 DISCUSSED AT THE ELDER AND DISABILITY  
11:46:27 JUSTICE COORDINATING COUNCIL AS WE BUILD  
11:46:33 OUT THAT LANDSCAPE ACROSS THE STATE FOR  
11:46:41 APS, LONG-TERM CARE OMBUDSMAN  
11:46:44 LEGAL SERVICES, AND A HOST OF ISSUES  
11:46:47 AROUND ADVANCED DIRECTIVES, PLACEMENT  
11:46:49 ISSUES, TRANSFER, DISCHARGE, SO THAT MIGHT  
11:46:52 BE A TOPIC THAT GROUP MIGHT WANT TO HEAR  
11:46:54 FROM IN THE FUTURE, THE NEW OFFICE OF THE  
11:46:55 PATIENT REPRESENTATIVE.

11:46:58 AND NOW I'LL STOP TALKING AND I'D LOVE TO

11:47:07 HEAR ANY THOUGHTS FROM ALL OF YOU.

11:47:12 AMANDA HAS HER HAND RAISED.

11:47:15 >> I JUST WANTED TO, BUILDING ON THAT,

11:47:18 THANK THE FOLKS ON THIS COMMITTEE WHO

11:47:20 VOLUNTEERED TO JOIN THE ELDER AND

11:47:22 DISABILITY JUSTICE COORDINATING COUNCIL'S

11:47:24 EQUITY FRAMEWORK WORK GROUP.

11:47:26 I ALSO WANTED TO LET YOU KNOW THAT THERE

11:47:28 IS A SEPARATE WORK GROUP FOR THAT COUNCIL

11:47:31 THAT IS FOCUSED ON BUILDING OUT THAT

11:47:33 LANDSCAPE OF WHAT IS THE EQUITY AND

11:47:36 DISABILITY JUSTICE NETWORK IN CALIFORNIA

11:47:37 AND IDENTIFYING THOSE GAPS.

11:47:41 SO IF ANYONE HERE IS INTERESTED TO DO SOME

11:47:43 OF THAT WORK WITH THE COUNCILMEMBERS,

11:47:45 PLEASE GO AHEAD AND SEND ME AN EMAIL.

11:47:46 I'M SURE THEY'D BE HAPPY TO HAVE

11:47:47 ADDITIONAL FOLKS ON BOARD.

11:47:57 THANK YOU.

11:47:58 >> GREAT.

11:48:01 SUSAN, I'M WONDERING BEFORE WE LOG OFF, IT

11:48:03 DOES LOOK LIKE WE HAVE ONE AUDIENCE MEMBER

11:48:05 WHO HAS THEIR HAND RAISED.

11:48:07 I KNOW WE WERE AHEAD OF SCHEDULE, SO MAYBE

11:48:09 WE CAN SWING BACK AROUND TO THAT IF YOU'RE

11:48:11 OPEN TO IT.

11:48:12 >> ABSOLUTELY.

11:48:15 >> CINDY, WE'VE OPENED YOUR LINE.

11:48:16 >> HI.

11:48:17 THANK YOU SO MUCH.

11:48:19 THANKS FOR EVERYTHING.

11:48:20 REALLY GOOD STUFF.

11:48:23 I JUST WANT TO KNOW, AND I MAY HAVE -- YOU

11:48:26 MAY HAVE SAID THIS AND I HAD TO WALK AWAY

11:48:27 FOR A FEW MINUTES.

11:48:31 I WANT TO KNOW IF THERE IS A PHONE LIST OR

11:48:33 A CONTACT LIST FOR THE PEOPLE WE SHOULD

11:48:37 GET IN TOUCH WITH IF WE WANT TO GET

11:48:40 INVOLVED IN A SUBCOMMITTEE?

11:48:42 JUST CURIOUS.

11:48:45 I AM UNCLEAR ABOUT THAT AND I'VE BEEN

11:48:47 UNCLEAR ABOUT IT AND I WANT TO MAKE SURE

11:48:53 THAT WE ALL KNOW WHO TO REACH OUT TO.

11:48:55 >> GREAT QUESTION, CINDY.

11:48:57 I THINK THE BEST ROUTE WOULD BE I'M

11:49:00 ASSUMING YOU'RE TALKING ABOUT WORK GROUPS

11:49:03 AT LARGE AND NOT JUST FOCUSED ON THIS ONE

11:49:07 WOULD BE TO USE THE ENGAGE INBOX AND WE

11:49:09 WILL GET RIGHT BACK TO YOU.

11:49:11 AND THAT WAY YOU CAN OPEN THE DIALOGUE

11:49:14 WITH SOMEBODY TO MEET YOUR NEEDS AND MATCH

11:49:16 WITH YOUR INTERESTS.

11:49:17 >> OKAY.

11:49:21 THANK YOU.

11:49:26 >> VINCE AND BERNESE HAVE

11:49:34 QUESTIONS OR COMMENTS.

11:49:39 >> I HAVE BEEN A CARETAKER FOR MY PARENTS



11:49:49 WHO HAVE BEEN IN -- I'VE BEEN IN  
11:49:50 SITUATIONS WHERE THEY HAVE REPORTED  
11:49:55 SEVERAL TIMES BUT NOBODY EVER FOLLOWS UP.  
11:49:58 AND SO IS THE COMMITTEE, IS THAT SOMETHING  
11:50:01 WHERE YOU CAN GO AND FOLLOW TO FIND OUT  
11:50:11 MORE ABOUT THIS KIND OF THING?  
11:50:25 [INAUDIBLE]  
11:50:27 >> REPEATED CALLING AND REPORTING  
11:50:32 CONTACTING ADULT SERVICES, I'VE NEVER BEEN  
11:50:33 ABLE TO REALLY GET ANYWHERE.  
11:50:39 SO I'M WONDERING WHERE DO YOU GO FOR  
11:50:39 THAT?  
11:50:42 >> VINCE, YOU BROKE UP A LITTLE BIT THERE,  
11:50:46 BUT I WOULD INVITE YOU TO -- I'LL PUT MY  
11:50:47 EMAIL IN THE CHAT.  
11:50:50 IF IT'S MORE OF AN INDIVIDUAL NATURE, I'M  
11:50:53 HAPPY TO HELP YOU TROUBLESHOOT FOR YOUR  
11:50:55 OWN FAMILY AND THEN FOR THE PUBLIC AND  
11:50:58 ANYONE LISTENING, PLEASE USE THE ENGAGE  
11:51:00 INBOX AND WE WILL PROMPTLY FOLLOW-UP WITH  
11:51:02 ANY QUESTIONS OR DIRECT YOU TO THE RIGHT  
11:51:05 PERSON FOR AN ANSWER.  
11:51:16 BUT I WILL SHARE ALSO MY EMAIL RIGHT NOW.  
11:51:18 >> I THINK YOU WERE NEXT.  
11:51:19 >> YEAH.  
11:51:21 THANK YOU.  
11:51:24 SUSAN, YOU ASKING WHAT OTHER TOPICS SHOULD  
11:51:26 COME TO THIS COMMITTEE, I THINK WE'VE  
11:51:27 TALKED ABOUT IT BEFORE.

11:51:29 IT'S OUR HEALTH WORKFORCE, RIGHT?  
11:51:32 IT'S IN SUCH CRITICAL CONDITION THAT I  
11:51:34 HAVE TO UPLIFT IT IN THE SPACE AS WELL.  
11:51:39 AND IN PARTICULAR, THE LANGUAGE PART OF  
11:51:39 IT, RIGHT?  
11:51:43 AS WE CONTINUE TO, YOU KNOW, EXTEND  
11:51:47 COVERAGE, WE'VE GOT TO ENSURE ACCESS IS  
11:51:50 ACTUALLY REAL AND THAT FOLKS CAN ACCESS,  
11:51:52 YOU KNOW, DOCTORS THAT SPEAK THEIR  
11:51:54 LANGUAGE, A CAREGIVER THAT SPEAKS THEIR  
11:51:54 LANGUAGE.  
11:51:58 AND SO WE OFTEN STRUGGLE, YOU KNOW, I WORK  
11:52:00 FOR A COMMUNITY CLINIC SYSTEM HERE IN THE  
11:52:02 CITY OF CALIFORNIA AND SO WE OFTEN  
11:52:04 STRUGGLE AND EVEN IN OUR PACE LINE OF  
11:52:06 BUSINESS FOR JUST THAT PIPELINE.  
11:52:08 WE'RE IN SUCH CRITICAL CONDITION IS WHAT  
11:52:09 I'M STARTING TO SAY.  
11:52:12 AND SO I JUST, YOU KNOW, HOWEVER WE CAN  
11:52:13 UPLIFT THAT.  
11:52:16 ANY DATA THAT CAN BE SHARED.  
11:52:19 THE EQUITY LENS OVER THAT \$1.7 BILLION  
11:52:22 PROPOSAL FROM THE GOVERNOR ON THE HEALTH  
11:52:25 WORKFORCE, WHICH IS HISTORIC, RIGHT?  
11:52:27 BUT THEN YOU START LOOKING AT, YOU KNOW,  
11:52:31 HOW MANY OF THESE DOLLARS ARE GOING TO GO  
11:52:35 TOWARDS LATINO, SPANISH SPEAKING  
11:52:38 INITIATIVES, AND I UPLIFT LATINOS BECAUSE  
11:52:39 THIS IS CALIFORNIA, RIGHT?

11:52:41 AND A LOT OF THE FOLKS THAT ARE GOING TO  
11:52:44 BE ELIGIBLE FOR THESE PROGRAMS AND  
11:52:47 COVERAGE EXPANSIONS, ET CETERA, YOU KNOW,  
11:52:48 SPEAK SPANISH.  
11:52:51 AND SO I JUST WANT TO UPLIFT IT.  
11:52:54 I'M NOT SURE IF IT'S AN OPPORTUNITY FOR  
11:52:58 DATA, THE TOPIC HERE IN THIS SPACE, USING  
11:53:03 US TO ADVOCATE AND REALLY PUSH THE  
11:53:03 GOVERNOR'S OFFICE.  
11:53:05 WORK WITH OUR ELECTED OFFICIALS.  
11:53:09 WHATEVER IT MAY BE TO REALLY ELEVATE  
11:53:09 THAT.  
11:53:10 SO YEAH.  
11:53:15 JUST WANT TO UPLIFT THAT IN THIS SPACE.  
11:53:15 >> THANK YOU.  
11:53:16 I HEAR YOU.  
11:53:19 THAT'S A GREAT EXAMPLE, TOO, OF SOMETHING  
11:53:21 THAT I WILL CONVEY TO THE IMPACT COMMITTEE  
11:53:24 AND OF COURSE TO OUR COLLEAGUES IN THE  
11:53:25 HEALTH AND HUMAN SERVICES AGENCY AND THE  
11:53:28 GOVERNOR'S OFFICE.  
11:53:31 AND YOU RAISE A REALLY GOOD POINT IN THE  
11:53:35 SLIDES THAT WERE SHOWN WITH OVER \$900  
11:53:35 MILLION.  
11:53:37 THE MONEY IS MOVING VERY FAST BECAUSE OF  
11:53:40 THE CONSTRAINTS PUT ON US BY THE FEDERAL  
11:53:42 GOVERNMENT, BUT IF WE CAN COLLECT SOME  
11:53:44 BASIC DATA AT THE FRONT END, WE WILL NOT  
11:53:47 BE ABLE TO GO BACK IN A FEW YEARS AND LOOK

11:53:47 BACK.

11:53:49 IT WON'T EXIST.

11:53:54 SO I HEAR THAT AND IT'S ALSO SOMETHING IN

11:53:57 THE \$1.7 BILLION THAT WAS PROPOSED IN THE

11:53:58 JANUARY BUDGET.

11:54:00 WE CAN BE A LITTLE BIT MORE THOUGHTFUL

11:54:03 BECAUSE THOSE ARE STATE DOLLARS, SO PLEASE

11:54:05 KEEP COMMUNICATING THAT, BUT I ALSO WILL

11:54:10 CONVEY IT FOR YOU.

11:54:18 >> THANK YOU, SUSAN.

11:54:20 >> ALL RIGHT, MARIYA.

11:54:22 I'M NOT SEEING ANY OTHER HANDS RAISED OR

11:54:27 ANY CHAT OR Q&A AT THIS POINT.

11:54:33 >> I THINK WE'RE ON TRACK TO END A LITTLE

11:54:33 EARLY.

11:54:35 >> WELL, THANKS, EVERYBODY, FOR YOUR

11:54:36 PARTICIPATION TODAY.

11:54:41 FOR YOUR CONTRIBUTIONS AND PARTICIPATION.

11:54:43 I THINK EVERY MEMBER ASKED A QUESTION OR

11:54:47 MADE A COMMENT AND I LOVE SEEING THAT.

11:54:50 WE LOOK FORWARD TO BEING BACK TOGETHER

11:54:52 AGAIN IN A QUARTER, BUT THAT WILL NOT BE

11:54:54 THE NEXT TIME THAT WE SEE ALL OF YOU.

11:54:57 WE HOPE WE SEE YOU FOR OUR WEDNESDAY

11:55:00 WEBINARS AND I KNOW MANY OF YOU CROSSOVER

11:55:02 TO OTHER STAKEHOLDER GROUPS AND ANYTIME

11:55:05 YOU HAVE A THOUGHT, QUESTION OR COMMENT,

11:55:08 JUST SEND IT OUR WAY IN BETWEEN MEETINGS

11:55:10 SO THAT WE CAN BUILD THE BEST AGENDA NEXT

11:55:13 TIME FOR THIS GROUP TOO.