The Senior Services Coalition of Alameda County is requesting \$15.98 million in General Funds to build local assistance capacity in key Supportive Services programs administered in the California Department of Aging

The Senior Services Coalition (SSC), a coalition of 40 nonprofit and public organizations that provide community-based health care and supportive services to over 79,000 seniors and their families in Alameda County, is asking the Senate and Assembly Budget Subcommittees on Health & Human Services to consider this request for \$15.98 million in General Funds to build local assistance capacity in long neglected Supportive Services programs administered in the California Department of Aging (CDA).

The services administered through CDA are highly valued in counties throughout California. These services often represent lifelines for older people who are economically insecure, isolated, or at risk for poor health outcomes or acute crises. As California's older adult population has grown, the need for home and community-based services has exploded.

Since 2008 the population of older Californians age 65+ has grown by over 40%, to 5.5 million.ⁱ By 2030 this cohort will represent more than 9 million people – more than 20% of the population in California.ⁱⁱ As the aging population has grown, it has also become poorer, with 49.3% of Californians over 65 living below 200% of federal supplemental poverty level.ⁱⁱⁱ The fastest growing cohort are people over age 85, a group most likely to have complex needs requiring comprehensive and coordinated home and community-based services.

After over a decade of systematic disinvestment, the legislature and governor stepped up to invest over \$46 million in new General Fund dollars for programs in the CDA. New funding was directed to Senior Nutrition, LTC Ombudsman, Multi-purpose Senior Services Program (MSSP, a Medi-Cal program), Aging & Disability Resource Connections (ADRCs), and Fall Prevention.^{iv} Though these investments were desperately needed, they were modest, only representing the GF funding levels in 2008 adjusted for inflation, and did not take into account the 40% growth in population of Californians age 65+ since 2008.^v

Left out of the new 19/20 investments, California's funding for Supportive Services has been inadequate for over a decade while the state's over-65 population has grown by over two million. In 2008 and 2009, a series of budget cuts gutted the Supportive Services program offerings. Programs unique to California were eliminated.^{vi} Any state funding for the other programs – Case Management, Information & Assistance, Visiting, Respite, Adult Day Care, Legal Assistance, and Senior Center Activities – was eliminated and has never been restored.^{vii}

Currently, these Supportive Services are only funded with federal funding that has remained essentially flat for over a decade. ^{viii} As a consequence the number of people served by these programs is tiny in comparison to the need. In fact, the number of Californians served by the Case Management program dropped from 19,553 in 2007 to 11,139 in 2018; for Adult Day Care, from 2,147 in 2007 to 941 in 2018.^{ix} The need for adequate capacity is now urgent.

Together, the programs administered through the CDA work synergistically. They are the tools that communities – and health systems – need to improve life and health outcomes for aging Californians. Current and future health systems rely on the existence of high-touch supportive services to address the needs of "high utilizers" and other at-risk populations. Efforts such as CalAIM and Health Homes for Patients with Complex Needs will be ineffective for a significant portion of high-utilizers without the local community-based services that seniors need to stay connected, comply with care plans, and successfully navigate the challenges of aging.

The Supportive Services that are the focus of this request include Case Management, Visiting, Information & Assistance, Respite Care, Adult Day Care, Legal Assistance, and Senior Center Activities. These services are powerfully effective at improving health outcomes and preventing crises. They often represent lifelines for older people who are isolated, economically insecure, and/or at risk of losing their housing. They serve very low income as well as the "not-poorenough" older adults who are not eligible for Medi-Cal but nonetheless need preventive, supportive and long term care services that they cannot pay for – a demographic that is growing rapidly.

The impact of California's flat funding has hurt local communities. Not only has it constrained local efforts to grow capacity to meet the needs of our growing aging population, but it amounts to annual reductions as the costs of doing business rise. Community-based organizations have been asked every year to do more with less. This decade of neglect has resulted in inadequate capacity and closures of Older Californians Act programs in communities across the state, thus limiting access to community-based services and supports, and creating health disparities especially in impoverished communities.

While local governments have stepped up to augment growing funding gaps, local funding is not enough to increase capacity to meet the need. In fact, the number of Californians served by the Case Management program dropped from 19,553 in 2007 to 11,139 in 2018; for Adult Day Care, from 2,147 in 2007 to 941 in 2018.^x

Legislative action is needed to adequately fund aging services so that Californians will have the support they need to live healthier lives and navigate the challenges of aging. The requested modest investment would return state funding levels in this category to where they were a decade ago, adjusted for inflation; a more adequate investment would take into account population growth as well as inflation.

Fiscal Year	08/09	10/11	18/19	19/20	20/21	20/21
					If '08+Inflation	If Inflation+Pop
General Fund Supportive Services	\$12.87 million	0	0	\$950,000	\$15.97 million	\$21.12 million

Community-based Supportive Services focus their high-touch approach on issues common to later life stages, addressing stressors that, without intervention, can lead to crises. For example:

- Information & Assistance helps people who don't know where to start or how to find services or solutions.
- **Case Management** supports people with complex issues. It complements medical care, connects clients with public and community-based services, and helps build or reconnect networks of friends and family.
- Senior Centers keep people connected to community, building friendships and promoting learning, laughter and interactive discussion through meals, health education, information and assistance, classes and affinity groups.
- Visiting programs reduce feelings of isolation, anxiety and loneliness.
- Adult Day Care provides safe, welcoming environments and monitoring of complex medical conditions, as well as stimulating socialization and therapeutic activities. Often it enables family caregivers to work.
- **Respite** gives family caregivers the break they need to recharge and see to their own health.
- Legal Assistance defends a senior's rights, protects assets and access to health care and public benefits, fights eviction, restructures liens, mediates tenant situations, and supports family unity.

The Request for \$15.98 million ongoing General Fund Investment would increase capacity of Supportive Services programs statewide to provide Case Management, Information & Assistance, Visiting, Adult Day Care, Respite, Legal Services and Senior Center Activities to older Californians needing assistance to maintain health and economic stability and navigate the challenges of aging. It will protect vital services from further erosion, begin to build capacity to adequately serve older Californians, and prepare a foundation so that solutions from the Master Plan for Aging can leverage the powerful impact of community-based services. The state made a commitment to older adults with the Older Californian's Act – to provide supports that help people remain living in their communities and avoid institutionalization – that commitment remains today.

ⁱ California Department of Finance, Population Projections by Age 2010-2060

[&]quot; ibid

ⁱⁱⁱ Federal Supplemental Poverty Level. Kaiser Family Foundation "Poverty Among Seniors", June 2015.

^{iv} In FY 2019/20, California's legislature and invested a total of \$46.9 million in new funding for programs in the CDA, the specific allocations to: \$17.5 million for Senior Nutrition to provide nutritious meals to an additional 12,000 older Californians; \$4.2 million in new ongoing funding for LTC Ombudsman to increase capacity at 35 local LTC Ombudsman programs across California; \$14.8 million (over 3 years) for Multi-Purpose Senior Services Program (MSSP) to increase rate and stabilize the 38 sites throughout California; \$5 million one-time for Dignity at Home Fall Prevention Program; \$5 million ongoing funding to expand "no wrong door" navigation assistance within the Aging and Disability Resource Connections (ADRC).

AGING IS SOMETHING WE ALL HAVE IN COMMON

^v According to Bureau of Labor Statistics, cumulative annual inflation rate from 2007 to 2019 is 24.12%; thus 2008's \$62.2 million, adjusted for inflation, is \$77.2 million today. The FY 19/20 GF investment in CDA represents a 35% increase over 2008. However, if the 40% growth in the 65+ population between 2008 and 2019 were taken into account, CDA's current GF investment would be approximately \$97.42 million.

^{vi} Programs unique to the Older Californian's Act – the Brown Bag Program, Foster Grandparent Program, Senior Companion Program, and Linkages – were eliminated in 2010.

^{vii} With the exception of \$950,000 in FY 2019/20 budget directed specifically to fund the Poway and Santa Clarita Senior Centers.

^{viii} Federal Older American's Act funding for local Supportive Services (minus Ombudsman program, and not including state operations) was \$55.7 million in FY 2008/09, and \$57.65 million in FY 2019/20.

^{ix} AGID Data Portal, Administration for Community Living.

^x AGID Data Portal, Administration for Community Living.