

CCoA
California Commission on Aging

AGEWATCH

**Proposed FY 2013-14 Budget Shows California is in the Black;
Includes Expansion of MediCal under ACA**

The proposed budget released by Governor Jerry Brown in January puts California in the black for 2013-2014, projecting \$98.5 billion in revenue and \$97.7 in expenditures. The Governor's budget includes the expansion of Medi-Cal under the Affordable Care Act, making coverage available to as many as 1.5 million adults with incomes up to 138% of the Federal Poverty Level.

The budget makes no changes to programs administered by the Department of Aging, which operates primarily on federal Older Americans Act funding, but does include changes in several other programs affecting the aged and persons with disabilities. Among those changes are:

- A 4.9% increase in funding for In-Home Supportive Services, along with the assumption that the state will be able to achieve \$113 million in savings through a 20% reduction in service hours starting in November.
- Increases of \$20 per month for individuals and \$30 per month for couples receiving Supplemental Security Income and State Supplemental Payout grants to low-income elderly, blind and disabled beneficiaries.

To read more, visit <http://www.californiahealthline.org/articles/2013/1/11/gov-brown-proposes-fy-2013-14-budget-that-expands-medi-cal.aspx#ixzz2IGxZbYNk>.

Excerpted from California Healthline, Gov. Brown Proposes FY 2013-14 Budget That Expands Medi-Cal, January 11, 2013 and CDCAN REPORT #004-2013 (JAN 10 2013).

***Proposed Budget Impacts on Senior Programs
detailed in new SCAN Foundation Fact Sheet*****While the Governor's**

budget proposal largely avoids new spending reductions in senior program spending, a new analysis from The SCAN Foundation examines the impact of ongoing fund shifts and programmatic changes that will affect how older adults receive services in California.

Changes such as shifting Medi-Cal and Medi-Cal/Medicare eligible beneficiaries under the Coordinated Care Initiative and the Duals Demonstration Project, the extension of provider fees, reductions to In-Home Supportive Services and changes in enrollment are among the programs explained by The Scan Foundation, a non-profit foundation dedicated to the improvement of long-term care and health services for older adults.

To read the fact sheet, *California's Proposed 2013-14 Budget: Impact on California's Seniors and People with Disabilities*, visit www.thescanfoundation.org/publications/facts/budget.

Excerpted from The SCAN Foundation, January 2013 Fact Sheet.

AGEWATCH is an occasional publication of the California Commission on Aging (CCoA) intended to inform, educate, and advocate. The CCoA is an independent state agency established in 1973 to serve as the principal state advocate on behalf of older Californians. The CCoA office is located at 1300 National Drive, Suite 173, Sacramento, CA 95834.

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Special Session opens: Legislature to focus on Health Care Reform

The State Legislature opened a special session on health care this week, re-visiting bills that were put on hold last summer while the results of the November election were pending. With the re-election of President Obama, California is now able to move forward with legislation necessary to implement the state components of federal health care reform measures called for in the Affordable Care Act.

As reported in *California HealthLine*, the three main issues to be addressed in the special session include 1) California's private health insurance market; 2) changing the Medi-Cal program to accommodate new federal eligibility rules; and 3) the availability of low-cost health insurance to be marketed through the California Health Benefit Exchange.

In the proclamation calling for the Special Session, Governor Brown cited "extraordinary circumstances" -- namely the federal timeline for implementation -- as justification for the Legislature to take swift action on the issues. Once passed and signed by the Governor, bills enacted in a Special Session become law in 90 days.

Excerpted from California Healthline Capitol Desk, January 25, 2013.

NIH Report Highlights Alzheimer's Research

A new online report from the National Institutes of Health (NIH) highlights recent progress in NIH-supported Alzheimer's disease research.

Prepared annually by the National Institute on Aging (NIA) at NIH, the latest report — [2011-2012 Alzheimer's Disease Progress Report: Intensifying the Research Effort](#) — describes new investments and summarizes research in several areas:

- prevalence of Alzheimer's disease
- biology of Alzheimer's and the aging brain
- genes that may play a role in the disease
- risk factors for cognitive decline and dementia
- neuroimaging and biomarkers that detect and track the disease
- translational research to identify and test new drugs
- potential new therapies to treat, delay, or prevent Alzheimer's
- caregiving
- gender and racial differences in the impact of Alzheimer's

Other features include a primer on Alzheimer's disease and the brain, tables listing NIA-funded clinical trials, and videos that further explain critical areas of study.

Read online or download the free report:

<http://www.nia.nih.gov/alzheimers/publication/2011-2012-alzheimers-disease-progress-report/>

Reprinted from *Latest NIH Alzheimer's Research Progress Report Available*, January 15, 2013, E-Update from the National Institute on Aging at NIH.



FOCUS ON

"We Can't Wait": Presidential Initiative Stimulates Alzheimer's Research

Fighting Alzheimer's disease is a priority not just at NIH but across the Department of Health and Human Services and elsewhere in the Federal Government. In January 2011, President Obama signed the [National Alzheimer's Project Act](#) (NAPA), which called for an aggressive and coordinated national Alzheimer's disease plan and established an Advisory Council on Alzheimer's Research, Care, and Services, consisting of some of the Nation's foremost experts on Alzheimer's disease.

Counting the Uncounted

Guest Commentary

By Jenny Chung Mejia

Insight Center for Community Economic Development

Skipping meals or splitting pills? This is a reality for many seniors across California who struggle to make ends meet. And the problem is much bigger than what the official federal measures estimate.

In California, 8% of older adults are officially considered poor, using the methodologically flawed Federal Poverty Thresholds (commonly referred to as FPL). In contrast, the *Elder Economic Security Standard Index*, shows that 47% of all older Californians did not have enough income to meet their most basic needs, and a staggering 39% had incomes above the FPL but below the Elder Index—disqualifying them from many public support programs. The Elder Index is based on the cost of a basic basket of goods at the local level (available for every county and the City of Los Angeles), including housing, food, transportation, healthcare, and necessary costs such as a phone. Unlike the FPL, the Elder Index provides a measure of basic economic security that counts the currently uncounted. Thanks to the leadership of Senator Jim Beall, CCoA, and a strong coalition of partners across the state, the Elder Index was enacted in 2011 as the new standard for California's aging agencies.

Want to see the recent Elder Index numbers? Curious about the basic costs for grandparents raising grandchildren or multi-generational families? Stay tuned: an updated and expanded Elder Index is scheduled for release this May.

Jenny Chung Mejia is an Attorney/Program Manager with the Insight Center for Community Economic Development, a national research, consulting, and legal organization dedicated to building economic health in vulnerable communities. To learn more about their work and the Elder Economic Security Standard Index, visit <http://www.insightcced.org/>

New Online Health Plan Complaint Form Makes it easier for Californians to resolve Health Plan disputes

The California Department of Managed Health Care (DMHC) recently launched a new secure, easy-to-use online form to allow Californians to file complaints regarding their health plan more quickly and easily from any computer. The new online form is available in both English and Spanish and enables consumers to request an external review of a health plan's denial of a medical service or treatment. Previously, health plan enrollees had to submit the required forms and paperwork via mail or fax.

DMHC receives and resolves approximately 4,000 complaints about health plans annually. Issues range from access to care, claims, enrollment, benefits or coordination of care. Additionally, the DMHC annually administers approximately 1,700 Independent Medical Reviews of health plan denials of service. These reviews are conducted by independent doctors not affiliated with the health plan.

The complaint form can be found at: www.dmhc.ca.gov/dmhc_consumer/pc/pc_forms.aspx.



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SB 60 -- Help for victims of Elder & Dependent Adult Financial Abuse

Elder & Dependent Adult Financial Abuse affects thousands of Californians annually through internet and mail scams, insurance fraud, and misappropriation of funds by family members and others. The majority of these crimes go unreported, and efforts to recoup any of what was lost can be unsuccessful. Victims of financial crimes suffer both emotionally and physically, with a mortality rate that is three times higher than their peers.

SB 60, by Senator Rod Wright and sponsored by the Commission on Aging, will help victims of Elder & Dependent Adult Financial Abuse by making them eligible for mental health counseling and financial counseling, among other services. To read the bill, visit <http://www.leginfo.ca.gov> and type SB 60 on the "Bill Search" page.

To lend your support for SB 60, write to [Senator Roderick Wright, 25th Senate District, State Capitol, Room 2032, Sacramento, CA 95814](#).

Alameda ADRC Wins Program Development Funds

Alameda County's Aging and Disability Resource Connection (ADRC) partnership has been awarded \$100,000 for development and implementation of a new ADRC Program in a Dual Demonstration County. The Alameda ADRC is comprised of three core partners: two Independent Living Centers, (the Center for Independent Living, Inc. and the Community Resources for Independent Living), and the Alameda County Area Agency on Aging.

Announced in January by the California Community Choices branch of the Health and Human Service Agency, the award is part of the State's effort to strengthen and expand ADRC partnerships in California. For more information about the ADRC initiative in California, please visit <http://communitychoices.info>.



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YEAR OF ELDER ABUSE PREVENTION

To learn more: http://www.aoa.gov/AoARoot/AoA_Programs/Elder_Rights/

AGEWATCH

February, 2013

Upcoming Events

February 6-7 -- Triple-A Council of California Meeting, Sacramento. www.4tacc.org for information.

February 28 - March 1 -- California Commission on Aging Meeting, Palm Springs. www.ccoa.ca.gov for information.

March 4-6 -- Aging Services of California 2013 Public Policy Conference, Sacramento. www.aging.org for information.

March 12-16, American Society on Aging - Aging in America Conference, Chicago. Registration and information: <http://www.asaging.org/registration-information>

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