

JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

March 19, 2020

The Honorable Gavin Newsom
California State Capitol
1303 10th Street, Suite 1173
Sacramento, California 95814

Dear Governor Newsom:

I write today to urge you to ensure California's response to COVID-19 ("coronavirus") centers on older adults because they are most likely to be impacted by it. First, we want to thank you for your efforts to date to provide leadership in mobilizing California to combat the quickly evolving pandemic. We applaud your enactment of immediate and aggressive social distancing measures that will act to save the lives of thousands of older adults and those with underlying health conditions. We also commend actions taken to ensure safety net services continue uninterrupted, additional resources are allocated to protect those experiencing homelessness from COVID-19, and seeking federal approval so that Medi-Cal can better serve the 1.4 million older adults and people with disabilities who rely on the program during this crisis.

We, however, believe that California must do more to defend older adults during this pandemic. One in five seniors in California is living at or below poverty. An additional 775,000 seniors have incomes above the poverty limit, but do not have enough income to meet their basic needs. Older adults are also the fastest growing demographic experiencing homelessness. These older adults are not only most at risk for serious illness from the virus, but are also most likely to experience disruptions in care and increased economic insecurity during this crisis. The coronavirus pandemic, therefore, requires California to make both immediate and longer-term investments in the health, safety, and lives of older adults.

Actions to Immediately Defend Older Adults Against the Coronavirus

During this public health crisis, older adults should not have to struggle to pay for basic necessities, worry that \$100 too much in the bank could complicate their Medi-Cal eligibility, or bar them from basic services because they are homeless and 55 years old. Below we outline steps California should immediately take to ensure the safety and well-being of low-income older adults:

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- **Make Medi-Cal More Affordable.** To increase access to Medi-Cal and long-term services and supports, California should waive the Medi-Cal share of cost and suspend the asset limits for the Medi-Cal programs serving older adults and people with disabilities, including Medicare Savings Programs for all current beneficiaries.
- **Halt all Negative Public Benefit Administrative Actions.** The executive order suspending public benefit eligibility redeterminations for 90 days will act to ensure continued access to programs. However, to ensure continued access all benefits, California should also suspend all negative administrative actions that would act to reduce, terminate, or deny benefits and services.
- **Ensure Continued Access to Home and Community-Based Services.** It is critical that older adults and people with disabilities are able to maintain the services they need to remain living in their homes and communities – particularly since they are advised to take the most extreme social distancing measures. Accordingly, initial assessments for In-Home Supportive Services (“IHSS”) should be conducted over the phone rather than being conducted in-person, and counties should mandatorily suspend all reassessments in accordance with the Governor’s executive order. California should also suspend all IHSS overtime violations during this period.
- **Increase the State Supplementary Payment.** The State Supplementary Payment (SSP) grants help ensure stability for seniors and people with disabilities at the very lowest income levels. An immediate way to ensure older adults and people with disabilities have money to pay for life essentials during the pandemic is to increase the SSP grant to an amount that reflects the real cost of living for seniors.
- **Provide Emergency Funding for Adult Protective Services.** Due to increased financial and emotional stress households will experience during the pandemic, we anticipate that there will be an unfortunate rise in elder abuse. California should provide immediate emergency funding to Adult Protective Services (APS), so providers are ready to address this increased need.
- **Lower the Threshold Age for Social Services.** Individuals living in poverty or who are homeless are more likely to experience health issues at an earlier age. To ensure these individuals have increased access to services, California should lower the age threshold for age-related social services to 50 years old for homeless individuals.
- **Increase Funding for Legal Services.** Legal services organizations are critical during a crisis, acting to ensure access to resources and information for communities and connecting low-income individuals to housing, health care, and emergency benefits. To ensure legal services are ready for a surge of clients both during and after the pandemic, California should immediately increase funding to these programs.
- **Create a Toll-Free Hotline.** California should create a statewide, toll-free multilingual hotline for older adults to call to report urgent needs and gaps in existing services and

supports, like meals. Other states, like New Mexico, have already set up similar hotlines to meet the challenge.

Additional Investments and Planning

In addition to actions that can be taken immediately, California also must comprehensively survey the networks of services and supports older Californians rely on and use all the flexibility it can to maintain access to these critical services, including:

- **Nutrition and Medication Access.** Many older adults previously relied on receiving meals at congregate settings that now are no longer available. Additionally, with the need to self-quarantine, the ability of older adults to obtain food and prescription drugs at grocery stores and pharmacies or via delivery is significantly hindered. California must prioritize how to address this shift in access and coordinate such efforts with public health officials to ensure older adults have access to food and medicine that does not jeopardize their health and safety.
- **Home and Community-Based Services.** Home and community-based services (“HCBS”) are critical for older adults and people with disabilities. With the pandemic, access to HCBS has been severely disrupted. Many caregivers are no longer able to work as IHSS providers and adult day health care centers have had to close. California must allow for flexibility in how HCBS is delivered, increase investments in services, and establish a back-up provider system for IHSS.
- **Nursing and Assisted Living Facilities.** Because nearly all visitation is banned in nursing and assisted living facilities, California should be considering how to address social isolation, including, for example, funding for technology to facilitate communication between residents and their families (e.g. Wi-Fi, phones, tablets, etc.). Connection with family is critical to resident well-being.
- **Vulnerable Populations.** Older adults experiencing homelessness and older adults who are incarcerated have unique needs during this pandemic. California must ensure that funding and planning are tailored to address the needs of older adults and people with disabilities in these settings.
- **Communication.** Communication that is accurate and clear is vital during this time – particularly with regard to the many new rules and rule changes occurring. Older adults – particularly immigrants afraid of potential immigration-related consequences in response to accessing government services – need information that is tailored to them through channels that go beyond digital communication. In the age of social media, communication about the pandemic must account for the cultural and linguistic diversity of California, including its older adults.

We welcome the opportunity to discuss this letter in more detail and work with your office to ensure California is centering the needs of those most impacted by this pandemic.

Sincerely,

A handwritten signature in black ink, appearing to read "K. Prindiville". The signature is fluid and cursive, with the first name "K." and the last name "Prindiville" clearly distinguishable.

Kevin Prindiville
Executive Director

CC: Dr. Mark Ghaly, California Health & Human Services Agency
Dr. Bradley Gilbert, California Department of Health Care Services
Kim McCoy Wade, California Department of Aging