

The Unexpected Benefits of a State Multisector Plan for Aging: Lessons from California

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TAKEAWAYS

- A multisector plan for aging (MPA) can benefit a state in multiple expected and unexpected ways during the development process and implementation.
- The MPA's comprehensive planning process establishes new relationships among stakeholders and breaks down silos across state leadership to help states respond quickly to future crises and embrace new opportunities.
- California's experience highlights how an MPA positions states to nimbly respond to new challenges or priorities as they arise, such as budget windfalls and public health emergencies, as well as build the structure to address health equity in state-led programs.
- The experiences of California outlined in this brief can help inform other states as they seek to build support for developing an MPA.

multisector plan for aging (MPA)¹ is a cross-sector, state-led strategic planning process that results in a roadmap that can help states transform the infrastructure and coordination of services for their rapidly aging population. An MPA is a living document that provides a clear framework to address the needs of older adults, people with disabilities, and caregivers, for 10 years or more. An MPA:

- Enables governors and/or legislative leaders to communicate a clear vision and priorities for their state;
- Guides state and local programs, public and private initiatives, policies, and funding to support aging with dignity;
- Reflects extensive input from the community, including people
 of all ages and abilities, actively considering the needs of
 populations facing racial and ethnic disparities; and
- Is evidence-based and uses data and benchmarks for accountability.

This brief outlines benefits of the MPA planning and implementation process, including concrete examples from California's experience, to inform leaders and advocates from other states as they seek to build buy-in for an MPA.



Anticipated Benefits States Can Expect to Achieve with a Multisector Plan for Aging

Five states — including <u>California</u>, <u>Colorado</u>, <u>Massachusetts</u>, <u>Minnesota</u>, <u>and Texas</u> — have implemented MPAs. <u>New York</u> and <u>Vermont</u> are in the early stages of MPA development with executive and legislative support, respectively. These states are all recognizing the far-reaching benefits of this comprehensive planning process. As shared in the Center for Health Care Strategies' <u>Getting Started with a Multisector Plan for Aging</u> tool, with careful development a state's MPA can:



Build bridges across government agencies and departments — most of which have policies that impact older adults and people with disabilities — to support cross-sector planning and implementation (for example, housing, transportation, and employment).



Facilitate collaboration with diverse stakeholders to help identify shared values, mutual goals, and opportunities to improve person-centered supports and services. This can include consumers, families, individuals representing aging and disability communities, public and private sectors, employers, health care, and academic research.



Raise awareness among policymakers and the public about how aging and disability-related policy impacts people at all stages of life, including retirement planning, family caregiving, and living with disabilities.



Create academic, research, and other partnerships that bring aging and gerontology experts to the forefront of policy influence and ensure evidence-based planning with a focus on measurement and data for accountability.



Incorporate an aging and disabilities lens across state priorities beyond traditional health care and community services to include climate change, the digital divide, rural health, mental health, and employee-friendly business policies.

Unanticipated Benefits of California's MPA

In addition to the benefits outlined on the previous page, California encountered key value-added opportunities generated by the MPA development and implementation process that were unanticipated. These include:

- 1. Providing a blueprint for action to address budget windfalls or shortages and new federal funding opportunities;
- 2. Establishing ready-made mechanisms to help manage crises; and
- 3. Addressing equity in state-led programs.

1. Providing a Blueprint for Action to Address Budget Windfalls or Shortages and New Federal Funding Opportunities

MPA development involves extensive cross-sector planning and stakeholder engagement, allowing the plan to act as a blueprint for states in the event of a budget windfall or shortage and new federal funding opportunities. The comprehensive MPA planning process and related new initiatives equip states with a ready-made set of approved priorities that can be leveraged if urgent needs arise. For example, when the American Rescue Plan Act (ARPA) was signed into law in March 2021 it required all states to quickly submit a plan to use increased federal matching funds to provide enhanced home- and community-based services (HCBS), giving states with MPA efforts underway a leg up on ARPA planning.

MPA IN ACTION



- Providing existing and agreed-upon structure for related projects. In California, the Governor and Legislature were able to take the MPA's 132 initiatives that had been previously approved by stakeholders and government agencies and quickly translate those into their ARPA HCBS Spending Plan. Recommendations that had been developed by the Long-Term Services and Supports (LTSS) Subcommittee were particularly useful. Since these initiatives already had a stamp of approval from the Governor and cabinet members, they were ready-made for prioritization by the state. Many of the MPA initiatives were funded through the ARPA HCBS spending plan, such as: reducing waitlists for HCBS waiver programs; direct care workforce initiatives; and improvements in No Wrong Door information and assistance programs. Other MPA initiatives were funded through the California's 2021-2022 enacted budget and even more have been proposed for funding in the 2022-2023 Governor's proposed budget.
- Adopting MPA-approved priorities for future efforts. When future federal initiatives are passed,
 California will be able to draw on the MPA for direction, including well-considered initiatives that already have buy-in among stakeholders and policymakers.

2. Establishing Ready-Made Mechanisms to Help Manage Crises

Older adults and people with disabilities can be disproportionately affected by national or regional emergencies, such as pandemics and natural disasters. For many years, California has suffered from devastating wildfires that have required mass evacuations of older adults and people with disabilities, especially in rural areas. Like other states, the COVID-19 pandemic was particularly isolating and deadly for Californians living in nursing homes and those with disabilities or complex care needs.

When the COVID-19 pandemic hit California, the MPA development process was well underway, with meetings, priorities, and relationships established among members of the State Cabinet Workgroup, Stakeholder Advisory Group, LTSS Subcommittee, Research Subcommittee, and Equity Workgroup. When California declared a <u>state of emergency</u>, work on the MPA was paused, but the committees continued working with state agencies and the Governor to support older adults, people with disabilities, direct care workers, and family caregivers. The relationships and trust built between stakeholders and policymakers during the MPA planning process allowed California to act quickly on various crisis-related efforts.

MPA IN ACTION



- **Supporting nursing home visitation guidance**. Members of California's MPA LTSS Subcommittee helped ensure that state guidance for visitation in nursing homes during the COVID-19 pandemic was as least restrictive as possible and the rights of nursing home residents were respected.
- Keeping older adults and their caregivers informed and connected. Relationships with MPA
 advocates such as the <u>Alzheimer's Association</u> and <u>Family Caregiver Alliance</u> helped California create a
 series of easy-to-access <u>webinars</u> for older adults and caregivers on topics such as social isolation, food
 insecurity, caregiving, and dementia care during the pandemic, which were conducted in English,
 Spanish, and Mandarin for seniors and caregivers across the state.
- Providing flexibilities for aging services. Relationships between California state agencies and aging service providers that were forged during the MPA development process expedited agreement on pandemic-related flexibilities for aging services, such as allowing Adult Day Health Care to continue to provide services at home for clients with dementia.
- **Enabling an evidence-based pandemic response.** Relationships forged between members of the MPA Research Subcommittee and the state helped expedite the accessibility of important data on Californians needing additional services and supports, including data on individuals who lived alone and were at risk of social isolation, those who were already experiencing food insecurity before the pandemic, and those who lacked broadband. These data were important factors that helped the state plan for interventions such as the <u>Friendship Line</u> and the <u>Great Plates</u> meal program.
- Evacuating congregate care. During the 2020 California wildfire season, several regions had to
 implement forced evacuations. It was especially complex to evacuate assisted living facilities, memory
 care facilities, and nursing homes that were also navigating staffing shortages and enhanced safety
 protocols due to the COVID-19 pandemic. As a result of the MPA development process, the state had
 formed relationships with industry and regional partners who could provide advice and assistance
 during these complex evacuations.

3. Addressing Equity in State-Led Programs

The development process and subsequently created goals and initiatives of an MPA can support other stateled activities and create a coalition for addressing equity in state programs. In California, aging and disability stakeholders pushed for the creation of an MPA Equity Workgroup in response to growing national concerns about structural racism and communities that have been economically and socially marginalized. The MPA Equity Workgroup's efforts helped ensure that the MPA's recommendations considered the impact on equity throughout all stages of MPA development and implementation.

MPA IN ACTION



- Advising crisis standards of care. States employ crisis standards of care guidance when health care systems are so overwhelmed by a pervasive or catastrophic public health event it is impossible for them to provide the normal, or standard, level of care to patients. In these situations, state government provides guidance for how health care systems should operate, and how to prioritize care when the system is overwhelmed. California's MPA Equity Workgroup helped the state revise its <u>Crisis Standards of Care</u> draft during the early stages of the COVID-19 pandemic. The workgroup helped ensure that protocols were not ageist or ableist and set an example in centering equity for all local health departments.
- **Supporting vaccine distribution**. When the COVID-19 vaccine became available in late 2020 there were inherent barriers faced by older adults and people with disabilities in gaining access to vaccine distribution sites. These barriers were especially prevalent for people with disabilities, impaired mobility, or language and communication barriers. California's MPA Equity Workgroup helped the state support vaccine distribution centered on equity by age and race, among other factors, and groups experiencing disadvantage through relationships with community- and faith-based organizations.

Conclusion

An MPA is an incredibly valuable tool for states to better serve their rapidly aging population and people with disabilities for years to come. As demonstrated in California, the MPA can also benefit a state in unexpected ways and help a state navigate budget windfalls, crises, and barriers to equity. The value of an MPA extends beyond the plan and initiatives outlined in the document. The existing framework, coalitions, and relationships created by an MPA can prepare a state to nimbly address crisis situations and embrace new opportunities.

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The Center for Health Care Strategies (CHCS) is a policy design and implementation partner devoted to improving outcomes for people enrolled in Medicaid. We support partners across sectors and disciplines to make more effective, efficient, and equitable care possible for millions of people across the nation. For more information, visit **www.chcs.org**.

ABOUT THE FUNDERS

This brief is supported by grants from **The SCAN Foundation** and **West Health**.

The SCAN Foundation is dedicated to advancing a coordinated and easily navigated system of high-quality services for older adults that preserve dignity and independence. For more information, visit www.thescanfoundation.org.

West Health is dedicated to lowering healthcare costs to enable seniors to successfully age in place with access to high-quality, affordable health and support services that preserve and protect their dignity, quality of life and independence. Learn more at **westhealth.org**.

ENDNOTES

¹ Multisector plan for aging is an umbrella term for a state-led, multi-year planning process that convenes cross-sector stakeholders to collaboratively address the needs of older adults and people with disabilities. States use a variety of names for these plans (e.g., master plans, strategic plans, and aging-well plans) but all have the same broad goals.