Good morning. I am Senator Carol Liu, Chair of Select Committee on Aging and Long Term Care. Standing before you today are members of the State Senate and State Assembly who are carrying bills to help reform California’s aging and long term care system. Also joining us are the advocacy organizations for the aging and people with disabilities who support our efforts. You have a list of everyone present in your packets and also a chart of the bills they are carrying. Beside me is Assembly Member Cheryl Brown, Chair of the Assembly Committee on Aging and Long Term Care.

In a moment, each of them will introduce themselves and the aging and long term care legislation they have introduced.

This chart displays the current figures and projected growth in the aging population for the next 15 years. As you can see people 65 ears and over will constitute nearly 20% of California’s population by 2030. This chart also illustrates that as times goes on, women are disproportionately impacted by our failed system. If we don’t get our act together now, we will have a crisis on our hands soon.

Many of you are aware that the Senate Select Committee on Aging and Long Term Care released its 2014 report, A Shattered System: Reforming the Aging and Long Term Care System in California in January. After a year-long effort of public hearings, research, interviews with experts, listening sessions with consumers, and a statewide tour, The Select Committee concluded that California has no integrated system of services and supports for aging adults and adults with disabilities. As this chart -- which we call the periodic table -- reveals, we have over 100 programs distributed across 20 different agencies and departments. There is a copy of this chart in your packets. Likewise, jurisdiction over aging and long term care is distributed among multiple standing committees in the legislature.

Deficiencies in our service and supports are amplified in the state’s 44 rural counties. Demand for workers in a whole range of professions -- from in-home health care workers to geriatricians -- far outstrips supply. Furthermore, we are ill-equipped to serve this increasingly culturally diverse population. As a result, the state’s disarray of services and supports is inequitable.

We need an integrated consumer-centered aging and long term care system in California. You have in your packets a list of the report’s 30 recommended actions to bring us closer to a more ideal system. The authors standing here are committed to coordinating their efforts to avoid further fragmentation and to collaborate on creating a system that consumers and their caregivers can navigate.

The cost of caring for the elderly and people with disabilities in institutions far exceeds the cost of in-home and community care. In the home and in the community is where the elderly and disabled want to be. With the right mix of services and supports they can remain independent and socially and intellectually engaged.

One final and important message I am delivering today is this: aging adults and people with disabilities believe that we don’t care about them. Certainly, the condition of our current non-system and the last several years of budget cuts to the social services safety net imply that is the case. Ageism and negative stereotypes abound in our society. So, there is
more to do than reorganize and reform our system. We need to change the narrative about what aging or being disabled means. We need a narrative of **appreciation and respect**. We also need a continuum of care that helps people live life to its fullest potential and not use eligibility by age as a de facto determinate of capabilities, needs, and access to services and supports. They -- **WE** -- want and need choices.

So, I know I haven’t given you catchy thirty-second sound bites that make good headlines, but the complexity of what we are trying to achieve is hard to capture in pithy phrases. I am asking you to dig deep into the issues and help us change the process and **the narrative** about aging and long term care. Change is hard. It won’t happen overnight. We are willing to do the incremental work it takes to realize a big vision. If we stay the course we can change the lives of millions of Californians for the better -- and that includes all of us.

Now I am pleased to introduce Asm. Cheryl Brown, Chair of the Assembly Aging and Long Term Care committee to speak about her bills and upcoming activities for her committee.

**ASM. BROWN SPEAKS**

**CAROL:** Each of our authors will now give you a brief description of the legislation they have introduced to advance aging and long term care reform.

**Q&A**

**Q.** Does everyone here support all of the bills in this package?

**A.** I personally support all of the bills, but can’t speak for my colleagues and the organizations present. Most of the bills just recently came into print. What everyone here does support is the vision of an integrated aging and long term care system. I am sure there will be changes in the bills as we work through the process and stakeholders and others make their views known, but we embrace and look forward to that process.

**Q.** What is the Governor and Administration’s position on the report?

**A.** I can honestly say I don’t know, and likely will not know until we get further into the legislative process. I did meet with Secretary Dooley before I released the report and invited her comments and concerns and participation in the process. I’m sure the dialogue will be ongoing.

**Q.** How much will this cost?

**A.** I don’t know. We haven’t yet begun to work with the Department of Finance to cost out our proposals. We are, however, convinced that our proposals in the long term will reduce costs for consumers, providers, and program administration. You just can’t look at this periodic chart and not believe that we can deliver aging and long term care more efficiently and effectively. By doing so we will avert the costs of more acute care.

**Q.** Aging and Long Term Care reform has been tried before. What makes you think you can be successful this time around?

**A.** Several reasons starting with everyone standing here with me today. The reorganization we propose mirrors reorganization at the federal level, and I believe will help us draw down and leverage federal funding more effectively. And again, the numbers don’t lie. We aren’t talking about earthquakes here. We can project the size of our aging and disabled population. This is a crisis in the making and we have an opportunity as we emerge from the recession that devastated our safety net, to start rebuilding a system that will serve our population and our state.