

Overview

On June 10, 2019, California Governor Gavin Newsom issued [Executive Order N-14-19](#) that calls for the development of a Master Plan for Aging, marking a historic step forward.¹ The governor stated that the Master Plan will serve as a blueprint for all sectors to promote healthy aging and prepare California for future demographic changes. Thoughtful development and implementation of this Master Plan will enable a more person-centered, efficient, effective service system to meet the needs of older adults and their families for today and tomorrow.

As California embarks on this Master Plan effort, the state has an opportunity to learn from other planning efforts and build on best practices to achieve meaningful change. California is not the first state to develop a Master Plan for Aging. Experience from other states shows that [master plans for aging are most successful](#) when developed with strong leadership, as well as a comprehensive approach including measurable outcomes, specified priorities, and timelines. Additionally, California has developed valuable master plans in other issue areas and can draw on these successes.

This policy brief outlines a wellspring of knowledge and effort to support California's development of a Master Plan for Aging. First, it provides an overview of other states' master plan for aging efforts. Second, it displays three of California's master plan efforts in the areas of transportation, education, and climate change. Finally, it shares the depth of knowledge about California's aging system and recommendations that have sought to transform care delivery over the last 15 years. All of these examples provide insight into how intentional planning can lead to successful outcomes. While no one plan is perfect, California can apply lessons learned and institute a planning approach that ensures all residents have the opportunity to age with dignity and independence.

Examples of Other States' Master Plans

Table 1 outlines how the states of Colorado, Connecticut, Minnesota, and Washington have implemented planning processes that reflect a variety of approaches to addressing system change. Each master plan varies in regard to the range of issues addressed, ranking of priorities, stakeholder involvement, and the extent to which there are accountable and measurable outcomes. Each state's process was driven by state-level leadership, with specific examples below.

- [Colorado](#): Colorado's *Strategic Action Plan on Aging* is led by a planning group of state and local representatives, as well as providers and advocates. The plan addresses a range of issues from age-friendly communities, housing, transportation and workforce. It is updated every two years, but does not include any discernable measurable outcomes. Colorado engaged in extensive stakeholder outreach through its "Conversations on Aging" project that helped inform the planning process.²

- Connecticut: Connecticut’s *Real Choice for Long-Term Services and Supports* plan focuses primarily on long-term services and supports (LTSS), with a planning committee comprised of state and legislative representatives. The planning committee presents its report to the Legislature every three years, which includes identifying progress toward meeting established goals.³
- Minnesota: Minnesota was one of the earlier states engaging in system planning through its *Aging 2030* initiative, with goals centered on a range of issues including redefining work and retirement; supporting caregivers; and enhancing the use of technology, among others. While *Aging 2030* does not outline measurable outcomes, the state has adopted annual performance measures related to programs serving older adults and people with disabilities.⁴
- Washington: Washington’s *Aging and Long-Term Support Administration: Strategic Plan* includes strategic objectives with quantified success measures, as well as a timeline and action plan. The plan established goals with specified benchmarks through a “Commitment Scorecard” that is updated annually, ranking the state on its success in transforming lives.⁵

Table 1: Other States’ Master Plans for Aging

State	Leadership	Rational Priorities	Comprehensive	Stakeholder Involvement	Accountability
Colorado Strategic Action Plan on Aging, 2018	Strategic Action Planning Group on Aging includes: <ul style="list-style-type: none"> • State departments • Counties • Providers • Advocates 	Uses data to establish goals with recommendations but has no specified ranking of priorities	Goals include: <ul style="list-style-type: none"> • Developing age-friendly communities • Increasing affordable and accessible housing • Reviewing Senior Property Tax Exemption • Improving transportation options • Developing workforce infrastructure to meet the needs of older adults 	Extensive stakeholder outreach called “Conversations on Aging”	Updated every two years No discernable, measurable outcomes
Connecticut Real Choice for Long-Term Services and Supports, 2016	Long-Term Care Planning Committee charged with developing a LTC plan for the General Assembly Representation includes: <ul style="list-style-type: none"> • Nine state agencies • Representatives from Legislature’s Human Services, Public Health, and Aging Committees 	Establishes goals with short-term and long-term recommendations and has no specified ranking of priorities	Short-term priorities include expanding access to: <ul style="list-style-type: none"> • Medi-Cal Home and Community-Based Services (HCBS) waivers • Home care • Respite for caregivers Long-term recommendations: <ul style="list-style-type: none"> • Housing across care continuum • Employment • Health promotion and disease prevention • Emergency preparedness • Quality of care 	LTC Advisory Council comprised of providers, consumers, and advocates Council provides input to LTC Planning Committee	Plan released every three years with two goals: <ol style="list-style-type: none"> 1. Rebalancing HCBS/ institutional LTSS 2. Rebalancing private/public funding for LTSS Plan outlines progress toward specified goals

Table 1: Other States' Master Plans for Aging (continued)

State	Leadership	Rational Priorities	Comprehensive	Stakeholder Involvement	Accountability
Minnesota Aging 2030 (Formerly known as <i>Transform 2010</i>)	Minnesota Department of Human Services launched Transform 2010 in partnership with the Minnesota Board on Aging and Department of Health Initiative was later renamed <i>Aging 2030</i>	No specified ranking of priorities	Goals include: <ul style="list-style-type: none"> • Redefining work and retirement • Supporting caregivers of all ages • Fostering communities for a lifetime • Improving health and LTC • Maximizing the use of technology 	Minnesota Board on Aging and state departments of Health and Human Services convened stakeholder meetings across the state	No measures were developed specific to <i>Transform 2010/Aging 2030</i> . The state adopted performance measures related to specific goals for programs serving people with disabilities and older adults, which are updated annually
Washington Aging and Long Term Support Administration: Strategic Plan 2019-2021	Washington Department of Social and Health Services/Aging and Long-Term Support Administration	Establishes goals and specified benchmarks through a “Commitment Scorecard” that reflects the consumer’s perspective, and ranks the state on its success in transforming lives	Plan includes strategic objectives with a statement of importance, a quantified success measure, a timeline, and action plan on the following priorities: <ul style="list-style-type: none"> • Ensuring access to home and community-based services • Providing family caregiver supports • Supporting community transitions • Providing timely eligibility approval • Improving services for people who are deaf or hard of hearing • Providing access to assistive technology • Improving quality in nursing facilities and other settings • Protecting vulnerable older adults 	No discernable statement about stakeholder involvement	Washington Aging and Long-Term Supports Administration Strategic Plan Metrics are updated quarterly, and allow for objectives to be updated as needed

Successful Planning: Examples from California

Table 2 shows how California has championed a number of successful system transformation efforts through intentional planning. For example, since 1960, California’s Master Plan for Higher Education has forged the state’s colleges and universities into a coordinated system based on core principles with clear goals. This has guided the state through decades of intense demand for college education.

Another example is offered by the 2009 Climate Adaptation Strategy (CAS), a first-of-its-kind multi-sector strategy to help guide the state’s efforts in adapting to climate change. The CAS applied climate models to assess statewide climate impacts as a basis for providing guidance for establishing actions that prepare, prevent, and respond to the effects of climate change. While the below plans are not related to aging issues, they demonstrate effective approaches California has undergone to institute significant system-level planning.

Table 2: Examples of Other California Master Plans					
Report	Leadership	Rational Priorities	Comprehensive	Stakeholder Involvement	Accountability
California Transportation Plan (CTP) 2050	Long-range transportation plan that follows CTP 2040 , which laid out a number of long-range goals and objectives that will be updated in the current planning process	Establishes an aspirational vision that articulates strategic goals, policies, and recommendations to improve multimodal mobility and accessibility while reducing greenhouse gas emissions	Focus: California’s transportation system, as well as related environmental health, economic, and public health issues	2018 vision development includes public and stakeholder engagement, and listening sessions	CTP 2040 implementation summary outlines the vision and direction of the plan, which is in process of being updated through CTP 2050
2009 California Climate Adaption Strategy (CAS)	California adopted a statewide CAS, a first-of-its-kind multi-sector strategy to help guide the state’s efforts in adapting to climate change	Outlines short and long-term actions by issue	Recommended adaptation strategies across seven sectors: Public Health, Biodiversity and Habitat, Oceans and Coastal Resources, Water, Agriculture, Forestry, and Transportation and Energy	Public comment through draft plans	2009 CAS applied climate models to assess statewide climate impacts as a basis for providing guidance for establishing actions that prepare, prevent, and respond to the effects of climate change
California Master Plan for Higher Education	In 1960, the Master Plan was developed by a survey team appointed by the UC Regents and the State Board of Education	It outlined a policy framework for the delivery of higher education, but was not structured with ranked/data-driven priorities. For more info, see LAO report	Instituted a coherent approach to postsecondary education that defined specific roles for the University of California (UC), the California State University (CSU), and the California Community Colleges (CCC)	Not specified	The Legislature periodically authorizes reviews of the plan that include recommendations for statutory changes Major reviews were completed in 1973, 1987, and 2002

California's Past Aging Plans/Reports: Not to Be Confused with a Master Plan

Table 3 provides a compendium of reports released over the past 15 years that address a range of issues associated with California's aging population. While the reports helped spur dialogue and engage stakeholders on the system issues in their respective time span, none were backed by the governor or Administration and were lacking the critical momentum for meaningful system change to be considered a definitive "master plan for aging." These reports instead deliver meaningful background, a wealth of recommendations, and the beginnings of a contextual outline for developing California's new Master Plan for Aging.

Report	Administration or Legislature	Policy Recommendations
<u>California State Plan on Aging, 2017-2021</u>	Administration: Every five years, California submits to the federal Administration on Aging a state plan that outlines how resources will be expended under the <i>Older Americans Act</i>	All states are required to submit these plans in order to receive <i>Older Americans Act</i> funding These plans are not the same as a Master Plan for Aging, as it limits its scope solely to the resources provided under the <i>Older Americans Act</i>
<u>A Shattered System: Reforming Long-Term Care, 2015</u>	Legislature: Released by Senate Select Committee on Aging and LTC (Carol Liu, Chair). Led to a series of legislative items, most of which were not signed into law Not endorsed by the Administration	Recommendations included: <ul style="list-style-type: none"> • Reform the state-level administrative structure; name a LTC leader • Enhance oversight of the Coordinated Care Initiative • Commit to universal assessment as a statewide initiative • Establish safety net and access standards for HCBS • Invest in an LTC information web-based portal • Outline a strategy to address workforce needs, including supporting unpaid family caregivers • Prioritize investment to build a sustainable infrastructure
<u>Little Hoover Commission Long-Term Strategy for Long-Term Care, 2011</u>	Legislature: Little Hoover Commission Not endorsed by the Administration	Recommendations included: <ul style="list-style-type: none"> • Streamline and consolidate organizational structure at the state level • Develop a strategy for how to create a seamless continuum of LTC services • Designate a champion to lead development of a coordinated continuum of LTC services for older adults and people with disabilities

Table 3: California Reports on Aging and Related Issues (continued)

Report	Administration or Legislature	Policy Recommendations
<u>Home and Community-Based LTC: Recommendations to Improve Access for Californians, 2009</u>	<p>Administration: Released by the California Community Choices program, funded through a federal Centers for Medicare & Medicaid Services (CMS) grant, administered by the California Health and Human Services Agency (CHHS)</p> <p>While released by CHHS, it was not formally endorsed by the Administration</p>	<p>Recommendations included:</p> <ul style="list-style-type: none"> • Rebalance the LTC system • Reduce the rate of growth in spending on institutional care • Expand HCBS programs over time as the economy recovers and state revenues increase • Invest savings from a lower rate of institutional growth in HCBS • Improve the management of HCBS programs
<u>Building an Aging Agenda for the 21st Century, 2006</u>	<p>Legislature: Written by the Assembly Aging and LTC Committee (Asm. Patty Berg, Chair)</p> <p>Not endorsed by the Administration</p>	<p>Recommendations included:</p> <ul style="list-style-type: none"> • Increase access to affordable health care • Develop housing options (access to affordable/accessible housing), and account for aging in place and universal design • Enhance access to transportation and mobility, including rural transport needs • Address employment and retirement issues, developing opportunities for engagement and volunteerism • Identify and address wellness and mental health needs • Identify and address family caregiving needs • Address LTSS system issues • Develop strategies for elder financial abuse prevention and prosecution
<u>Strategic Plan for an Aging California Population, 2003</u>	<p>Legislature: Authorized by Legislation SB 910 (Vasconcellos) and written by CA Commission on Aging</p> <p>Not endorsed by the Administration</p>	<p>Recommendations included:</p> <ul style="list-style-type: none"> • Expand health insurance coverage • Address California’s health and social services workforce deficit • Provide a full continuum of transportation services • Expand Smart Growth models of housing and incorporate livable components • Strengthen support for repairs and home modifications • Expand community-based mental health promotion, recovery, education, and outreach for older adults; and identify and incorporate mental health prevention best practices • Build and implement a “no wrong door” system • Build capacity into community-based LTSS to prevent unnecessary institutionalization • Develop and expand comprehensive, integrated care models

Conclusion

With Governor Newsom’s Executive Order for a Master Plan for Aging, California can again lead the way for a more person-centered, efficient, effective system of care that spans across the public, private, and independent sectors. In its most successful form, this Master Plan for Aging will establish a framework for engaging new partners and spurring innovation with accountability across all entities that will creatively and comprehensively address the needs of older Californians and their families, both for today and tomorrow.

References

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