



**Health and Human Services Policy Committee Meeting
CSAC Legislative Conference**

Wednesday, April 21, 2021 12:30 p.m. – 1:30 p.m.

Via Zoom | [Click here to join](#) or call (669) 900-6833

Meeting ID: 830 2288 9075

Passcode: 484543

**Supervisor Jeff Griffiths, Inyo County, Chair
Supervisor Doug Chaffee, Orange County, Vice Chair
Supervisor Carole Groom, San Mateo County, Vice Chair**

Agenda

- | | | |
|-------------------|-------------|---|
| 12:30 p.m. | I. | Welcome and Introductions
Supervisor Jeff Griffiths, Inyo County, Chair
Supervisor Doug Chaffee, Orange County, Vice Chair
Supervisor Carole Groom, San Mateo County, Vice Chair |
| 12:35 p.m. | II. | Legislative Health and Human Services Budget Priorities
Susan Talamantes Eggman, Senator, California State Senate |
| 12:55 p.m. | III. | Master Plan for Aging – State and Local Partnership
Kim McCoy Wade, Director, California Department of Aging |
| 1:15 p.m. | IV. | 2021 Budget and Legislative Review
Farrah McDaid Ting, CSAC Health and Behavioral Health Senior Legislative Representative
Justin Garrett, CSAC Human Services Legislative Representative
Roshena Duree, CSAC Health and Human Services Legislative Analyst |
| 1:30 p.m. | V. | Closing Comments and Adjournment |

ATTACHMENTS

Legislative Health and Human Services Budget Priorities

Attachment One..... CSAC Memo: Senator Eggman on State Budget Priorities

Master Plan for Aging – State and Local Partnership

Attachment Two CSAC Memo: Master Plan for Aging

2021 Budget and Legislative Review

Attachment Three CSAC Memo: 2021 Budget Proposals and Legislation –
So Far

Attachment One

CSAC Memo: Senator Eggman on State Budget Priorities



OFFICERS

President

James Gore
Sonoma County

1st Vice President

Ed Valenzuela
Siskiyou County

2nd Vice President

Chuck Washington
Riverside County

Past President

Lisa A. Bartlett
Orange County



EXECUTIVE DIRECTOR

Graham Knaus

April 21, 2021

To: Health and Human Services Policy Committee

From: Justin Garrett, CSAC Human Services Legislative Representative
Farrah McDaid Ting, CSAC Health and Behavioral Health Senior Legislative Representative
Roshena Duree, CSAC Health and Human Services Legislative Analyst

RE: Senator Eggman on State Budget Priorities

Introduction. Senator Susan Talamantes Eggman has graciously accepted CSAC’s invitation to speak to the members of the CSAC Health and Human Services Policy Committee on her current budget priorities.

Senator Talamantes Eggman serves as the chair of the Senate Budget Subcommittee No. 3 on Health and Human Services. As chair of the budget subcommittee, Senator Talamantes Eggman reviews and hears all health and human service-related budget proposals on behalf of the Senate and plays a key role in determining which proposals are included in the Senate’s version of the budget – and which are excluded.

This year’s budget process is unlike any other, as Senator Eggman navigates COVID-19 restrictions, unanticipated state revenues, and federal stimulus funding opportunities – not to mention the scores of advocates and interests, including counties, who are jockeying for state funding support. The Governor will release his May Revision Budget by May 14, and the Senator will begin budget hearings in earnest to sift through proposals and ultimately construct the Legislature’s version of the 2021-22 budget by June 15.

Speaker Background. Dr. Susan Talamantes Eggman was elected to the State Senate in November of 2020, serving the 5th Senate District which is comprised of San Joaquin County, a significant portion of Stanislaus County and a smaller slice of south Sacramento County. Senator Talamantes Eggman served in the State Assembly from December 2012 through November 2020, and was previously a council member for the City of Stockton.

Senator Eggman was raised on an almond farm and apiary in the heart of the San Joaquin Valley and is a Licensed Clinical Social Worker. Besides her commitment to health, behavioral health, and human services issues, she is a member of the Senate Committees on Agriculture; Business, Professions and Economic Development; Energy, Utilities and Communications; Health; Military and Veteran’s Affairs; and Natural Resources and Water.

Resources.

- [Governor’s January Budget Proposal](#) (January 8, 2021)
- [Senate Summary of the Governor’s Proposed 2021-22 Budget](#) (January 8, 2021)
- [CSAC Budget Action Bulletin: Governor’s Proposed Budget for 2021-22](#) (January 8, 2021)

[Senate Democrats Budget Priorities for 2021-22](#) (April 13, 2021)

CSAC Staff Contacts:

Justin Garrett, CSAC Legislative Representative: jgarrett@counties.org, (916) 698-5751

Farrah McDaid Ting, CSAC Senior Legislative Representative: fmcting@counties.org,
(916) 595-7360

Roshena Duree, CSAC Legislative Analyst: rduree@counties.org, (916) 216-6247

Attachment Two

CSAC Memo: Master Plan for Aging



OFFICERS

President

James Gore
Sonoma County

1st Vice President

Ed Valenzuela
Siskiyou County

2nd Vice President

Chuck Washington
Riverside County

Past President

Lisa A. Bartlett
Orange County



EXECUTIVE DIRECTOR

Graham Knaus

April 21, 2021

To: Health and Human Services Policy Committee

From: Justin Garrett, CSAC Human Services Legislative Representative
Farrah McDaid Ting, CSAC Health and Behavioral Health Senior Legislative Representative
Roshena Duree, CSAC Health and Human Services Legislative Analyst

RE: Master Plan for Aging

Introduction. On January 6, Governor Newsom released the California Master Plan for Aging. The purpose of the Master Plan for Aging is to build a California for All Ages by 2030. The release was the culmination of more than a year of stakeholder input and recommendation development led by the California Health and Human Services Agency and California Department of Aging. Throughout the process, CSAC, counties, and county affiliates actively engaged in a variety of ways including participation on advisory committees, submission of written comments, and presentations at committee meetings.

The Master Plan is organized around five broad goals: (1) Housing for All Ages and Stages; (2) Health Reimagined; (3) Inclusion and Equity, Not Isolation; (4) Caregiving that Works; and (5) Affordable Aging. Each of these broad goals includes a target, local model, and identification of strategies. While a ten-year plan, the Master Plan identifies 132 actionable initiatives for the first two years. Many of these initiatives are specific to county aging programs, including In-Home Supportive Services (IHSS), Adult Protective Services (APS) and Area Agencies on Aging (AAA), or otherwise related to policy areas where counties play a key role including housing, transportation, emergency preparedness, and broadband.

We have invited the Director of the California Department of Aging, Kim McCoy Wade, to the policy committee to discuss the Master Plan for Aging, including implementation updates, local leadership structure, and insights on key partnership and engagement opportunities for counties.

Speaker Background. Kim McCoy Wade was appointed Director of the Department of Aging in November 2019. Previously, she served at the California Department of Social Services as the CalFresh & Nutrition Branch Chief, where she led the expansion of CalFresh food benefits to older adults and people with disabilities. Director McCoy Wade skillfully led the lengthy and comprehensive stakeholder process that informed the development of the Master Plan for Aging. She has been a strong partner of counties throughout the development of the Master Plan and shifting into implementation. This includes consistent outreach to seek county input on different aging programs and policies, speaking at a CSAC Board meeting in 2020, and participating in CSAC’s Master Plan for Aging webinar in March of this year.

Resources.

[California Master Plan for Aging](#)

[Master Plan Local Playbook](#)

[Master Plan Data Dashboard](#)

[CSAC Master Plan for Aging webinar recording](#)

[CSAC bulletin article summarizing Master Plan](#)

CSAC Staff Contacts:

Justin Garrett, CSAC Legislative Representative: jgarrett@counties.org, (916) 698-5751

Farrah McDaid Ting, CSAC Senior Legislative Representative: fmcting@counties.org,
(916) 595-7360

Roshena Duree, CSAC Legislative Analyst: rduree@counties.org, (916) 216-6247

Attachment Three

CSAC Memo: 2021 Budget Proposals and Legislation – So Far



OFFICERS

President

James Gore
Sonoma County

1st Vice President

Ed Valenzuela
Siskiyou County

2nd Vice President

Chuck Washington
Riverside County

Past President

Lisa A. Bartlett
Orange County



EXECUTIVE DIRECTOR

Graham Knaus

April 21, 2021

To: CSAC Health and Human Services Committee

From: Farrah McDaid Ting, CSAC Health and Behavioral Health Senior Legislative Representative
Justin Garrett, CSAC Human Services Legislative Representative
Roshena Duree, CSAC Health and Human Services Legislative Analyst

RE: 2021 Budget Proposals and Legislation - - So Far

Background. The impacts of COVID-19 dominated the legislative process last year and significantly impacted how CSAC advocated on behalf of counties. While COVID-19 response and recovery continues to be a top priority for the Administration, Legislature and advocates, the 2020 discussions concerning cuts have been replaced with conversations regarding expansions and far-reaching policy changes in 2021. The CSAC organization and the health and human services (HHS) team are committed to securing and maintaining the necessary funding counties require to ensure programs and services continue reaching those in need.

There are several important legislative deadlines in the coming months. April 30 is the last day for policy committees to meet on bills with fiscal impacts, and May 7 is the deadline for bills with no fiscal impact. Due to cost concerns, many bills get held in the Appropriations Committees or significantly amended at the May 21 fiscal committee deadline. All bills must be passed by their house of origin by June 4. Any bills that fail to meet these deadlines typically will not proceed in the legislative process, but in the last couple of years there have been countless rule waivers. Amongst the legislative deadlines comes the state budget deadlines, with the Governor required to release the May Revision Budget by May 14 and the Legislature required to adopt a budget by June 15. CSAC staff will continue to engage on a wide range of budgetary, legislative, regulatory, and implementation issues through the next few months. Some key budgetary and legislative topics of interest are detailed below.

State Budget Items

The key health budget proposals include:

- **CA Can't Wait Coalition: Public Health Infrastructure and Workforce:** CSAC and a coalition of county affiliates, led by the California Health Executives Association of California (CHEAC) and including Urban Counties of California (UCC), Rural County Representatives of California (RCRC), and the Health Officers Association of California (HOAC), are requesting \$200 million in ongoing State General Fund dollars to facilitate the stabilization of local health jurisdictions so they may address the following key needs and issues that are distinct and separate from COVID-19 responses, including, but not limited to:

- Recruiting and retaining a modern public health workforce, along with sustainable training to build and maintain expertise; Improving and expanding communicable disease monitoring, epidemiology, and outbreak mitigation, along with infrastructure improvements;
- Addressing health equity issues and health disparities through a wide variety of action-oriented approaches using meaningful engagement with diverse communities who are impacted by systemic racism; and through integrating public health as a core partner in addressing the social determinants of health;
- Improving and expanding environmental health and environmental justice capabilities for detecting and protecting communities from hazardous conditions in air, water, food, and other settings, and to address the impact of climate change on the diverse communities of California.

As part of the package, CSAC is also supporting AB 240 (Rodriguez), which requests \$3.45 million one-time General Fund for a public health workforce study and a comprehensive assessment of local health department capacity.

- **Public Health Care Systems Investments:** CSAC is supporting a budget proposal sponsored by the California Association of Public Hospitals and Health Systems (CAPH) that will help to reimburse costs associated with the increase in Medi-Cal fee-for-service COVID-19 patients. The request is for \$300 million General Fund. The financial burden is solely upon safety-net systems to provide the entire non-federal share for these Medicaid patients. State funding would be used to help offset these costs and support efforts to continue providing much-needed services for Medi-Cal fee-for-service patients affected by COVID-19.
- **County Public Administrators, Public Guardians, and Public Conservators Funding Request:** CSAC is a cosponsor on a \$120 million request for an ongoing General Fund request to support current PG/PA/PC caseloads. Public guardian programs are directed by the courts to serve adults who are unable to act in their own best interests as a result of serious mental illness, cognitive impairment, or death.
- **2-1-1 infrastructure:** CSAC is joining the United Ways of California in requesting \$10 million in one-time General Fund to support 2-1-1 infrastructure, workforce, and disaster preparedness.

The key human services budget proposals include:

- **In-Home Supportive Services (IHSS) Collective Bargaining:** CSAC is sponsoring an IHSS collective bargaining budget proposal along with the California Association of Public Authorities, the County Welfare Directors Association (CWDA), UCC, RCRC, and the two IHSS provider unions – UDW/AFSCME Local 3930 and SEIU California. CSAC is also opposing an IHSS fiscal penalty proposal that is sponsored by UDW/AFSCME Local 3930.

The goal of the coalition budget proposal that CSAC is sponsoring is to maintain the existing IHSS collective bargaining funding mechanisms that have been successful in leading to an increased number of local agreements to increase wages for IHSS providers. On January 1, 2022, two changes are set to occur that will make it more difficult to reach agreements. The historic state/county sharing ratio will flip so that counties would be responsible for 65 percent of the nonfederal share, instead of 35 percent, and the tool for participation above the cap would no longer be available. The budget proposal would

preserve the existing funding mechanisms by maintaining the current sharing ratio and extending the use of the tool for participation above the cap so that further progress on IHSS collective bargaining can be achieved.

CSAC is strongly opposed to the proposal that would enact a penalty on counties that fail to reach a collective bargaining agreement. There has been significant and sustained progress on collective bargaining with 46 counties increasing wages since 2017. It is the IHSS funding mechanisms that have been the driver of the increased number of agreements, not any sort of threat of an IHSS fiscal penalty. The proposal ignores the progress that has been made on IHSS collective bargaining and is inconsistent with previous actions. The way to encourage and support future agreements is to adopt the coalition budget proposal to provide a positive fiscal incentive rather than a punitive approach.

- **Child Welfare Investments:** CSAC is supporting two budget proposals sponsored by CWDA that will help further support implementation of important state and federal child welfare reforms and improve outcomes for children and youth. The first request is for \$80 million for county workload for the Resource Family Approval process as part of the Continuum of Care Reform. Counties have been fronting these costs and state funding, as required by Proposition 30, is needed to ensure that counties can continue this vital CCR work and meet other child welfare mandates. The second proposal is for \$100 million ongoing to establish local services and supports to prevent children and youth from entering foster care. The federal Family First Prevention Services Act enacted in 2018 created an opportunity for a federal match for investments in evidence-based prevention services. The services to families, children, and youth that would be possible with this investment include behavioral health services, substance abuse, parenting skills, and tangible supports.
- **Adult Protective Services Expansion:** The Master Plan for Aging presents important opportunities to make significant progress on aging issues. There are several key opportunities for investment this year. One critical initiative would expand and enhance the Adult Protective Services program with a \$100 million ongoing investment. CSAC has joined this coalition effort, which is led by CWDA and Justice in Aging. The funding would allow APS to provide long-term case management and serve vulnerable adults aged 60-65. The proposal would also expand and make permanent the Home Safe program, which prevents homelessness among victims of elder abuse and neglect. Providing these resources will help counties meet the growing population of older adults and growing needs for those who are victims of abuse and neglect.

Legislative Bills

Aging and Long-Term Care. While the big focus in this area is CSAC's sponsored IHSS budget proposal, there are several bills that CSAC is engaging on that align with our 2021 legislative aging priorities.

- **AB 636 (Maienschein)** would allow APS programs to share information with additional entities to help prevent and investigate instances of elder abuse. AB 636 would explicitly allow APS programs to share information with federal agencies where abuse incidents may go beyond the power of a local or state agency. The bill would strengthen the APS program so that counties can effectively respond to the increased and complex reports of abuse and further protect the health and safety of this growing population of elder and dependent adults. AB 636 passed the first house and has been referred to the Senate. CSAC Position: Support.

- **AB 695 (Arambula)** would allow county APS programs to provide long-term case management to help meet the increasingly complex needs faced by victims of elder abuse and neglect. In addition, it would expand the age of those served to allow APS to serve vulnerable adults ages 60 and over. Finally, this bill would expand the Home Safe program to so that additional housing-related supports can be provided and to allow additional counties to participate. This bill is the companion to the APS expansion budget request. CSAC Position: Support.
- **AB 911 (Nazarian) and SB 515 (Pan)** are both bills that would require the California Department of Aging to establish the LTSS Benefit Task Force to focus on identifying services and supports that older adults and individuals with disabilities need in order to safely live in their choice of housing. The Department would also be required to issue a report to the Legislature by July 1, 2023 that details the findings and recommendations of the Task Force. An existing board or committee, such as the Master Plan for Aging LTSS Subcommittee, which counties are represented on, could serve as the Task Force in lieu of establishing a new body. This legislation aligns with several initiatives identified in the Master Plan to create and administer an LTSS benefit and continue to engage the LTSS Subcommittee. CSAC Position: Support.

Conservatorship Issues. Interest in conservatorship issues continue to be of interest to the Legislature. National attention on the issue has highlighted areas of concern for the public. While CSAC does not have an opinion on the cases that have ignited additional interest, staff will continue to gain clarification on the intent of multiple pieces of related legislation and consider potential fiscal impacts for counties, including:

- **AB 574 (Chen)** would create a court process to appoint a Guardian Ad Litem for mentally ill adults who lack capacity to make rational informed decisions regarding medical care, mental health care, safety, hygiene, shelter, food, or clothing due to a mental illness. AB 574 specifically states the appointment of a Guardian Ad Litem would be mentally ill adult that is not under a conservatorship. The bill also outlines who can petition the court for this process that goes beyond the Lanterman-Petris-Short (LPS) Act's intent. CSAC opposed this bill when it was introduced last year. The bill has not been set for a policy hearing. CSAC's Position: Pending.
- **AB 1340 (Santiago)** would expand the definition of "gravely disabled" a term used for purposes of Section 5450 and Section 5350 holds. The bill would define gravely disabled as persons unable to provide for their own medical treatment, when refuses medical treatment for a life-threatening medical condition or the person is in imminent danger of physical injury and there is a substantial and imminent risk, in either instance, of either death or prolonged hospitalization, as attested by a medical professional in their best medical judgment. CSAC has historically opposed expansions such as this one. The bill has not been scheduled for a policy hearing. CSAC Position: Pending.
- **SB 578 (Jones)** is a bill that looks to make statutory changes to LPS hearings that explicitly states proceedings are presumptively nonpublic. The bill allows for a hearing to be public with the final determination to be made by the court. Additionally, the bill will allow for friends and families to be present at the nonpublic hearings. CSAC has not formalized engagement on this bill is now in the Assembly. CSAC Position: Pending.
- **SB 602 (Laird)** would require a conservator, to complete a care plan within 30 days of appointment or 30 days before any hearing to continue or terminate an existing conservatorship. The bill would require the Judicial Council to develop the care plan and specifies what information should be determined through the care plan form. The bill is part of a package of bills including AB 596, AB 1194 and SB 724 in which

the authors intend to respond to potential and alleged abuse of the probate conservatorship process.
CSAC Position: Pending.

Behavioral Health. Behavioral health funding and programs continues to be the backbone of the state priority in increasing access and preventing behavioral health crisis. While counties provide community-based treatment for individuals living with severe mental illness and with substance use disorders (SUD), the Legislature sees the need for statewide accountability and oversight. This year the Legislature has convened several informational hearings where mental health and substance use disorders have been highlighted. Throughout each hearing, the common theme has been the need for a behavioral health continuum of care particularly in response to COVID-19. CSAC will continue to engage on all fronts to ensure counties maintain the authority and flexibility to serve our communities while preserving transparency.

- **AB 226 (Ramos)** would require the Department of Health Care Services (DHCS) to license children’s crisis residential programs, which the bill reclassifies as children’s crisis psychiatric residential treatment facilities (PRTF). The bill additionally, requires DHCS would require the department to establish regulations and a certification process for the licensing of children’s crisis psychiatric residential treatment facilities. The bill would include inpatient psychiatric services to individuals less than 21 years of age provided in a licensed children’s crisis psychiatric residential treatment facility as mental health services provided under the Medi-Cal program. AB 226 will be heard in Assembly Health Committee. CSAC Positon: Support.
- **AB 988 (Bauer-Kahan)** implements the federal designation 9-8-8 as a mental health crisis line. AB 988 will create the new three-digit phone line, 988, for suicide prevention and immediate, emergency response for individuals in mental health crisis by mental health professionals. CSAC views this legislation as one that will require extensive local coordination and discussion. CSAC has engaged in conversations with Legislative staff and the bill’s sponsors on making this bill one that can be implementable. The bill is scheduled to be heard in Assembly Health Committee. CSAC Position: Pending.
- **AB 1051 (Bennett)** would restrict the “presumptive transfer” of foster youth placed in a group home, Short Term Residential Therapeutic Program (STRTP), or Community Treatment Facility (CTF) unless an exception is invoked. AB 1051 is the culmination of several years working to respond to concerns with the presumptive transfer process. AB 1051 specifically identifies two criteria in which an exception can be invoked: 1) when the youth would be better served with a transfer of responsibility for services or 2) when the youth will be relocating more permanently in the county where the youth is temporarily placed in a congregate setting will responsibility transfer to the receiving county. AB 1051 has passed the Assembly Health Committee and has been scheduled for a hearing in the Assembly Health Committee. CSAC Positon: Support.
- **AB 1098 (Daly)** would require the California Health and Human Services (CHHS) develop guidelines and standards for counties to promote the availability of recovery residence housing for individuals with a substance use disorder (SUD). The bill would also define a recovery residence as one that does not need to be licensed by DHCS. The guidelines would be developed with the consultation with county engagement by the County Behavioral Health Directors Association (CBHDA) of California. AB 1098 has passed the Assembly Health Committee and has been referred to Assembly Appropriations. CSAC Positon: Support.

- **SB 14 (Portantino)** is a bill co-sponsored by county affiliate CBHDA that would include student excused absences to include an absence that would benefit the mental or behavioral health of the student. The bill also requires the California Department of Education to recognize a training program for school employees that work with students on youth behavioral health. SB 14 has passed the Senate Education Committee and has been referred to Senate Appropriations suspense file. CSAC Position: Support.
- **SB 293 (Limón)** would require DHCS to develop standard forms relating to medical necessity criteria, mandatory screening and transition of care tools, and documentation requirements for specialty mental health services for children under the Early and Periodic Screening, Diagnostic, and Treatment Program. The bill would require DHCS to consult with CSAC and other county affiliates including CBHDA and CWDA. CSAC has engaged with bill sponsors and the author's office to express concerns with the potential for issues that may arise from standardized forms which may limit the flexibility counties may require. Additional concerns arise around the timing. The bill has been referred to the Senate Appropriations Committee. CSAC Position: Concerns.

Public Health. The COVID-19 pandemic has placed a spotlight on the vast work local health departments do for communities and the state specifically during disasters and emergencies. It has also shown the core public health values that educate, prevent and respond to disasters. Local health departments rely on a specialized public health professionals, including public health nurses, nutritionist, epidemiologists, communicable disease investigators, and biostatisticians, which has been highlighted statewide through this pandemic.

- **AB 240 (Rodriguez)** would require the CDPH to contract with an appropriate entity to conduct an evaluation of the adequacy of local health department infrastructure, including an assessment of future staffing, workforce, and resource needs. The assessment will provide an opportunity to recommend strategies that aid in the development and retention of a specialized and diverse public health workforce. AB 240 passed the Assembly Health Committee and has been referred to the Assembly Appropriations Committee. CSAC Position: Support.
- **AB 1251 (Muratsuchi)** would require Los Angeles County public health COVID-19 orders to be issued and consider by data from each service planning area, not county wide. CSAC believes bill will delay and decrease continuity within the county lines. AB 1251 was scheduled to be heard in Assembly Health Committee, but will be a two-year bill. CSAC Position: Oppose.
- **SB 395 (Caballero)** will establish the Healthy Outcomes and Prevention Education Act, that will imposes the California Electronic Cigarette or vape tax of electronic cigarettes, and creates the Health Careers Opportunity Grant Fund under Proposition 56. Specifically the bill will impose 12.5% tax on retailers for the sale of e-cigarettes. The proceeds from the tax would go towards funding programs under the First 5 Program that are of great importance to counties. The bill passed Senate Governance and Finance Committee and will be set to be heard in Senate Health Committee. CSAC Position: Support.

Nutrition Assistance. Decreasing food insecurity has been a priority for CSAC and counties in recent years. Particular interest and priority has gone to the most vulnerable throughout the country, older adults and children. CSAC will continue to support bills in this area.

- **SB 107 (Wiener)** would require the California Department of Social Services (CDSS) to participate in the Elderly Simplified Application Project (ESAP), a federal demonstration project that would remove barriers to CalFresh enrollment, such as, reducing the need for various documentation and interview

requirements for low-income older adults and disabled individuals. SB 107 would further allow all applicants and recipients the option to complete the application reporting, and recertification processes by phone. This has been an essential flexibility during the pandemic and will ensure a more accessible benefit program moving forward. SB 107 passed the Senate Human Services Committee. CSAC Position: Support.

Child Welfare and Foster Care. Protecting the health and safety of vulnerable children and youth and ensuring that counties have adequate funding for the full range of child welfare and foster care services remains a top priority. CSAC will continue to engage on bills in this policy area.

- **AB 640 (Cooley)** would allow counties to establish Title IV-E eligibility for many youth who do not currently meet Title IV-E eligibility as they enter Extended Foster Care. This CWDA-sponsored bill would provide some needed fiscal relief for counties for the Extended Foster Care program, which has not been fully funded as intended when the program was established. The Extended Foster Care program has led to improved outcomes for foster youth up to age 21 and this eligibility redetermination would be done without any interruption in services of supports to these youth. CSAC Position: Support.

Resources:

[Health and Human Services Legislative Tracking](#)

CSAC Staff Contacts:

Farah McDaid Ting, CSAC Senior Legislative Representative: fmcting@counties.org, (916) 595-7360

Justin Garrett, CSAC Legislative Representative: jgarrett@counties.org, (916) 698-5751

Roshena Duree, CSAC Legislative Analyst: rduree@counties.org, (916) 216-6247