

COMMONWEALTH OF PENNSYLVANIA
HOUSE OF REPRESENTATIVES

APPROPRIATIONS COMMITTEE
BUDGET HEARING

STATE CAPITOL
HARRISBURG, PA
MAIN CAPITOL BUILDING
140 MAJORITY CAUCUS ROOM

TUESDAY, FEBRUARY 18, 2020

DEPARTMENT OF AGING

BEFORE:

HONORABLE STAN SAYLOR, MAJORITY CHAIRMAN
HONORABLE MATT BRADFORD, MINORITY CHAIRMAN
HONORABLE ROSEMARY BROWN
HONORABLE LYNDA SCHLEGEL-CULVER
HONORABLE SHERYL M. DELOZIER
HONORABLE GEORGE DUNBAR
HONORABLE JONATHAN FRITZ
HONORABLE MATT GABLER
HONORABLE KEITH J. GREINER
HONORABLE SETH GROVE
HONORABLE MARCIA M. HAHN
HONORABLE DOYLE HEFFLEY
HONORABLE LEE JAMES
HONORABLE JOHN LAWRENCE
HONORABLE JASON ORTITAY
HONORABLE CLINT OWLETT
HONORABLE CHRIS QUINN
HONORABLE GREG ROTHMAN
HONORABLE JAMES STRUZZI
HONORABLE JESSE TOPPER
HONORABLE JEFF WHEELAND
HONORABLE RYAN WARNER
HONORABLE MARTINA WHITE
HONORABLE DONNA BULLOCK
HONORABLE MORGAN CEPHAS

*Pennsylvania House of Representatives
Commonwealth of Pennsylvania*

1 (Continued)

2 HONORABLE CAROLYN COMITTA
3 HONORABLE AUSTIN DAVIS
4 HONORABLE ELIZABETH FIEDLER
5 HONORABLE MARTY FLYNN
6 HONORABLE ED GAINNEY
7 HONORABLE PATTY KIM
8 HONORABLE STEPHEN KINSEY
9 HONORABLE LEANNE KRUEGER
10 HONORABLE STEPHEN MCCARTER
11 HONORABLE BENJAMIN SANCHEZ
12 HONORABLE PETER SCHWEYER

13 NON-COMMITTEE MEMBERS

14 HONORABLE MIKE PEIFER
15 HONORABLE GARY DAY
16 HONORABLE BRIAN SIMS
17 HONORABLE SCOTT CONKLIN
18 HONORABLE HARRY READSHAW
19 HONORABLE JAKE WHEATLEY
20 HONORABLE STEVE SAMUELSON

21 COMMITTEE STAFF PRESENT:

22 DAVID DONLEY
23 MAJORITY EXECUTIVE DIRECTOR
24 RITCHIE LAFEVER
25 MAJORITY DEPUTY EXECUTIVE DIRECTOR

ANN BALOGA
MINORIT EXECUTIVE DIRECTOR
TARA TREES
CHIEF COUNSEL

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*Pennsylvania House of Representatives
Commonwealth of Pennsylvania*

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SUBMITTED WRITTEN TESTIMONY

* * *

(See submitted written testimony and handouts
online.)

P R O C E E D I N G S

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3 REPRESENTATIVE DUNBAR: Good afternoon,
4 everyone. I will start by apologizing for
5 Chairman Saylor's departure. If you didn't
6 notice, he coughed up a lung during Revenue. And
7 no offense to Chairman Bradford -- I do like
8 Matt -- but I am not sitting there until a
9 HAZ-MAT team comes in and fumigates that
10 completely.

11 With that being said, we are moving on
12 to the Department of Aging.

13 Secretary Torres, welcome.

14 SECRETARY TORRES: Thank you.

15 REPRESENTATIVE DUNBAR: Anyone who is
16 going to testify today, if you would stand and
17 raise your right hand and I can swear you in.

18 (Testifiers sworn en masse.)

19 REPRESENTATIVE DUNBAR: Okay. Thank
20 you. So sworn.

21 And in the interest of time, we're not
22 having any opening statements, and we're going to
23 go directly to questions, if that's all right
24 with you, Secretary.

25 SECRETARY Torres: That would be fine.

1 I would like to introduce --

2 REPRESENTATIVE DUNBAR: Go right
3 ahead.

4 SECRETARY Torres: -- Deputy Secretary
5 Steve Horner, who oversees most of our Aging
6 services programs, and Director Tom Snedden, who
7 directs the PACE Pharmaceutical Program.

8 REPRESENTATIVE DUNBAR: Very good.
9 welcome.

10 And we will start with Representative
11 Fritz.

12 REPRESENTATIVE FRITZ: Thank you,
13 esteemed Interim Chair Dunbar. And thank you,
14 Mr. Secretary, for being here.

15 SECRETARY Torres: Thank you.

16 REPRESENTATIVE FRITZ: With the
17 increasing elder population being a
18 Commonwealth-wide phenomenon, can you kindly
19 share with us your Agency's observations? Is it
20 more rural based or non-rural based? Is it more
21 pronounced in rural areas versus non-rural areas?

22 SECRETARY TORRES: I think right now,
23 the population -- we're at 3 million over the age
24 of 60, and that's pretty spread out across the
25 Commonwealth. The other point that I would make

1 is it's diversifying, even as the years go on.
2 So it's an issue that I've been talking about
3 most of the past year because that 3 million is
4 going to grow over the next 20 years to 4
5 million. And with that, you can anticipate a
6 large demand for services that we need to
7 position our self well for moving forward.

8 REPRESENTATIVE FRITZ: And that is in
9 contrast to the face that we have a general
10 population decline in Pennsylvania. So with that
11 in mind, what can we focus on to ensure that
12 we're taking proper care of our aging population?

13 SECRETARY TORRES: Well, we -- one of
14 the things that I'm stressing is looking for
15 partnerships. Recently this year we talked to
16 the Pennsylvania Association of Community Health
17 Centers to see what partnership opportunities
18 might be there. We're also working with the Area
19 Agencies on Aging to look at ways that we can
20 leverage the dollars that we receive now into the
21 future and expand the use of those dollars.

22 In particular, we're looking at how
23 we're performing our services, making sure that
24 we focus on core services, but also the processes
25 and procedures that we're using. So over this

1 past year, we've offered the services of the
2 Governor's Office of Performance Excellence, for
3 example, to take a look at procedures and
4 processes at the local level and to see, again,
5 what opportunities are there to streamline and
6 make sure that we have the capacity moving
7 forward to provide those services.

8 REPRESENTATIVE FRITZ: MR. Secretary,
9 do you share the opinion that we can drive up use
10 of our senior centers in our counties?

11 SECRETARY TORRES: I believe we can.
12 I think, you know, what I've heard when I've been
13 on the road is that some seniors do not want to
14 be part of the senior centers. I think it
15 requires us to look at, for example, the increase
16 in the baby boomers who are coming, what are they
17 really looking for?

18 And some of the AAAs have actually
19 surveyed that population to see what they want to
20 see in a senior center, as opposed to what some
21 perceive as just kind of a stereotypical senior
22 center that is perhaps not as active or as
23 engaging as they might like it to be, but I think
24 that's a conversation we've been having
25 throughout the past year.

1 REPRESENTATIVE FRITZ: MR. Secretary,
2 I will share an observation. I was proud and
3 lucky to spend a couple terms as a county
4 commissioner. We did have devoted staff at our
5 senior centers, but as I interacted with
6 constituents that were perhaps of that
7 demographic, they said we don't go to senior
8 centers because that's where the old people go.

9 So with that in mind, with that
10 mentality in mind, what can we do to re brand our
11 senior centers and drive up use of those
12 facilities?

13 SECRETARY TORRES: I've actually
14 talked to the Association, the Pennsylvania
15 Association of Senior Centers, and one person
16 commented, we should probably get rid of the name
17 senior center to start. But I've been to senior
18 centers, Representative, that -- I kind of joke,
19 I said, you know, some of these folks look
20 healthier and more active than me and I had a
21 good time.

22 And from talking to the seniors,
23 they're engaged. They're getting the types of
24 activities that they're looking for, in terms of
25 participating in activities to engage with other

1 seniors, to avoid social isolation, health and
2 wellness, state alliance of YMCA is also seeing a
3 lot of seniors, as well. So we're talking to
4 them to see if there are partnership
5 opportunities there between them and senior
6 citizens that can help better promote and better
7 engage seniors that are going.

8 REPRESENTATIVE FRITZ: Okay. A
9 continued focus on that is much appreciated.

10 Thank you very much.

11 REPRESENTATIVE DUNBAR: Thank you,
12 Representative Fritz.

13 Next will be Representative Sanchez.

14 REPRESENTATIVE SANCHEZ: Thank you,
15 Chairman Dunbar.

16 Right up here, gentlemen. How are
17 you? welcome, Secretary, Deputy Secretary,
18 Mr. Director.

19 I wanted to get the Department's
20 thoughts and maybe positions on the issue of
21 guardianship and reimbursement for guardianship.
22 And correct me if I'm wrong on any of this,
23 please, but it's my understanding that indigent
24 individuals living in the community are not
25 eligible for reimbursement for guardian services,

1 meaning they, you know, need to find a
2 compassionate person that may be willing to
3 provide that for free, whereas individuals who
4 might have an income, or at least live in a
5 nursing home, they can receive up to \$100 a
6 month, which is by the way a rate set back in
7 1988, so it may have not actually reflect the
8 value of that. But it still seems kind of turned
9 on its head. Maybe the -- you know, it would be
10 better served having the reimbursement for the
11 indigent population and/or an overall increase.

12 Could you maybe elaborate on the
13 Department's position here? I know there's a lot
14 wrapped up in there.

15 SECRETARY TORRES: It's an issue that
16 keeps reoccurring as a problem, in terms of
17 finding individuals who want to serve as guardian
18 and then reimbursing, or at least increasing the
19 reimbursement to encourage individuals to take on
20 those responsibilities. It's something that gets
21 reimbursed through the Department of Human
22 Services.

23 I know the courts -- I'm a member of
24 the Advisory Council on Elder Justice and they've
25 recommended increasing the fees. So that's

1 something that, as a Department, is a concern to
2 us because we want to make sure that older adults
3 are being taken care of properly. And having
4 individuals that can be relied upon, I think, is
5 important as part of that guardianship
6 relationship.

7 REPRESENTATIVE SANCHEZ: Is it a fee
8 structure that could be changed administratively
9 for that, or does that require legislative
10 enablement?

11 SECRETARY TORRES: I believe that
12 should be a question for the Department of Human
13 Services.

14 REPRESENTATIVE SANCHEZ: Okay. Thank
15 you.

16 SECRETARY TORRES: Thank you.

17 REPRESENTATIVE DUNBAR: Thank you,
18 Representative.

19 Next will be Representative Culver.

20 REPRESENTATIVE CULVER: Thank you,
21 Mr. Chairman.

22 Secretary Torres, over here.

23 Last year when you were here, the
24 report done by the Office of Inspector General
25 had just come out and none of us had had the

1 opportunity to review it. Since that time
2 period, we have had that opportunity. And the
3 report did an investigation of the Department's
4 monitoring of county-based agencies that
5 investigate allegations of abuse.

6 So finding number 5 in the state
7 Inspector General's report stated that the
8 Pennsylvania Department of Aging was not offering
9 timely guidance to AAAs on case management. The
10 Department records show 24 out of the 25
11 monitoring reviews conducted in 2018 were
12 completed after target dates. So my line of
13 questioning will have to do with sort of where
14 we're at today.

15 So did the Department of Aging conduct
16 timely annual quality assurance monitoring
17 reviews of all 52 AAAs in 2019?

18 SECRETARY TORRES: We've conducted
19 timely reviews of those that were scheduled.

20 REPRESENTATIVE CULVER: And do you
21 know how many there were done last year?

22 SECRETARY TORRES: I don't know. I
23 would have to get you the exact number.

24 REPRESENTATIVE CULVER: Could you get
25 that?

1 SECRETARY TORRES: Yeah, sure.

2 REPRESENTATIVE CULVER: And then,
3 could you tell us who exactly was monitored last
4 year?

5 SECRETARY TORRES: We can do that.

6 REPRESENTATIVE CULVER: Okay.

7 The report also found that the
8 Department was not issuing post-monitoring
9 letters in a timely fashion, sometimes taking
10 more than two months to issue the letter.

11 So what procedures have been
12 implemented to ensure post-monitoring letters are
13 issued promptly?

14 And then, I'll just follow that up
15 with what was the average number of days it took
16 to issue those letters in 2019?

17 SECRETARY TORRES: I don't have the
18 exact data in terms of the monitoring letter, but
19 I can assure you that we've been working
20 throughout all of 2019 to follow up. We've done
21 a lot in the area of protective services,
22 including one of the findings in that report
23 talked about data and not having accurate data.

24 So we've been publishing quality
25 assurance report on an ongoing basis. We've been

1 working pretty consistently throughout 2019.
2 We've increased the number of trainings, you
3 know, trainings that we are giving both for
4 intake staff and on an ongoing basis in terms of
5 the regulation.

6 So I guess my point is, we've been
7 working quite a bit, and in partnership with the
8 AAA network. I personally meet with their
9 association and the leadership. I was meeting
10 every other week. That -- we scaled that back to
11 monthly, but --

12 REPRESENTATIVE CULVER: Okay.

13 SECRETARY TORRES: -- but that's how
14 consistently we've been working on addressing the
15 findings in that report. And --

16 REPRESENTATIVE CULVER: So if you
17 wouldn't mind though, if you could get back to me
18 with that other information --

19 SECRETARY TORRES: Sure.

20 REPRESENTATIVE CULVER: -- just the
21 average number of days that it took to get those
22 letters out.

23 SECRETARY TORRES: Okay.

24 REPRESENTATIVE CULVER: How many AAAs
25 received a red score, a yellow score, and a green

1 score in 2019?

2 SECRETARY TORRES: I believe we have
3 nine that are red.

4 Steve, do you have --

5 REPRESENTATIVE CULVER: Do you know
6 how many in the yellow?

7 SECRETARY TORRES: I don't have the
8 exact number. I know we have nine red currently
9 and -- do you know?

10 DEPUTY SECRETARY HORNER: I don't have
11 that.

12 SECRETARY TORRES: Yeah, we'll get you
13 that.

14 REPRESENTATIVE CULVER: I'm sorry?

15 SECRETARY TORRES: I don't have the
16 exact number.

17 REPRESENTATIVE CULVER: And do you
18 know how many are in the green, or no?

19 SECRETARY TORRES: The majority are
20 green, but --

21 REPRESENTATIVE CULVER: Okay.

22 SECRETARY TORRES: -- I can get you
23 the exact numbers.

24 REPRESENTATIVE CULVER: And of those,
25 I guess it's my understanding that a red score

1 reflects significant or repetitive quality issues
2 and one or more seniors were left at risk; is
3 that correct?

4 SECRETARY TORRES: That's correct.

5 REPRESENTATIVE CULVER: And did the
6 Department staff conduct another review of those
7 nine red AAAs and issue a corrective action plan
8 to them?

9 SECRETARY TORRES: That -- that's been
10 part of what we've been doing throughout 2019.
11 The answer is yes, and we've -- we've provided
12 technical assistance as part of that process and
13 follow-up monitoring to try and get the issues
14 resolved.

15 REPRESENTATIVE CULVER: So what
16 happens if the AAA does not implement that
17 corrective action plan, or has that happened?

18 SECRETARY TORRES: It has not
19 happened, but we're working with the AAAs to get
20 them where they need to be. In some cases, for
21 example, just to put some context, where a AAA
22 was struggling because of turnover, staff
23 turnover or vacancies, we've seen one county, for
24 example, their county commissioners allowed them
25 to hire extra staff to support the need because

1 they were -- they were having problems keeping up
2 with the demand for protective services.

3 So some of these things, you know,
4 once the findings are issued, take time to work
5 out and to get them back on track. But the
6 counties, for the most part, are taking the
7 appropriate steps to work their way out of that
8 situation.

9 REPRESENTATIVE CULVER: So are there
10 penalties for noncompliance by the AAAs?

11 SECRETARY TORRES: Well, according to
12 our cooperative agreement, if there was blatant
13 disregard for getting back into compliance, we
14 could impose a financial penalty, yes.

15 REPRESENTATIVE CULVER: Is there --
16 and I'm not sure how long we've been doing the
17 scoring system, but are there any AAAs that have
18 done a red score repeatedly?

19 SECRETARY TORRES: Yes.

20 REPRESENTATIVE CULVER: Are they still
21 doing that?

22 SECRETARY TORRES: Yes, we're still
23 working with them.

24 REPRESENTATIVE CULVER: Okay. I'm out
25 of time so I just impart on you that it's really

1 important that we are taking care of the seniors.
2 And in my district, there are a couple that have
3 fallen through the cracks. So if there's
4 anything we can do to help you in that endeavor,
5 we would be glad to do that.

6 Thank you for your time.

7 SECRETARY TORRES: Thank you.

8 REPRESENTATIVE DUNBAR: Thank you,
9 Representative Culver.

10 Next will be Representative Bullock.

11 REPRESENTATIVE BULLOCK: Thank you,
12 Mr. Chairman.

13 Good afternoon, gentlemen. I'm on
14 this side of you. Great. I have two sets of
15 questions for you. Mr. Secretary, my first
16 question will be a follow-up to last year's
17 questioning around your workforce.

18 Could you first start with the total
19 number of employees you have and then break down
20 the percentages compared to last year? So last
21 year's percentage and this year's percentage for
22 your workforce diversity, any efforts you have
23 done to improve those numbers.

24 My second set of questions is around
25 direct care workers and direct care training. I

1 had read reports that this is going to be one of
2 the largest and fastest growing employment or job
3 sectors in the economy, both in our State and
4 nationally as, we've heard, our population ages
5 and as we move to keeping our loved ones at home
6 as opposed to in nursing homes and other
7 facilities.

8 what efforts are underway to make sure
9 that those workers are trained properly and that
10 those workers are diverse and reflective of the
11 communities that they serve?

12 SECRETARY TORRES: Okay. So to your
13 first question, I currently have 76 filled
14 positions and -- I'm sorry. Last year, we had 76
15 filled positions. We had nine minorities, so
16 that was 12 percent of your complement. We had
17 hired, of the new hires that came in, we actually
18 had 30 percent that were hired as minorities.
19 Unfortunately, I lost one to retirement, one to
20 promotion, and one who left for another
21 opportunity.

22 So this year, as we currently stand,
23 we're at 10 percent. So we went down a little
24 bit. There's certainly room for improvement
25 there, and we're very conscientious about that.

1 One of the things that I speak about, again, is
2 the growing population over age 60, the fact that
3 it's diversifying 8.5 percent African-American,
4 2.5 percent Latino, 2.5 percent Asian. And those
5 figures are only going to increase moving
6 forward. So I think as a department, we need to
7 be sensitive to that and make sure that our
8 workforce reflects the individuals we're serving.

9 I would also add that I'm really proud
10 of our Department. We went through a planning
11 session a few months ago, and one of our core
12 values is that diversity and inclusion
13 strengthens us. And that's something that we are
14 making very clear. As I meet with AAAs, I also
15 question them with how they're dealing with
16 diverse populations, so it gives me an idea of
17 how we can work together to improve.

18 With regard to direct care workers,
19 our long-term care counsel came up with their
20 blueprint report back in April. Clearly, there's
21 going to be a growing need for direct care
22 workers. And the Governor has proposed some
23 funding in his budget to support training direct
24 care workers. And again, I think it's something
25 that as we as a Department talk about the growing

1 over-60 population and the diversification of
2 that population, that everyone is sensitive to
3 the needs to be reflective of the community that
4 we're serving. As I go out and I speak, I
5 constantly ask folks, you know, how much do you
6 know about the Department of Aging? I get very,
7 very low responses, especially in minority
8 communities or diverse communities, so that's a
9 concern that we're talking about and looking to
10 put some communication strategies in place that
11 could help.

12 REPRESENTATIVE BULLOCK: Thank you.
13 And I would stress that that would be very
14 important. As you mentioned, the aging
15 population is becoming more and more diverse. We
16 need direct care workers that reflect that, as
17 well, that are also language competent, as well,
18 as we look at a more diverse aging population.
19 So thank you for your efforts and your efforts
20 with the community, as well.

21 Thank you.

22 SECRETARY TORRES: Thank you.

23 REPRESENTATIVE DUNBAR: Thank you,
24 Representative.

25 Next will be Representative Owlett.

1 REPRESENTATIVE OWLETT: Thank you,
2 Mr. Chairman. And thank you, Mr. Secretary, for
3 joining us today. I want to thank all of those
4 that are so diligently caring for our seniors in
5 our communities all across the Commonwealth. I
6 had some great conversations with some folks that
7 are hard at work caring for our seniors in our
8 district this weekend. So I would like to talk
9 with you a little bit about the PACE and PACENET
10 Program. Act 87 of 2018 allowed the PACE and
11 PACENET Program to pay the Medicare Part D
12 enrollment penalty for enrollees.

13 How many individuals have been
14 enrolled in Part D as a result of Act 87 -- the
15 Act 87 waiver and penalties -- how many have been
16 saved, how much has been saved to date?

17 SECRETARY TORRES: I'm going to turn
18 that over to our director of PACE, Tom Snedden.

19 DIRECTOR SNEDDEN: We currently have
20 about 3,000 people whom we are paying the late
21 enrollment penalty for.

22 REPRESENTATIVE OWLETT: Okay.

23 DIRECTOR SNEDDEN: Many of those
24 people, prior to the waiver, were not in part D,
25 but they were in PACE and PACENET. And we save

1 roughly about \$2,000 a year on each of those
2 people.

3 REPRESENTATIVE OWLETT: Okay.

4 DIRECTOR SNEDDEN: I can get you more
5 precise numbers, but \$2,000.

6 REPRESENTATIVE OWLETT: Okay. Do you
7 ever cross-reference the PACE and PACENET
8 enrollment against the Department of Health's
9 death records and information?

10 DIRECTOR SNEDDEN: We do that, yes.

11 REPRESENTATIVE OWLETT: How often do
12 you cross-reference that?

13 DIRECTOR SNEDDEN: Quarterly.

14 REPRESENTATIVE OWLETT: Quarterly.
15 Okay. Your Department mails information to
16 enrollees about other programs and individuals
17 that may qualify for programs, such as SNAP.

18 How much do you spend on these
19 mailings and do you target mail based on
20 enrollees' income from their PACENET application?

21 DIRECTOR SNEDDEN: well, we have an
22 outreach activity that takes the form of an
23 outbound call center, that costs us approximately
24 \$2.5 million per year. That call center sends
25 out letters to about 600,000 older Pennsylvanians

1 annually.

2 REPRESENTATIVE OWLETT: Based on --
3 how do they figure out who to send that to?

4 DIRECTOR SNEDDEN: We use enrollment
5 listings from other agencies --

6 REPRESENTATIVE OWLETT: Okay.

7 DIRECTOR SNEDDEN: -- like property
8 tax and rent rebate to determine who has what
9 benefits and what benefits they might be eligible
10 for and not enrolled in.

11 REPRESENTATIVE OWLETT: Does it look
12 at their income before --

13 DIRECTOR SNEDDEN: Oh, absolutely.

14 REPRESENTATIVE OWLETT: -- prior to
15 mailing those?

16 DIRECTOR SNEDDEN: Yes, age and income
17 are the basis for all of the mailings.

18 REPRESENTATIVE OWLETT: So is the \$2.5
19 million total, including the mailings and the
20 call center?

21 DIRECTOR SNEDDEN: Absolutely.

22 REPRESENTATIVE OWLETT: Is that all
23 together?

24 DIRECTOR SNEDDEN: Absolutely. So
25 we've been doing this now for about 17 years, and

1 it has showed great results, particularly when I
2 contrast it with all of the money we spent on
3 advertising in the first 20 years of the program.
4 This gets real results. And on an annual basis,
5 the enrollment of these people in other benefits
6 saves them about \$100 million per year out of
7 their own pocket.

8 The money that constitutes \$2.5
9 million is also used to ensure that people in the
10 PACE and PACENET benefit who qualify for the
11 Medicare low income subsidy or extra help are
12 also enrolled in that benefit, and the savings
13 that we derive from doing that are multiples of
14 the \$2.5 million that we spend a year on the
15 activity. It's huge. These people would not
16 enroll in that low-income subsidy unless we did
17 their application for them online realtime and
18 submit it to CMS.

19 REPRESENTATIVE OWLETT: well, I
20 appreciate the outreach to them. One last thing,
21 are PACE and PACENET still facilitating
22 enrollment of veterans into the Pennsylvania
23 Veterans Registry?

24 DIRECTOR SNEDDEN: Yes, we are.

25 REPRESENTATIVE OWLETT: Okay.

1 DIRECTOR SNEDDEN: In fact, the same
2 call center that you're asking about is actually
3 doing those mailings.

4 REPRESENTATIVE OWLETT: The same
5 thing, okay.

6 DIRECTOR SNEDDEN: And we're not only
7 enrolling veterans in the registry, but we're
8 enrolling them in other benefits that they're
9 eligible for and don't have.

10 REPRESENTATIVE OWLETT: Great.

11 DIRECTOR SNEDDEN: That's probably
12 more important than the registry.

13 REPRESENTATIVE OWLETT: Thank you.
14 Appreciate it.

15 DIRECTOR SNEDDEN: You bet.

16 REPRESENTATIVE DUNBAR: Thank you,
17 Representative.

18 Next will be Representative Schweyer.

19 REPRESENTATIVE SCHWEYER: Thank you,
20 Mr. Chairman. Good afternoon, gentlemen.
21 Appreciate all that you're doing for our seniors.
22 Thank you for being here today.

23 A couple of things that are not
24 related at all, as is par for the course for me.
25 First, I was noticing, going through our numbers,

1 in the 2011-2012 budget, we saw a decrease of
2 about \$50 million in the overall cost of the
3 PACE/PACENET Program. And I believe that was a
4 result of the Affordable Care Act injecting
5 additional dollars in there and -- or saving
6 money, as the case may be, as a result of the
7 donut hole.

8 But there is a sizable lawsuit that
9 would invalidate the entire Affordable Care Act.
10 And that, I believe, 20-some-odd states have
11 signed onto. It's adorable to think that these
12 States can afford to take care of their seniors
13 and their populations as a whole without the ACA,
14 but regardless, I don't think we can.

15 what would happen, for the purpose of
16 this conversation, if the ACA is eliminated? If
17 that lawsuit is successful and therefore
18 detrimental to our seniors, would the Department
19 of Aging be able to absorb a \$50-million hit to
20 the PACE/PACENET program or would you simply just
21 have to start cutting back on benefits and
22 services for at-risk seniors?

23 DIRECTOR SNEDDEN: well, that, you
24 know, that would be a political budget decision,
25 you know, for us to cut back on the enrollment

1 eligibility and/or the benefit would require
2 changes in the authorizing legislation for the
3 program.

4 REPRESENTATIVE SCHWEYER: Okay. So we
5 would have two choices. You would be asking the
6 General Assembly to come up with \$50 million,
7 which would be a stretch for us without some kind
8 of pretty sizable change, or you would be asking
9 us to pass some kind of administrative change to
10 -- or eligibility change to the PACE/PACENET
11 program? But it would not be easy to just absorb
12 \$50 million and be like --

13 DIRECTOR SNEDDEN: Fifty million would
14 be a 30-percent increase in the current operation
15 cost.

16 REPRESENTATIVE SCHWEYER: Okay.

17 DIRECTOR SNEDDEN: It would be large.

18 REPRESENTATIVE SCHWEYER: Well, thank
19 you for that. I don't think we talk enough about
20 the overall impact of the ACA on multiple
21 departments, not just simply Human Services. So
22 thank you for that.

23 Changing topics a little bit -- not a
24 little bit, quite a bit. When I was first --
25 since I was first elected, I've been advocating

1 for funding specifically for our aging LGBTQ
2 population. I've introduced legislation the last
3 three sessions that would create a modest line
4 item in our -- in your Department of all \$500,000
5 to start funding and acknowledging the fact that
6 our LGBTQ seniors have different healthcare
7 needs, particularly while they're aging.

8 In the Lehigh valley, the most recent
9 study I found is about 25 percent of our
10 self-identified LGBTQ population is, in fact, at
11 or near the age of 65. So we have an aging gay
12 population that is -- that have very different
13 and very distinct healthcare needs. Since I've
14 gotten virtually no movement on legislation to
15 create a dedicated source of funding for this
16 population -- I look at it as population-based
17 health care -- what are some of the things that
18 your Department is doing specifically for the
19 aging LGBTQ population?

20 SECRETARY TORRES: We've been working
21 very, very closely with the LGBTQ community. I
22 personally have visited Persad Center in
23 Allegheny County, William Way in Philadelphia,
24 and met with LGBT seniors to hear firsthand some
25 of the challenges that they're facing and some of

1 the fears and anxieties that they have. So one
2 of the outcomes of those meetings is that we're
3 going to do an outreach specific to the LGBTQ
4 community.

5 Actually, Director Snedden was there
6 with me, so we have something in a few weeks, I
7 think. We'll be going back out, and we're
8 planning to do some specific outreach there.
9 We've been working with an LGBTQ work group
10 within the Commonwealth, again, to better
11 understand and better coordinate support services
12 that we can provide.

13 what else? Anything else?

14 Yeah. Again, with the Governor's
15 Pennsylvania Commission on LGBTQ Affairs, we work
16 very closely. We have a Cultural Diversity
17 Council within the Department of Aging and all of
18 those commissions are part of that. So they've
19 been well represented in everything that we're
20 doing. And certainly, we -- it's not an
21 afterthought for us. We're actively engaged.

22 REPRESENTATIVE SCHWEYER: No. And I
23 appreciate that. We see higher instances of
24 depression, anxiety, of substance abuse, tobacco
25 use, versus the population as a whole, specific

1 for that. And I think it's important that we
2 continue our efforts. Like I said, I look at it
3 as population-based health care for a growing
4 segment of our senior populations.

5 So with that, I see my red light is
6 on. I appreciate all of your efforts. Thank you
7 for your testimony today.

8 SECRETARY TORRES: Thank you.

9 REPRESENTATIVE DUNBAR: Thank you,
10 Representative.

11 Next will be Representative Struzzi.

12 REPRESENTATIVE STRUZZI: Thank you,
13 Mr. Chairman. Good afternoon.

14 SECRETARY TORRES: Good afternoon.

15 REPRESENTATIVE STRUZZI: Some simple
16 clarifications from the budget. In your general
17 operations -- general government operations, you
18 are asking for an increase of \$1.2 million, give
19 or take.

20 Why is that increase needed? It's
21 about a 14-percent increase in your general
22 government operations line?

23 SECRETARY TORRES: That increase is
24 just for salaries and benefits, essentially.

25 REPRESENTATIVE STRUZZI: Okay.

1 SECRETARY TORRES: Yeah.

2 REPRESENTATIVE STRUZZI: I also saw
3 that there was a decrease in the amount of
4 Federal funds that were, I guess, available for
5 your general operations budget of about a million
6 dollars.

7 Can you tell me why that Federal
8 funding decreased?

9 SECRETARY TORRES: Those would be
10 functions that transferred with Community Health
11 Choices, CHC. So there's a corresponding
12 decrease. There has been over the last three
13 years as services that were traditionally done
14 within Aging have now moved over to the
15 Department of Human Services.

16 REPRESENTATIVE STRUZZI: Okay. So the
17 increase in your budget request is separate from
18 the decrease in the Federal funds?

19 SECRETARY TORRES: That's correct.

20 REPRESENTATIVE STRUZZI: Okay. Thank
21 you.

22 SECRETARY TORRES: You're welcome.

23 REPRESENTATIVE DUNBAR: Thank you,
24 Representative.

25 Next will be Representative Cephas.

1 REPRESENTATIVE CEPHAS: Thank you,
2 Chairman. And thank you, Secretary, for joining
3 us today.

4 Oftentimes with our older adult
5 population, we provide a significant number of
6 services and resources through your Department,
7 so I definitely thank you for that. When I'm
8 coming from the 192nd legislative direct, we've
9 had the ability to build a significant number of
10 senior housing units through apartments. And for
11 each unit that we build -- it's roughly around 50
12 apartment units -- and for each unit, we
13 essentially have over 100 people applying for a
14 building that only houses 50.

15 So naturally, we can't build these
16 facilities enough, and a lot of our seniors are
17 choosing to age in place, age in their homes, and
18 not go out off to nursing facilities. So one of
19 the things that are often needed for our senior
20 population that are deciding to age in their
21 homes is resources to do minor repairs to their
22 homes to keep them in their houses, so they can,
23 again, age in the area that they grew up in, age
24 in a place that they are extremely familiar with.

25 Can you talk about any programs that

1 you have dedicated specifically for seniors that
2 are homeowners, but again that need minor
3 repairs?

4 We have a program in the city of
5 Philadelphia called the Basic Systems Home Repair
6 Program that does just that, but it's not just
7 for seniors. It's also for low-income residents.
8 And there's also programs over at PHFA,
9 Pennsylvania Housing Financing Agency, that helps
10 to fund those type of project, as well.

11 Has there been conversations with any
12 programs that you currently have in your
13 Department using or utilizing PHFA's flexibility
14 with funding to be able to scale up, based on the
15 need of our senior population?

16 SECRETARY TORRES: Yes, I'll start
17 with the programs within the Department. So our
18 options program allows for home modification, but
19 those decisions are made at the local level and
20 then there's four core services that have to be
21 provided, which is care management, personal
22 care, meals and adult day. So those are the four
23 priorities. And then, after that, the Area
24 Agencies on aging can use their discretion with
25 regard to funding home modifications that could

1 help an older adult stay in their home or address
2 some safety or health issue that may be present
3 in the home.

4 with regard to PHFA -- well, before I
5 go there, let me just say that as I've talked to
6 Area Agencies on Aging, affordable, safe housing
7 is a big concern, especially again with the
8 increase that we're seeing. There's not enough
9 stock. One of the things that we've done over
10 the last couple of years is we piloted a program
11 in Wayne, Pike, and Monroe Counties, called the
12 Share Program. So it's basically trying to match
13 older adults who want to stay in their home, who
14 can no longer, perhaps, do certain functions
15 around the house, with someone who's able to do
16 that, and is willing to do that at, you know, for
17 a lower rent.

18 So that's expanding. You know, it was
19 very successful in Wayne, Pike, and Monroe
20 Counties. It's expanding now to five other
21 counties. And those Area Agencies on Aging have
22 made a commitment to dedicate some staff
23 resources to doing the matchmaking, if you will,
24 because it's -- we go -- we're very careful in
25 terms of that process of matching up an older

1 adult with somebody else, to make sure that it
2 works. Beyond the lease, there's a separate side
3 agreement as to, you know, what the
4 responsibilities are going to be. So that's one.

5 We also have another pilot, which is
6 referred to as Echo. It's kind of a small
7 cottage and we did put in -- we talked to former
8 Executive Director Brian Hudson before he left,
9 and he was intrigued with the idea. So we
10 actually have a grant in with PHFA to see if
11 maybe they will provide some money that maybe we
12 can expand that count, as well. So those are
13 movable cottages that can be used.

14 But housing is huge. It's a big
15 problem that I continue to hear about.

16 REPRESENTATIVE CEPHAS: I'm happy to
17 hear that you're looking at exploring pilots, but
18 then also leveraging resources from other
19 agencies. I've had the opportunity to work with
20 an organization, specifically in my district with
21 PHFA, to direct specific funds for home repairs
22 for seniors. I just think when it comes to our
23 Area Agencies, we need to see how they're
24 leveraging those opportunities and grant
25 opportunities through other agencies to address

1 this growing need. So thank you.

2 SECRETARY TORRES: Yep. Thank you.

3 As a network, we're looking to get
4 diversification of funding and seeing how we
5 could fit under other programs. I think it's
6 going to be important to deal with the increased
7 population.

8 REPRESENTATIVE DUNBAR: Thank you,
9 Representative.

10 I wanted to notice that we were being
11 joined by Representative Gillen.

12 And next will be Representative
13 DeLozier.

14 REPRESENTATIVE DELOZIER: Thank you,
15 Mr. Chairman. Thank you both or all of you for
16 being here. My questions go to something that
17 affected our district -- my district,
18 particularly. And -- is agreeing in the sense
19 that, unfortunately, we had a case where a home
20 healthcare worker abused the person they were
21 taking care of. And that's not on Aging. That's
22 simply, that person did the wrong thing, but my
23 question goes down those lines in the sense of --
24 in your opening statement on your -- is safety
25 and making sure those in our communities are

1 safe.

2 So can you expand a little bit as to
3 the fact of -- I know you subcontract a lot of
4 times with home healthcare workers, but
5 background checks and how people know who it is
6 that's working with them in their homes?

7 DEPUTY SECRETARY HORNER: So for the
8 protective services, specifically, there is
9 background checks, State Police, and also FBI
10 checks for the direct care workers.

11 REPRESENTATIVE DELOZIER: Okay. So
12 anyone who is working with a senior within their
13 home has to have a background check --

14 DEPUTY SECRETARY HORNER: Correct.

15 REPRESENTATIVE DELOZIER: -- is that
16 correct?

17 DEPUTY SECRETARY HORNER: Correct.

18 REPRESENTATIVE DELOZIER: Which
19 obviously doesn't make them innocent of doing
20 anything moving forward, but just in the sense
21 that they have that background check. Okay.

22 One of the other issues that had come
23 up, actually separate from that, dealt with
24 somebody within -- it was a facility within the
25 88th District. And a lot of the families were

1 advocating because they felt the services were
2 not adequate and that their loved one was not
3 being treated the right way. I had reached out a
4 lot -- and their biggest frustration was
5 advocacy.

6 And I asked them about the AAAs. I
7 asked them about the ombudsman. I asked them
8 about, you know, have you spoken to these
9 individuals? And they weren't familiar with any
10 of those types of individuals to be able to reach
11 out to.

12 So could you expand a little bit about
13 -- as to how do we make sure that those families
14 know they have that resources because I know that
15 that's a priority for the Department of Aging,
16 but those in my district were not seeing that, so
17 how can we close that gap?

18 SECRETARY TORRES: well, certainly
19 legislators can help. We just published our 2020
20 Benefits and Rights for Older Pennsylvanians.
21 That's an excellent resource. One of the things
22 that I've charged our Communications Department
23 with is trying to build those linkages so that
24 regardless of who's running the office, that
25 there are established communication channels that

1 will reach the populations that we're trying to
2 reach.

3 REPRESENTATIVE DELOZIER: Do each of
4 them have -- so are each of the senior facilities
5 under a certain entity that -- a certain AAA?
6 How does that work exactly? I don't know that.

7 SECRETARY TORRES: The senior centers?

8 REPRESENTATIVE DELOZIER: Yeah. Well,
9 not the senior centers. Like, if someone in a
10 long-term care facility and they had no access to
11 a AAA that they were familiar with, can you tell
12 me how they would outreach to that?

13 I mean, obviously, the numbers that
14 you're talking about, but why weren't they
15 familiar with the AAAs and the person that could
16 facilitate their complaints and make sure that
17 they were being addressed?

18 SECRETARY TORRES: I mean, a long-term
19 care office, that's essentially their function to
20 investigate, try to resolve any grievance in a
21 long-term care facility for a resident. So that
22 would be probably the first place to go to.
23 We've also -- we also have our peer network,
24 which is basically training residents to kind of
25 be their own advocates, and that's been very

1 successful. And now there are some other States
2 looking at what we've done.

3 REPRESENTATIVE DELOZIER: Okay.

4 SECRETARY TORRES: So --

5 REPRESENTATIVE DELOZIER: Well, I'm
6 just -- I'll just put it out there as to the fact
7 that their frustration, this family's frustration
8 is they felt like they had nowhere to go. And
9 they did come to me and we were trying to
10 facilitate that with the Department to make sure
11 that their concerns were heard, but my question
12 still remains, the fact of why weren't they aware
13 of what the AAAs do and how they're supposed --
14 that's their job is to facilitate that, and they
15 were not seeing that. So that's frustration for
16 them.

17 And some people in our facilities, and
18 all across the State, may not have active
19 families that can advocate for them. So
20 absolutely, advocating for themselves, that's
21 great, but in some cases, that's not the
22 situation, unfortunately, with some of our
23 seniors.

24 The other issue that I would quickly
25 like to bring up is senior centers. You had

1 mentioned them. Senior centers, I'm glad to have
2 two in my district, in Mechanicsburg and the West
3 Shore. And I know that the Mechanicsburg one is
4 with Messiah. And the other one in West Shore is
5 a non-profit, but the ability for us to deal with
6 the \$2 million in grants, could you expand a
7 little bit as to the fact of the \$2 million, is
8 there a cap because there's 517 senior centers
9 and I know you don't go to all of them -- grants
10 don't go to all of them -- and it rotates.

11 Is there a cap on how much someone can
12 get in a grant of that \$2 million.

13 SECRETARY TORRES: It's \$150,000.

14 REPRESENTATIVE DELOZIER: Is it
15 capped? Okay.

16 And is there a requirement that if
17 they get it one year, they can't come back for a
18 certain amount of time, so someone couldn't come
19 back again and again.

20 SECRETARY TORRES: Sure. Sure.

21 REPRESENTATIVE DELOZIER: Okay. The
22 ability -- and it's a competitive grant for
23 those?

24 SECRETARY TORRES: That's correct.

25 REPRESENTATIVE DELOZIER: So they can

1 compete for those. And the ability -- I'm going
2 to run out of time. I did.

3 Thank you very much.

4 REPRESENTATIVE DUNBAR: Thank you,
5 Representative.

6 Next will be Representative Fiedler.

7 REPRESENTATIVE FIEDLER: Hello. Thank
8 you for being here.

9 In my district in south Philadelphia,
10 I often talk with seniors and their family
11 members about the challenges that they're facing
12 in getting high quality care. Some other folks
13 have asked about direct care workers who, as we
14 know, are often low paid, receive minimal or
15 little training and also have challenges and
16 limited opportunities for advancement, career
17 advancement.

18 Can you talk a little bit about the
19 potential to increase the minimum wage and the
20 ways in which it would help to recruit and retain
21 workers and also really stabilize the workforce
22 so that we can make sure our senior citizens are
23 getting really high quality, consistent care?

24 SECRETARY TORRES: Sure. So once
25 again, the Governor has proposed an increase to

1 the minimum wage. Twenty percent of the home
2 care workers are living below the poverty level,
3 and I think that rises to like 50 percent.

4 REPRESENTATIVE Fiedler: Could you
5 repeat that again, please?

6 SECRETARY TORRES: Let me make sure
7 I'm --

8 REPRESENTATIVE Fiedler: I think it's
9 an important point. Thank you.

10 SECRETARY TORRES: Sure. Well, let me
11 just say this --

12 REPRESENTATIVE Fiedler: No, I didn't
13 mean to question your statistics.

14 SECRETARY TORRES: No.

15 REPRESENTATIVE Fiedler: I just
16 thought they were important to --

17 SECRETARY TORRES: I just can't put my
18 hand on it right now, but I know from the home --
19 I believe it's the Home Care Institute -- 20
20 percent of direct care workers are making under
21 Federal poverty level. And then, that rate
22 doubles when you talk about 200 percent of the
23 Federal. So just trying to get workers to
24 stabilize that workforce, to make sure you're
25 getting quality workers and that you're not

1 seeing constant turnover. The disruption that
2 that causes to older adults in terms of
3 continuity of care, quality of care. It's
4 important.

5 That was part of what the direct care
6 blueprint that the Long Term Care Council put
7 out. How can we stabilize the workforce, make
8 sure that moving forward with the increase in the
9 population, that we would have sufficient direct
10 care workers that can take care of individuals
11 who are going to need that level of care.

12 So I think looking at the increase in
13 the minimum wage, making sure that they're being
14 supported by a livable wage and the benefits of
15 maintaining that continuity of care and the
16 quality of care is critical.

17 REPRESENTATIVE Fiedler: Thank you.

18 SECRETARY TORRES: You're welcome.

19 REPRESENTATIVE DUNBAR: Thank you,
20 Representative.

21 Next will be Representative Gabler.

22 REPRESENTATIVE GABLER: Thank you,
23 Mr. Chairman. And thank you, Mr. Secretary. I
24 wanted to follow up on a couple of questions.
25 The first one -- in one of the prior questions

1 you were talking about the general government
2 operations line item. The Governor's proposed
3 budget includes a \$1.2 million increase, a
4 14-percent difference over last year, and you
5 stated that was for salaries and benefits.

6 I just wanted to understand, is that
7 assuming the same number of employees in the same
8 complement in the prior year? Is that just a
9 change holding the number of employees separate,
10 or is there more people on-boarding into the
11 Agency to account for that?

12 It just sounds like a large
13 difference, 14-percent increase, when the rate of
14 inflation over the rate of 2019 was 2.3 percent.

15 SECRETARY TORRES: I would assume
16 that's holding the complement where it's at.

17 REPRESENTATIVE GABLER: Okay. So --

18 SECRETARY TORRES: The authorized
19 complement.

20 REPRESENTATIVE GABLER: It sounds like
21 that might be a little bit, kind of, out of line
22 with the economy. So I was a little bit -- just
23 was a little bit concerned there, but I
24 appreciate your answer there.

25 Also, following up on another prior

1 question. You were discussing the minimum wage
2 and its impact on certain workers. My question
3 is that I understand that the Governor's budget
4 does not include an increase in PennCare for
5 options or attendant care services due to the
6 proposed minimum wage increase.

7 How is that possible to not have a
8 change in the outlay for that line item if the
9 minimum wage would, in fact, be changing, which
10 would change the rate of compensation for workers
11 under those line items -- for that line item?

12 SECRETARY TORRES: We surveyed some of
13 the AAAs again at the AAA level. Most of the
14 employees would not be impacted by the increase,
15 so it would be minimal in terms of the impact on
16 the Area Agencies on Aging.

17 REPRESENTATIVE GABLER: And you did a
18 survey. Would you be able to share the results
19 of that survey with the Committee?

20 SECRETARY TORRES: We just polled the
21 AAAs.

22 REPRESENTATIVE GABLER: Okay. I
23 appreciate that.

24 The last question I wanted to ask was
25 just a little bit of a discussion of the use of

1 Lottery Funds. We had the Lottery and Revenue
2 folks in here earlier today. And there has been
3 a trend where we've been seeing an increased
4 amount of money from the Lottery Fund going to
5 the Department of General Services. I was just
6 wondering if you could comment on that?

7 Is that something that should be a
8 cause for concern? Certainly we heard this
9 morning, benefits older Pennsylvanians. I mean,
10 that's the tag line of the Lottery, but if we're
11 seeing more and more of that money going to the
12 Department of Human Services, is that undermining
13 the funding support that would be necessary,
14 especially considering the potential changing
15 demographics going forward for the Department of
16 Aging?

17 SECRETARY TORRES: Yeah. I think it's
18 important to remember that the Department of
19 Human Services is serving the same population,
20 and many of them. And they're leveraging Federal
21 dollars, so that's -- that's why those transfers,
22 those decisions are made. You know, we've
23 referenced the Department of Revenue's concerns.
24 As the Department that supports and advocates for
25 older adults, I will say that I'm concerned about

1 the Lottery, going back to the initial question
2 about how do we anticipate the demand for
3 increase and support it. These illegal skill
4 games are a big concern to me right now.

5 Again, because the Department of
6 Revenue's projections are saying that about \$200
7 million has been siphoned off, if it continues,
8 it can go as high at \$600 million. So that to me
9 and the Department is very concerning what the
10 implications of that is moving forward.

11 REPRESENTATIVE GABLER: I appreciate
12 that. So as far as you're concerned, though, the
13 usage of current Lottery funds and the allocation
14 among the departments, does that raise any
15 concern for you at this time?

16 SECRETARY TORRES: Not at this time.

17 REPRESENTATIVE GABLER: Okay. I
18 appreciate it. That's all the questions I have.

19 I will yield back my time,
20 Mr. Chairman.

21 REPRESENTATIVE DUNBAR: Thank you,
22 Representative.

23 And Secretary, the survey you had
24 referenced in regards to the survey that you had
25 of the AAAs, will you share that with the

1 Committee?

2 SECRETARY TORRES: It was an informal
3 polling. It wasn't a survey.

4 REPRESENTATIVE DUNBAR: I'm sorry?

5 SECRETARY TORRES: It wasn't a poll.
6 It was an informal survey.

7 REPRESENTATIVE DUNBAR: You don't have
8 anything in writing then --

9 SECRETARY TORRES: I do not.

10 REPRESENTATIVE DUNBAR: -- to support
11 the testimony?

12 SECRETARY TORRES: I mean, I'll check,
13 but I think it was just an informal poll of the
14 Area Agencies on Aging.

15 You know, some of this came up last
16 year when we talked about the minimum wage. The
17 Area Agencies on Aging contract out some of their
18 services. We don't know what some of the workers
19 are being paid, right. So you have a contract
20 rate and then there's a labor rate. We don't
21 have any access to that detailed information to
22 be able to analyze it at that level.

23 REPRESENTATIVE DUNBAR: Okay. Thank
24 you.

25 We will move on to Representative

1 Krueger.

2 REPRESENTATIVE KRUEGER: Thank you,
3 Mr. Chairman.

4 Thank you, Secretary, for joining us
5 here today.

6 So I know that the Lottery Fund is the
7 primary revenue source for your programming. I'm
8 conscious of that every time a senior comes into
9 my office who needs help with their PACE or
10 PACENET application to get lower cost
11 prescriptions, or when my staff sit with them to
12 help them fill out their Property Tax Rent Rebate
13 application.

14 We heard from the folks in the Lottery
15 earlier today in an earlier panel, and I'm
16 wondering, is your Agency concerned at all about
17 the loss of revenue at all in the Lottery Fund
18 due to skilled games here in Pennsylvania.

19 SECRETARY TORRES: We're extremely
20 concerned, so the answer is yes. Again, it's
21 concerning when I hear the kind of projections
22 that are being talked about. I know last year
23 was about \$100 million. This year is about \$200
24 million, because these machines are showing up at
25 lottery retailers. And I've seen pictures where

1 the advertising is somewhat deceptive, to say
2 that they're, you know, to give the impression
3 that they're sanctioned by the Lottery. I've
4 seen pictures of what looked like mini casinos
5 with these machines at strip malls.

6 So it's concerning to at least, you
7 know, understand or consider how this is going to
8 compromise Lottery revenues, and by extension,
9 services that we provide to older adults.

10 REPRESENTATIVE KRUEGER: And I just
11 want to make sure I'm clear on your numbers. You
12 said this year \$100 million, next year \$200
13 million. Does that mean loss of revenue for your
14 department or loss of --

15 SECRETARY TORRES: No, loss of --
16 those figures were Department of Revenue figures
17 based on what they are projecting they have lost
18 as a result of the skilled games.

19 REPRESENTATIVE KRUEGER: Okay.

20 SECRETARY TORRES: Versus other
21 individuals playing other sanctioned games.

22 REPRESENTATIVE KRUEGER: So \$100
23 million, next year, \$200 million. And we know,
24 again, that our Lottery Fund here in Pennsylvania
25 is the most important source of funding for

1 programs to support our seniors.

2 what could you do with that \$100
3 million? what would be top of the priority list
4 for seniors?

5 what's the unmet need that you can't
6 fill now that would be first on the list if that
7 revenue came back?

8 SECRETARY TORRES: It would be home
9 and community-based services. The Governor has
10 proposed \$8.1 million to address a waiting list
11 problem that we have. Certainly, if we had more
12 resources, we would -- we would apply and
13 prioritize them and make sure that where there's
14 a greatest need, we would allocate those dollars
15 to it.

16 REPRESENTATIVE KRUEGER: Thank you.
17 And I've again seen, firsthand, seniors in my
18 district who have been on the waiting list or who
19 made just a couple dollars too much in income to
20 qualify for those important services, folks who
21 wanted to stay in their home, their families
22 wanted to support them to stay in their home, and
23 the care was just not there for them because of
24 the waiting list.

25 SECRETARY TORRES: Yeah.

1 REPRESENTATIVE KRUEGER: Thank you so
2 much for your answers.

3 REPRESENTATIVE DUNBAR: Thank you,
4 Representative.

5 Next will be Representative Grove.

6 REPRESENTATIVE GROVE: Thank you.

7 Mr. Secretary, good to see you.

8 SECRETARY TORRES: Good to see you.

9 REPRESENTATIVE GROVE: On page seven
10 of your Agency's budget book, Federal funds,
11 between 2018-2019 actual and what you project in
12 your budget. It's a little over a \$50-million
13 loss in Federal funds. Most of that is obviously
14 shifting over to CHC for medical assistance,
15 attendant care. But I notice your medical
16 assistance administration was currently \$2.272
17 million, dropping to \$888,000.

18 Why was there a loss of that Federal
19 dollars to support your GGO line?

20 SECRETARY TORRES: Yeah, it's the same
21 reason, for CHC.

22 REPRESENTATIVE GROVE: So you're
23 shifting that cost over to the Department of
24 Human Services?

25 SECRETARY TORRES: That's correct.

1 REPRESENTATIVE GROVE: So are your
2 employees being shifted over to DHS, as well?

3 SECRETARY TORRES: No, they're not.

4 REPRESENTATIVE GROVE: What will they
5 be doing?

6 SECRETARY TORRES: Do you want to take
7 that one?

8 I think these are dollars that were
9 allocated for the Area Agencies on Aging, right,
10 to perform all of these services? Yeah.

11 So these are dollars that were
12 allocated to the Area Agencies on Aging to
13 perform some of the functions that are now
14 completely over with Department of Human
15 Services.

16 REPRESENTATIVE GROVE: So medical
17 assistance, the administration cost, specifically
18 administration, correct?

19 SECRETARY TORRES: Correct.

20 REPRESENTATIVE GROVE: Then pays for
21 employees, correct? That's matching funds for
22 employees?

23 SECRETARY TORRES: That I'd have --
24 let me -- I'll have to get back to you on that
25 with more details, just to make sure I'm giving

1 you an accurate answer there.

2 REPRESENTATIVE GROVE: Okay. Because
3 if you still have employees that are helping
4 seniors, you should be able to piggy-up the
5 Federal match. So when I go back and look at
6 your GGO line item, Lottery, your \$1.2 million
7 increase, or 14 percent increase year over year
8 for your GGO line, is that due to the loss of
9 those Federal dollars?

10 Is that a connection there?

11 SECRETARY TORRES: No, that was just
12 salaries and benefits back to the GGO.

13 REPRESENTATIVE GROVE: Okay. That has
14 nothing to do with loss of Federal funds?

15 SECRETARY TORRES: Yeah. Let me --
16 I'll have to get back to you on that.

17 REPRESENTATIVE GROVE: Okay. And if
18 you could provide a projection of those contracts
19 and the impact of those contracts for the life of
20 the contracts, where you're looking at that data,
21 that that would be helpful, project it out for
22 the life of that contract. Because obviously, we
23 have finite resources in the Lottery Fund. If
24 I'm not mistaken, our balance at the end of the
25 year is getting thinner and thinner. So if we're

1 going to weigh between cost of operation and
2 helping seniors, we need to make sure we're
3 putting money into helping the seniors move
4 forward.

5 Thank you.

6 SECRETARY TORRES: Okay.

7 REPRESENTATIVE DUNBAR: Thank you,
8 Representative.

9 Next will be Representative McCarter.

10 REPRESENTATIVE MCCARTER: Thank you
11 very much, Mr. Secretary. And thank you all for
12 being here today. There are a lot of different
13 issues here. So let me try to focus in on a
14 couple real quickly. Based on your work group
15 studies, what are your recommendations on how to
16 support grandparents raising grandchildren? It
17 is becoming more of an issue in Pennsylvania
18 every year.

19 SECRETARY TORRES: Well, we had --
20 last year, we had three meetings with the Grand
21 Families Raising Grandchildren work Group. The
22 first meeting centered around health and human
23 services and the challenges that they were
24 facing. The second had to do with legal. And
25 the third had to do with education and child

1 care.

2 Many of the grandparents struggled, in
3 terms of knowing where to go for resources, so
4 just basically some of what we've talked about,
5 making sure that older adults have the right
6 information. And in the case of grandparents,
7 trying to get -- trying to almost have a one-stop
8 shop for resources is important.

9 REPRESENTATIVE MCCARTER: Are there
10 specific programs in place at the present moment?

11 SECRETARY TORRES: well, we put
12 together -- connecting program at Department of
13 Human Services. we're building a website. In
14 terms of the legal issues that came up, that was
15 very challenging because in the courts,
16 obviously, they prioritize reuniting the family,
17 right, parent and child, but a lot of these
18 grandparents knew that there was still problems
19 with their son and daughter, in terms of their
20 addiction and the safety of their grandchild.

21 So trying to balance out the interests
22 of the grandparents with the courts' priority to
23 reunify families has been a struggle. I'm
24 pleased with the advocacy work that we've done at
25 the Department of Aging, because again, as a

1 member of the Advisory Council of Elder Justice,
2 a lot of these issues were brought before that
3 council and before Supreme Court Justice,
4 Superior Court Judge, family judge.

5 So we've had a lot of judicial
6 engagement. And I can tell you from just my own
7 involvement in that council, every meeting that
8 we've had since we met on the legal issues, every
9 agenda, we talk about grand families and some of
10 the things. There's training for judges that are
11 being rolled out to help them understand some of
12 the issues. And the Department of Education is
13 doing a lot of trauma and informed training to
14 help teachers understand how to deal with those
15 circumstances.

16 REPRESENTATIVE MCCARTER: I want to
17 thank you for those efforts. Let me spin you
18 another one real quickly here. You know, based
19 on our experiences the last few years, as well,
20 we've seen an increase in influenza rates,
21 especially, it seems like, impacts for seniors
22 and where influenza tends to hit in that area.
23 And now, we're facing the potential of the
24 coronavirus impacts, as well, which seems to hit
25 seniors, also.

1 Are there changes within the
2 Department that you're working with -- hopefully
3 with the Department of Health and others -- to
4 look at these issues to see if, in fact, there's
5 something that we can do to encourage more
6 vaccinations, as an example, for seniors where we
7 see the percentage rate is less than 50 percent
8 in some areas of vaccinations against influenza,
9 or preparing and so on to make sure that we do
10 have some supports in place if a novel
11 coronavirus does hit the area here?

12 SECRETARY TORRES: Yeah. We do have
13 an education and outreach section that does a lot
14 of that work in terms of health and wellness.
15 Any time that we can leverage what other
16 departments are doing, whether it's Department of
17 Health or Department of Banking and Security or
18 Department of Revenue, for example, publishing
19 something about a scam against older adults, we
20 try to leverage that information and quickly push
21 it out.

22 I'm meeting with Secretary Levine on a
23 quarterly basis. So that's an opportunity for us
24 to get together and say, how can we coordinate
25 our services to make sure that we're addressing

1 the needs of older adults, especially in the area
2 of public health because that important.

3 REPRESENTATIVE MCCARTER: It's a very
4 important one, I think for all of us. Okay.
5 Thank you very much.

6 SECRETARY TORRES: Thank you.

7 REPRESENTATIVE DUNBAR: Thank you,
8 Representative.

9 Next will be Represent Comitta.

10 REPRESENTATIVE COMITTA: Thank you
11 very much. And welcome, Mr. Secretary, and
12 Directors.

13 SECRETARY TORRES: Thank you.

14 REPRESENTATIVE COMITTA: I want to
15 pivot back to PACE and PACENET. I was trying to
16 figure out how many years ago I helped my father
17 sign up for PACE and how delighted I was to be
18 able to help him and how pleased he was to
19 qualify for this wonderful program. And now
20 today, of course, as a House member, I have many
21 of my constituents coming in to ask for help with
22 PACE and PACENET.

23 So one of the things that I'm struck
24 by is seeing that the proposed budget expects
25 seniors receiving pharmaceutical assistance, PACE

1 and PACENET, is going to be declining
2 significantly, especially with the PACE. The
3 decline is attributed largely to the fact that
4 income eligible eligibility limits are fixed by
5 statute. So the PACE income limits were last
6 increased 17 years ago. That was in 2003.
7 PACENET increased just recently in 2018.

8 So I'm looking at the charts and so on
9 and I'm wondering, is there a trend that the
10 Department wishes to move away from PACE and into
11 PACENET for particular reasons, or do you think
12 that PACE is very important and that we need to
13 revisit the eligibility limits for that important
14 program? And how do you see this playing out
15 over the future, how can the legislature help?

16 DIRECTOR SNEDDEN: well, you're spot
17 on with respect to the enrollment trends that
18 you're seeing. You know, PACENET was created
19 back in 1996, so we're talking roughly a quarter
20 of a century ago. And the idea at the time,
21 particularly here in the legislature, was to
22 create a benefit that would help people in higher
23 income brackets, but have them pay more out of
24 pocket for their medications. And you know, that
25 worked all too well initially.

1 Here we are 25 years later. When I
2 look at the difference between the PACE and the
3 PACENET benefit, essentially, the only difference
4 is the higher co-pay. In PACE, it's \$6 and \$9
5 for generic brand; and in PACENET, it's \$8 and
6 \$15. The PACENET co-payments have not changed
7 throughout the history of that benefit, but the
8 bottom line is that people in both benefits get,
9 without a doubt, the most generous pharmacy
10 benefit in the United States, if not the world.

11 That wasn't true in '84 when we set up
12 the program, but it certainly is today, not
13 because we've enriched the benefit more, but
14 because other benefits have been dramatically
15 reduced, in terms of what people had to pay for
16 the medications. So when I look today at PACE
17 and PACENET, and I look to see what people have
18 to pay out of pocket, there's basically no
19 difference.

20 People in PACE pay about eight to nine
21 percent of their annual prescription costs;
22 people in PACENET pay 10, roughly \$10 -- or 10
23 percent annual drug costs. The big difference in
24 PACENET today is that if you are in Part D, or if
25 you're eligible for Part D, you're going to have

1 to pay a monthly premium. But even with that,
2 the out-of-pocket costs are pretty similar to one
3 another.

4 So looking -- you know, looking
5 forward, it's very clear, not unlike other
6 benefits that the Department has, where you see
7 these waiting lists of people, there are people
8 who are just above the current PACENET criteria,
9 in terms of income qualification, who need help
10 very badly. And so the question is where do you
11 get the money to add to the benefit?

12 And you can do that one of two ways.
13 You can either appropriate more money, if you can
14 find it, or you can do things to make the current
15 benefit more efficient in terms of applying
16 people for Medicare Part D who are not currently
17 in the benefit. That saves a lot of money.

18 REPRESENTATIVE COMITTA: well, thank
19 you. This 25-year program has helped my father
20 and many, many of our constituents, and I -- I
21 hope that it continues for another century.

22 DIRECTOR SNEDDEN: well, thank you.
23 We do, too.

24 REPRESENTATIVE DUNBAR: Thank you,
25 Representative.

1 Next will be Representative Heffley.

2 REPRESENTATIVE HEFFLEY: Thank you.

3 Just a quick question, a follow-up to
4 Representative Culver's questions. So the red
5 score -- go back to this red score. So in the
6 questioning, you had stated that there were
7 several AAAs that received multiple
8 year-after-year red scores.

9 SECRETARY TORRES: Not necessarily
10 year after year. It's just they get a few months
11 to remediate, and then we go back to our
12 monitoring.

13 REPRESENTATIVE HEFFLEY: So who hires
14 the -- are the counties hiring those individuals
15 that work there? If they're getting -- I would
16 think if they're getting multiple red scores --
17 these are people that are -- the senior citizens
18 that have worked their whole lives that are
19 waiting for services and may die waiting. And if
20 we're providing these opportunities for this --
21 these services to be provided and we're relying
22 on those individuals to make sure that these
23 services that we're giving them the money to
24 provide for are being done, if they're not being
25 done, who hires these people, and what does it

1 take to get rid of somebody if -- I mean, if they
2 got one red flag and then they get another one,
3 at what point do we say, hey, look, we've got to
4 get somebody else in here to do the job?

5 SECRETARY TORRES: Yep. Well, hiring
6 decisions, whether it's at the county or
7 non-profit level is at the local level.

8 REPRESENTATIVE HEFFLEY: So if it's at
9 the county or a non-profit level and if those
10 individuals -- at what point does your agency
11 either withhold funding and say we're not --
12 you're no longer going to receive this funding,
13 get somebody else to do it? Because like I said,
14 at the end of the day, the citizens of the
15 Commonwealth are waiting for these services, and
16 these people that aren't doing a good job are
17 still getting paid, correct?

18 SECRETARY TORRES: That's correct.

19 REPRESENTATIVE HEFFLEY: So I'm just
20 like what is the procedure to get the right
21 people in the right position? Like, where's the
22 accountability? Is it at the County level? If
23 the county doesn't want to make that decision,
24 the county doesn't want to get rid of them, does
25 your Department look at withholding funding?

1 SECRETARY TORRES: well, that's an
2 option under our cooperative agreement.

3 REPRESENTATIVE HEFFLEY: Have you ever
4 done that?

5 SECRETARY TORRES: Not that I'm aware
6 of.

7 REPRESENTATIVE HEFFLEY: Yet we
8 repeatedly have some of these folks --

9 SECRETARY TORRES: I mean, that's
10 something that we're looking at, Representative,
11 in terms of, you know, if we come to a conclusion
12 that an Area Agency on Aging cannot provide those
13 services, then what -- you know, how do we
14 address?

15 We had a situation, for example, in a
16 very small county, where a protective services
17 supervisor and protective services investigator
18 quit abruptly. One retired, the other one
19 resigned. So in those cases, we -- you know, the
20 other Area Agencies on Aging help to support, as
21 well as the Department we came in. But those are
22 -- those are issues that, you know, as they
23 become -- we become aware of them, we're helping
24 to remedy and get them back on the right track.

25 REPRESENTATIVE HEFFLEY: It's not a

1 perfect world.

2 SECRETARY TORRES: Right.

3 REPRESENTATIVE HEFFLEY: And there's
4 agencies that are better than others, but when
5 you see repeated people that are getting these --
6 the red score, then how do we address it?

7 And I commend the folks that do this
8 work. I mean, it's a -- it's an incredible labor
9 of love. And everybody that I've worked with at
10 the Area Agency on Aging in Carbon County really
11 has a passion for what they're doing, but if
12 people are falling through the cracks and
13 residents, they have no other voice but to -- but
14 for us, right, to make sure that the folks that
15 we're giving the resources to provide these
16 services are being done.

17 So I just wanted to ensure that we're
18 definitely aggressively, aggressively following
19 up and assuring that these services that we're
20 paying for are being provided.

21 Thank you.

22 SECRETARY TORRES: We are. And we're
23 working with the Association, and again, the
24 leadership. I mean, these are -- these have been
25 ongoing discussions in terms of how to improve

1 and strengthen our network.

2 REPRESENTATIVE DUNBAR: Thank you,
3 Representative.

4 In addition to our Appropriations
5 Committee members, we also allow our related
6 standing committee chairmen to ask some
7 questions. So with that, I will turn it over to
8 our newest chairman, Chairman Day of the Aging
9 Committee.

10 REPRESENTATIVE DAY: Thank you,
11 Chairman.

12 How are you doing, Secretary? Good to
13 see you.

14 SECRETARY TORRES: Good to see you,
15 Chairman.

16 REPRESENTATIVE DAY: I first wanted to
17 start off with concerns of the Committee. You
18 know, you had mentioned about the Lottery Fund,
19 there were some questions about that. That's a
20 concern of our Committee, as well, and the
21 constituencies there, increasing more revenue,
22 less gaming siphoning, I heard you talk about is
23 important. And also, some of our members talked
24 about the administration transfers also. So
25 those are all committee concerns and issues that

1 we want to keep our eyes on.

2 The second thing is OAPSA. We've
3 talked about that. We've had meetings about
4 that. And the administration is currently taking
5 a position that would cost employers a
6 significant amount of dollars. And that cost is
7 what is the basis for certain reimbursements and
8 things like that. So our Committee is working
9 on, as you know, a compromise to that, and I hope
10 you would work with us and help us with the
11 administration to come along a little bit.
12 They're staying pretty steadfast and it's going
13 to cost a lot of the stakeholders a lot of
14 dollars that I think will come back into the
15 budget and cost us more money, as well.

16 The other thing is, I'd like your
17 comments on the Aging block grant and the options
18 program. You know, I think in my time in my
19 first two months on the job here, I've really
20 come to the conclusion that, you know, older
21 adults being able to receive services in their
22 home should be more cost effective than in
23 long-term services. So when we have people that
24 are available for long-term services, wherever
25 you can, you know, guide towards keeping the

1 people in their homes, we found that to be much
2 more economical, and therefore, economical on our
3 budget.

4 I was curious, your comments on that
5 in general, the Aging block grant, but also, why
6 do you think the options waiting list is growing?

7 SECRETARY TORRES: Okay. Well, first,
8 let me thank you for bringing up OAPSA. You
9 certainly have our commitment to work with you.
10 It's an extreme priority for us because we're
11 trying to address the court decision that
12 implicated the employment ban issue. And also,
13 we have an FBI audit that will be coming up in a
14 few months. And part of what we're trying to do
15 is address language that we're required to have
16 as part of what we know the FBI will come back.

17 So I certainly look forward and hope
18 that we can get OAPSA passed this session. With
19 regard to the block grant, I agree with you
20 again. I mean, keeping older adults in their
21 home as long as possible benefits everyone. The
22 overwhelming majority want to stay in their home,
23 which is why the Governor is proposing \$8.1
24 million to address a waiting list that has grown
25 over time. It's currently at about 4,100; \$8.1

1 million, we project, would help to address the
2 needs of 1,700.

3 And with the 4,100 that I mentioned,
4 there's 1,800 that are receiving some services.
5 So it isn't like there's a list of 4,100 and
6 they're receiving no services. So again, these
7 are revisions that are made at the local level,
8 but we, you know, we're looking to address that
9 growing concern with the waiting list for
10 services.

11 REPRESENTATIVE DAY: Thank you for
12 those answers. I'd also like you to advise the
13 Appropriations Committee on maybe a waiting list
14 and other places where small amounts of dollars
15 can have the largest impact, kind of bringing
16 together a lot of the testimony and questions
17 today.

18 where do you think the smallest amount
19 of dollars can make the biggest effect? And I
20 don't want to put you on the spot. You're
21 welcome to send an e-mail later, if you want to,
22 but make sure you get that to our --

23 SECRETARY TORRES: well, again, when
24 we looked at the options program, you know, that
25 -- keeping individuals in their homes, as you

1 said, and supporting them before they become
2 nursing facility eligible, I think, helps, helps
3 State government.

4 REPRESENTATIVE DAY: Thank you. And
5 if you come to other ideas and thoughts, that's
6 the core, I think, of how we work together and
7 how we use the benefit of your experience to have
8 the most bang for the taxpayer dollar.

9 The final thing I have here is the
10 Governor budget -- Governor Wolf's budget -- did
11 I say that right? Yeah. It has \$1.2 million and
12 it creates a direct care worker training program.
13 And I'd like you to talk about that a little bit,
14 but it's my understanding that he chose in the
15 budget to direct those dollars to family members
16 being paid as care takers, rather than facilities
17 caring for the elderly.

18 Could you comment on why that decision
19 was made? Is it more cost effective? Is it
20 safer as far as physical, emotional and financial
21 protection, or is it just cost effective or are
22 there other reasons?

23 SECRETARY TORRES: We felt that that
24 training participant directive workers is a
25 start. So that's not the end of the

1 conversation. There are other conversations
2 going on. But in terms of making sure that
3 participants who are hiring direct care workers
4 in that model at least can be assured that they
5 have that base level of training and can be
6 comfortable with how they take care of their
7 loved ones.

8 REPRESENTATIVE DAY: Mr. Secretary,
9 thank you for your answers to those questions. I
10 appreciate it, and I look forward to working with
11 you and your administration members moving
12 forward. Thanks.

13 SECRETARY TORRES: Thank you,
14 Mr. Chairman.

15 REPRESENTATIVE DUNBAR: Thank you,
16 Chairman Day.

17 And we will finish with the
18 Representative from my second favorite district,
19 the district I was born and raised in,
20 Representative Gainey.

21 REPRESENTATIVE DAVIS: Davis.

22 REPRESENTATIVE DUNBAR: Oh, they gave
23 me Gainey on my list.

24 REPRESENTATIVE DAVIS: Well, I
25 appreciate it.

1 REPRESENTATIVE DUNBAR: Well, he's my
2 third favorite district because I worked in his
3 district for quite a while.

4 REPRESENTATIVE DAVIS: I hope to be as
5 good looking as Representative Gainey one day.

6 REPRESENTATIVE DUNBAR: You can only
7 hope.

8 REPRESENTATIVE DAVIS: We can only
9 hope.

10 So thank you. And I'll be quick. I
11 know it's late, but I just had a question about
12 direct care training. I saw the Governor put
13 \$1.2 million to establish a new direct care
14 training program. I've introduced legislation to
15 create -- or I'm working on legislation -- to
16 create wage boards for direct care workers. And
17 it seems to me one of the biggest barriers is
18 what we pay direct care workers to get them, in
19 terms of getting them into that facility or that
20 skill and retaining them.

21 What work is -- is the Department of
22 Aging doing any work to help address that issue?
23 I know you guys sit on the Pennsylvania Work
24 Force Development Board, or you have a seat on
25 that through the Department of Labor & Industry.

1 Are you guys working to address that
2 issue at all.

3 SECRETARY TORRES: Well, again, the
4 \$1.2 million is to support -- to improve the
5 training of the direct care workers. We -- we've
6 worked with -- the Long Term Care Council came
7 out with their blueprint. And basically, it's to
8 address a lot of issues that you talked about.

9 How do we stabilize salaries? How do
10 we improve training? How do we utilize
11 technology to -- how do we create a career ladder
12 so that, you know, individuals who start off at
13 the lower rung can move their way up and see it
14 as a potential career move. So a lot of those
15 conversations have taken place with stakeholders
16 that represent long-term care industries that are
17 part of our Long Term Care Council. So we
18 continue to have a lot of those discussions to
19 see how we can improve things.

20 REPRESENTATIVE DAVIS: Thank you. And
21 it's just a critical industry. I had a
22 grandmother, who had direct care workers who
23 helped her transition at the end of her life.
24 And it's a very important function that millions
25 of Pennsylvanians depend on. So any efforts to

1 help address that would be greatly appreciated.

2 Appreciated. And with that, thank
3 you, Mr. Chairman.

4 REPRESENTATIVE DUNBAR: Thank you,
5 Representative Davis. And you can introduce
6 yourself to Representative Bradford later, so he
7 knows who you are. Just kidding.

8 With that being said, Secretary, thank
9 you for your time.

10 SECRETARY TORRES: Thank you.

11 REPRESENTATIVE DUNBAR: And to all the
12 members, thank you for adhering to our time
13 limit.

14 Chairman Bradford, did you have
15 anything to add? Very good.

16 Thank you. For all the members, we
17 are adjourned until 10:00 tomorrow for the
18 Department of State.

19 Thank you.

20 SECRETARY TORRES: Thank you.

21 (Whereupon, the hearing concluded.)

22

23

24

25

C E R T I F I C A T E

I hereby certify that the proceedings are contained fully and accurately in the notes taken by me on the within proceedings and that this is a correct transcript of the same.

Tracy L. Markle
Tracy L Markle, Court Reporter